This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEME	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
for Seconda	ry Transmissions by	DATE RECEIVED	AMOUNT	– coplicsoa@copyright.gov
General instru	<i>ms (Short Form)</i> ctions are located of this workbook	2-26-21	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150	
Α	ACCOUNTING PERIOD COVERED E	BY THIS STATEMENT: (YY	YY/(Period))	
	2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20202	Barcode Data Filing Period (optiona	I - see instructions)	
Accounting Period				
B Owner	the subsidiary, not that of the parent corpo List any other name or names under which	the owner conducts the business of th ccounting period, only the owner on th ent covering the entire accounting per	ne last day of the accounting period should sul iod.	
	LEGAL NAME OF OWNER/MAILING			
	UTELCO, LLC			
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)		
	MAILING ADDRESS OF OWNER OF C	CABLE SYSTEM		
	(Number, street, rural route, apartment, or suite no Madison, WI 53717 (City, town, state, zip)	umber)		
С	INSTRUCTIONS: In line 1, give any busing names already appear in space B. In line 2			
System	1 IDENTIFICATION OF CABLE SYSTEM: TDS Telecom, Inc.	, g	- 5	<u></u>
	MAILING ADDRESS OF CABLE SYSTEM:			
	2 (Number, street, rural route, apartment, or suite no	imber)		
	(City, town, state, zip code)			

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM			
Name	UTELCO, LLC	634			
D	Instructions: List each separate community served by the cable system. A "conseparate and distinct community or municipal entity (including unincorporate unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list community." Please use it as the first community on all future filings.	ed communities within unincorporated areas and including single, discr st will serve as a form of system identification hereafter known as the "f			
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses bel city.				
	CITY OR TOWN	OT ATE			
First	Monroe	STATE WI			
Community					
ld Rows as Necessary					

								FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						SYS	ا TEM 634
	UTELCO, LLC								0344
_	SECONDARY TRANSMISSION	I SERVICE: SU	BSCR	IBERS AND RA	TES				
E	In General: The information in s	•		0					
Secondary	system, that is, the retransmissi about other services (including)								
Transmission	last day of the accounting period		'		,		LI IOSE EXIS		
Service: Sub-	Number of Subscribers: Bot	h blocks in spa	ce E ca	all for the number	er of subse	cribers to the ca	-		
scribers and	down by categories of secondar					•			
Rates	each category by counting the n separately for the particular serv			•••		•	0	s charged	
	Rate: Give the standard rate of							rge and the	
	unit in which it is generally billed	· · ·		,	ny standa	rd rate variatior	ns within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				ion of oor	andon (transmi		ice that apple	
	systems most commonly provid								
	that applies to your system. Not								
	categories, that person or entity					•••	•		
	subscriber who pays extra for ca					d in the count u	nder "Serv	ice to the	
	first set" and would be counted of Block 2: If your cable system					service that ar	e different	from those	
	printed in block 1 (for example,	•							
	with the number of subscribers a	and rates, in the	e right-l	hand block. A tv	vo- or thre	e-word descript	ion of the	service is	
	sufficient.	OCK 1					BLOC	K 2	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIBE	RS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RA
	Service to first set		1,332	\$25/mo					
	Service to additional set(s)		1,332	\$25/110					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		14	\$55.54/mo					
	Converter								
	Residential	•	1,332	\$6/Mo.					
	Non-residential								
	SERVICES OTHER THAN SEC In General: Space F calls for ra					ll vour cable sv	stem's ser	vices that were	
F	not covered in space E, that is,	•			•	• •			
	service for a single fee. There a								
Services Other Than	furnished at cost or (2) services								
Secondary	amount of the charge and the un enter only the letters "PP" in the		usually	/ billed. If any fa	lites are cr	larged on a var	lable per-	orogram basis,	
ransmissions:	Block 1: Give the standard ra		he cabl	le system for ea	ch of the	applicable serv	ices listed		
Rates	Block 2: List any services that	• •			-	-	•		
	listed in block 1 and for which a brief (two- or three-word) descrip				shed. List	these other sei	vices in th	ie form of a	
		BLO RATE		GORY OF SER	/ICE	RATE	CATEG	BLOCK 2 ORY OF SERVICE	RA
	CATEGORY OF SERVICE			ation: Non-resi		TOTE	ONTEC		100
	CATEGORY OF SERVICE Continuing Services:	INATE	instan						
	CATEGORY OF SERVICE Continuing Services: • Pay cable	14-19.99/mo		otel, hotel					
	Continuing Services:		• Mo	otel, hotel mmercial		\$0 - \$49.95			
	Continuing Services: • Pay cable		• Mc • Co			\$0 - \$49.95			
	Continuing Services: • Pay cable • Pay cable—add'l channel		• Mo • Co • Pa	mmercial	annel	\$0 - \$49.95			
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection		• Mo • Co • Pa • Pa	mmercial y cable	annel	\$0 - \$49.95			
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection		• Mo • Co • Pa • Pa • Fin	mmercial y cable y cable-add'l ch	annel	\$0 - \$49.95			
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	14-19.99/mo	• Mo • Co • Pa • Pa • Fin • Bu	mmercial y cable y cable-add'l ch e protection	annel	\$0 - \$49.95			
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	14-19.99/mo \$0-\$49.95	• Mo • Co • Pa • Pa • Firi • Bu Other • Re	mmercial y cable y cable-add'l ch e protection rglar protection services: connect	annel	\$0 - \$49.95 			
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s)	14-19.99/mo \$0-\$49.95	• Mc • Co • Pa • Pa • Fin • Bu • Bu • Re • Dis	mmercial y cable y cable-add'l ch e protection rglar protection services: connect sconnect	annel	\$0-\$25			
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	14-19.99/mo \$0-\$49.95	• Mc • Co • Pa • Pa • Fin • Bu • Bu • Re • Dis	mmercial y cable y cable-add'l ch e protection rglar protection services: connect	annel				

Name	LEGAL NAME OF OWNER C	F CABLE SYSTEM:		SYSTE
Name	UTELCO, LLC			6
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ansmitters: elevision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Station basis under specific FCC r	entify every television station (including tr em during the accounting period, <i>except</i> (in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61) as explained in the next paragraph. s: With respect to any distant stations car rules, regulations, or authorizations: re in space G—but do list it in space I (the a substitute basis	 stations carried only on a part-tile carriage of certain network progra (e)(2) and (4))]; and (2) certain statistical rried by your cable system on a sub- 	ime basis under ams [sections ations carried on a bstitute program
	List the station here, and basis. For further informati Column 1: List each static multicast stream associate "WETA-2" as the same on	also in space I, if the station was carried ion concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pro- ed with a station according to its over-the-	see page (v) of the general instruct ogram services such as HBO, ESF air designation. For example, repo	tions. PN, etc. Identify each ort multistream
	Column 3: Indicate in each educational station, by enter	VRC is channel 4 in Washington, D.C. h case whether the station is a network st ering the letter "N" (for network), "N-M" (fo), "E" (for noncommercial educational), or	or network multicast), "I" (for indep	endent), "I-M"
	For the meaning of these t Column 4: Give the location	erms, see page (iv) of the general instruc on of each station. For U.S. stations, list th adian stations, if any, give the name of the	ctions in the paper SA1-2 form. the community to which the station	is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	wкow	27.1	Ν	Madison, WI
	WKOW-DT2	27.2	N-M	Madison, WI
ows as Necessary	WKOW-DT3	27.3	N-M	Madison, WI
	WKOW-DT4	27.4	N-M	Madison, WI
	WKOW-DT5	27.5	N-M	Madison, WI
			N	Madison, WI
	WISC	3.1		
	WISC WISC-DT2	3.1	N-M	Madison, WI
	WISC-DT2	3.2	N-M	Madison, WI
	WISC-DT2 WISC-DT3	3.2 3.3	N-M N-M	Madison, WI Madison, WI
	WISC-DT2 WISC-DT3 WMSN	3.2 3.3 47.1	N-M N-M N	Madison, WI Madison, WI Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2	3.2 3.3 47.1 47.2	N-M N-M N N-M	Madison, WI Madison, WI Madison, WI Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3	3.2 3.3 47.1 47.2 47.3	N-M N-M N N-M N-M	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4	3.2 3.3 47.1 47.2 47.3 47.4	N-M N-M N-M N-M N-M N-M	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV	3.2 3.3 47.1 47.2 47.3 47.4 15.1	N-M N-M N-M N-M N-M N-M N	Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV WMTV-DT2	3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2	N-M N-M N-M N-M N-M N-M N-M	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV WMTV-DT2 WMTV-DT3	3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3	N-M N-M N-M N-M N-M N-M N-M N-M	Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV WMTV-DT2 WMTV-DT3 WMTV-DT4	3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5	N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV WMTV-DT2 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT5 WHA	3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4	N-M N-M N-M N-M N-M N-M N-M N-M N-M	Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5 WHA WHA-DT2	3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 21.1 21.2	N-M E E-M	Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV WMTV-DT2 WMTV-DT3 WMTV-DT3 WMTV-DT4 WMTV-DT5 WHA WHA-DT2 WHA-DT3	3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 21.1 21.2 21.3	N-M N-M N-M N-M N-M N-M N-M N-M N-M E E-M E-M	Madison, WI Madison, WI
	WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4 WMTV-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5 WHA WHA-DT2	3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 15.5 21.1 21.2	N-M E E-M	Madison, WI

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	UTELCO, LLC			634
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channel	also in space I, if the station was carried on concerning substitute basis stations, s o's call sign. <i>Do not</i> report origination pr d with a station according to its over-the-	(1) stations carried only on a part-time e carriage of certain network program I (e)(2) and (4))]; and (2) certain station rried by your cable system on a substi- e Special Statement and Program Log both on a substitute basis and also or see page (v) of the general instruction rogram services such as HBO, ESPN, -air designation. For example, report in	e basis under s [sections ns carried on a itute program g)—if the n some other is. , etc. Identify each multistream
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), or rms, see page (iv) of the general instruct n of each station. For U.S. stations, list the dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is I	dent), "I-M" al multicast). licensed by the
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), or rms, see page (iv) of the general instruct n of each station. For U.S. stations, list t	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is I	dent), "I-M" al multicast). licensed by the
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Canad	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), ou rms, see page (iv) of the general instruct n of each station. For U.S. stations, list to dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is l e community with which the station is	dent), "I-M" al multicast). licensed by the identified.
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Canad	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), ou rms, see page (iv) of the general instruct n of each station. For U.S. stations, list to dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is l e community with which the station is	dent), "I-M" al multicast). licensed by the identified.
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Canad	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), ou rms, see page (iv) of the general instruct n of each station. For U.S. stations, list to dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is l e community with which the station is	dent), "I-M" al multicast). licensed by the identified.
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Canad	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), ou rms, see page (iv) of the general instruct n of each station. For U.S. stations, list to dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is l e community with which the station is	dent), "I-M" al multicast). licensed by the identified.
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Canad	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), ou rms, see page (iv) of the general instruct n of each station. For U.S. stations, list to dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is l e community with which the station is	dent), "I-M" al multicast). licensed by the identified.
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Canad	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), ou rms, see page (iv) of the general instruct n of each station. For U.S. stations, list to dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is l e community with which the station is	dent), "I-M" al multicast). licensed by the identified.
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Canad	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), ou rms, see page (iv) of the general instruct n of each station. For U.S. stations, list to dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is l e community with which the station is	dent), "I-M" al multicast). licensed by the identified.
	educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Canad	case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), ou rms, see page (iv) of the general instruct n of each station. For U.S. stations, list to dian stations, if any, give the name of the	or network multicast), "I" (for independ r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station is l e community with which the station is	dent), "I-M" al multicast). licensed by the identified.

EGAL NAME OF		CABLE S	YSTEM:					SYSTEM I 634
	every radio s	tation ca	arried on a separate and discre nerally receivable by your cable				ied on an	н
eceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If signal, indicate t Column 4: G	it is carried by monitoring, to prmation about m. lentify the call tate whether t the radio stati this by placing ive the statior	/ the sys be recei t the Co sign of e he static ion's sign a check h's locati	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. on is AM or FM. nal was electronically processes mark in the "S/D" column. on (the community to which the the community with which the	the system's hea ystem's FM anter his point, see pag ed by the cable sy e station is licens	idend, and (2) nna, during ce e (v) of the ge ystem as a sep ed by the FCC	it can b rtain sta eneral in: parate a	e expected, ted intervals. structions in the. nd discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		3/0	LOOATION OF STATION	UALL SIGN		3/0	LOCATION OF STATION	
1/A								
			·					

Accounting Perio	od: 2020/2					FOR	M SA1-2E. PAGE 5
	LEGAL NAME OF OWNER O	F CABLE SYST	EM:				SYSTEM ID#
Name	UTELCO, LLC						63440
	SUBSTITUTE CARRIAG	E: SPECIA	L STATEMEN	T AND PROGRAM LOG			
Substitute	substitute basis during the	accounting pe	eriod, under spe	<i>ion program,</i> broadcast by a cific present and former FC this log, see page (v) of the	C rules, regul	lations, or authorizations.	For a further
Carriage:	1. SPECIAL STATEMEN	IT CONCER	NING SUBSTI	TUTE CARRIAGE			
Special Statement and	 During the accounting period 	eriod, did you	r cable system	carry, on a substitute basi	s, any nonne	etwork tele <u>vision</u> program	
Program Log	broadcast by a distant st	ation?				YES	×NO
	Note: If your answer is "N	o", leave the	rest of this pag	je blank. If your answer is '	'Yes," you m	ust complete the progra	
	log in block 2.						
	2. LOG OF SUBSTITUT			to line. Line obbroviations	whorever pe	acibla, if their meening i	•
	clear. If you need more sp			te line. Use abbreviations vrows to the tables.	wherever pos	ssible, il their meaning i	5
	period, was broadcast by under certain FCC rules, r Do not use general catego "NBA Basketball: 76ers vs Column 2: If the progra	a distant stat egulations, o pries like "mo s. Bulls." am was broad	ion and that yo r authorizations vies" or "baske dcast live, ente	ision program ("substitute ur cable system substitute s. See page (v) of the gene tball." List specific program r "Yes." Otherwise enter "N	d for the prog eral instruction titles, for ex lo."	gramming of another sta ons for further informatio	ation on.
				sting the substitute progra the community to which the		ensed by the FCC or in	
	the case of Mexican or Ca	anadian static	ns, if any, the	community with which the	station is ide	ntified).	
			when your sys	tem carried the substitute p	orogram. Use	e numerals, with the mo	onth
	first. Example: for May 7 g Column 6: State the tir	•	substitute pro	gram was carried by your o	cable system	. List the times accurate	əly
		•	a program carri	ed by a system from 6:01:	15 p.m. to 6:	28:30 p.m. should be	
	stated as "6:00–6:30 p.m. Column 7: Enter the le		listed program	was substituted for progra	mming that	your system was require	əd
	to delete under FCC rules	and regulation	ons in effect du	Iring the accounting period	; enter the le	tter "P" if the listed prog	
	effect on October 19, 197	0,	our system wa	is permitted to delete unde	r FCC rules	and regulations in	
							1
		SUBSTITUT	E PROGRAM			EN SUBSTITUTE	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		DELETION
	N/A	103 01 110	OVEL DIGIT		AND DAT		
	IN/A						
							·
							·
						_	
						_	
						_	
						_	
			+	+	h		+

Accounting Period:	2020/2	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: UTELCO, LLC	SYSTEM ID# 63440
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmissior (as identified in space E) during the accounting period. For a further explanation of how to compute this amount page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	n service
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,80 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	00
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six accounting period is \$52.00 Line 1. Royalty fee for accounting period	-month
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	
	1. Base amount under statutory formula \$ 263,800.00 2. Enter amount of gross receipts from space K	
	3. Subtract line 2 from line 1	
	4. Enter the amount of gross receipts from space K	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	
	8. Interest charge. Enter the amount from line 4, space Q, page 8	
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
	1. Enter the amount of gross receipts from space K \$ 380,991.08	
	2. Base amount under statutory formula	
	3. Subtract line 2 from line 1	
	4. Multiply line 3 by .01	71.91
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,3	19.00
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	2,490.91
	FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$ 2,4	90.91
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	20.00
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	2,510.91
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Co See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more inf	

Accounting Period:	2020/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: UTELCO, LLC	SYSTEM ID# 63440
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations on which the cable system carried television broadcast stations and nonbroadcast services	22 380
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name Stephanie Weber Telephone	(608) 664-4721
0	Address 525 Junction Rd (Number, street, rural route, apartment, or suite number) Madison, WI 53593 (City, town, state, zip) Email Finance@tdstelecom.com Fax (optional CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
Certification	I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B	; or
	 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as own in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	X /s/ Sharon V. Tisdale Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	
	Typed or printed name: Sharon V. Tisdale Title: Assistant Treasurer (Title of official position held in corporation or partnership)	
	Date: February 26, 2021	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
ELCO, LLC	6344
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below. 	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	0
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessment
	Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Interest Assessment

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.