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

STATEM	ENT OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	Return completed workbook by email to:
for Seconda	ary Transmissions by	DATE RECEIVED	AMOUNT	- coplicsoa@loc.gov
General instru	ems (Short Form) actions are located of this workbook	2/28/22	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED	1		
	2021/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20212	Barcode Data Filing Period (optional	- see instructions)	
Accounting Period		J		
В	Instructions: Give the full legal name of the owner of t title of the subsidiary, not that of the pare		idiary of another corporation, give the full c	orporate
Owner	List any other name or names under whic	ch the owner conducts the business of t	he cable system.	
	If there were different owners during the single statement of account and royalty f		the last day of the accounting period should	submit a
	Check here if this is the system's first filin			10481
	LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM		
	CABLE ONE, INC.			
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFERENT)	
	MAILING ADDRESS OF OWNER OF 210 E. EARLL DRIVE			
	(Number, street, rural route, apartment, or suite n PHOENIX, AZ 85225	umber)		
	(City, town, state, zip) INSTRUCTIONS: In line 1, give any busi	ness or trade names used to ide	ntify the business and operation of th	ne system unless these
С	names already appear in space B. In line			
System	1			
	SPARKLIGHT	 I:		
	2229 Broadway			
	2 (Number, street, rural route, apartment, or suite n INDEPENDENCE, KS 6735 (City, town, state, zp code)			
	(ony, 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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Humo	CABLE ONE, INC.	10481
D	Instructions: List each separate community served by the cable system. A "commu "a separate and distinct community or municipal entity (including unincorporated discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you as the "first community." Please use it as the first community on all future filings.	communities within unincorporated areas and including single, list will serve as a form of system identification hereafter know
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile identified city.	home parks should be reported in parentheses below the
First		STATE
First Community	MONTGOMERY COUNTY	KS KS
	NEODESHA	KS
d Rows as Necessary		

LEGAL NAME OF OWNER OF CABLE SYSTEM:										
		-						1048		
					rv transmission s	service of t	he cable			
			-		•					
(S1	, , ,	'		,		those exist	ing on the			
last day of the accounting period (June 30 or December 31, as the case may be).										
	•									
	each category by counting the number of billings in that category (the number of persons or organizations charged									
	separately for the particular service at the rate indicated-not the number of sets receiving service).									
category, but do not include disc	counts allowed	for adv	ance payment.							
			-		•					
categories, that person or entity	should be cou	nted as	s a subscriber in	each app	licable category	. Example	: a residential			
1 3						ider "Servi	ce to the			
						different f	rom those			
	-		•							
	and rates, in th	e right-	hand block. A t	vo- or thre	e-word descript	ion of the s	service is			
Sufficient.						BLOCK	()			
					NO. OF					
CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RA		
		764	40.00							
		751	40.00							
()										
· · · /		3	8.50							
Commercial		54	8.00-15.00							
Converter										
Residential										
Non-residential										
					all your cable sys	tom's son	vices that were			
service for a single fee. There a	re two exceptio	ons: you	u do not need to	give rate	information con	cerning (1)) services			
amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.										
Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.										
Block 2: List any services that your cable system furnished or offered during the accounting period that were not										
							BLOCK 2			
CATEGORY OF SERVICE			GORY OF SER	VICE	RATE	CATEGO		RA		
Continuing Services:										
• Pay cable	15.00-17.00	• Mo	otel, hotel							
 Pay cable—add'l channel 	15.00-17.00	• Cc	ommercial		50.00-200.00	TIER		55.		
Fire protection		۰Pa	iy cable		COST					
•Burglar protection			•	annel						
Installation: Residential			•							
• First set	30.00-90.00		Irglar protection							
	60.00	Uther	services:							
Additional set(s) EM radio (if separate rate)		• D -	connect		60.00					
• FM radio (if separate rate)			econnect		60.00					
()		• Dis	econnect sconnect utlet relocation		60.00 60.00					
	CABLE ONE, INC. SECONDARY TRANSMISSION In General: The information in a system, that is, the retransmissi about other services (including p last day of the accounting period Number of Subscribers: Bot down by categories of secondar each category by counting the m separately for the particular serv Rate: Give the standard rate of unit in which it is generally billed category, but do not include disd Block 1: In the left-hand block systems most commonly provid that applies to your system. Not categories, that person or entity subscriber who pays extra for ca first set" and would be counted of Block 2: If your cable system printed in block 1 (for example, i with the number of subscribers a sufficient. BLC CATEGORY OF SERVICE Residential: • Service to first set • Service to additional set(s) • FM radio (if separate rate) Motel, hotel Converter • Residential • Non-residential • Diock 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrit • Pay cable	CABLE ONE, INC. SECONDARY TRANSMISSION SERVICE: SI In General: The information in space E should system, that is, the retransmission of televisior about other services (including pay cable) in sp last day of the accounting period (June 30 or L Number of Subscribers: Both blocks in space down by categories of secondary transmission each category by counting the number of billing separately for the particular service at the rate Rate: Give the standard rate charged for eac unit in which it is generally billed. (Example: "\$ category, but do not include discounts allowed Block 1: In the left-hand block in space E, th systems most commonly provide to their subsc that applies to your system. Note: Where an in categories, that person or entity should be cou subscriber who pays extra for cable service to first set" and would be counted once again und Block 2: If your cable system has rate categ printed in block 1 (for example, tiers of service; with the number of subscribers and rates, in th sufficient. BLOCK 1 NO. OF CATEGORY OF SERVICE SUBSCRIB Residential: • Service to first set • Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial Converter • Residential • Non-residential • Non-residential • Non-residential • Non-residential • Non-residential • Non-residential • Non-residential • Non-residential • SerViCES OTHER THAN SECONDARY TR2/ In General: Space F calls for rate (not subscri not covered in space E, that is, those services service for a single fee. There are two exception furnished at cost or (2) services or facilities fur amount of the charge and the unit in which it is enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by Block 2: List any services that your cable sy listed in block 1 and for which a separate charge brief (two- or three-word) description and i	CABLE ONE, INC. SECONDARY TRANSMISSION SERVICE: SUBSCR In General: The information in space E should cover system, that is, the retransmission of television and re about other services (including pay cable) in space F, last day of the accounting period (June 30 or Decemb Number of Subscribers: Both blocks in space E c. down by categories of secondary transmission service each category by counting the number of billings in th separately for the particular service at the rate indicat Rate: Give the standard rate charged for each category, but do not include discounts allowed for adv. Block 1: In the left-hand block in space E, the form systems most commonly provide to their subscribers. that applies to your system. Note: Where an individue categories, that person or entity should be counted as subscriber who pays extra for cable service to additio first set" and would be counted once again under "Set Block 2: If your cable system has rate categories for printed in block 1 (for example, tiers of services that in with the number of subscribers and rates, in the right-sufficient. BLOCK 1 NO. OF CATEGORY OF SERVICE Subscribers and rates, in the right-sufficient. Service to first set • Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial	CABLE ONE, INC. SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND R. In General: The information in space E should cover all categories of system, that is, the retransmission of television and radio broadcasts about other services (including pay cable) in space F, not here. All the last day of the accounting period (June 30 or December 31, as the category by counting the number of billings in that category (the separately for the particular service at the rate indicated—not the num Rate: Give the standard rate charged for each category of service. unit in which it is generally billed. (Example: "\$20/mth"). Summarize a category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categor systems most commonly provide to their subscribers. Give the numb that applies to your system. Note: Where an individual or organizatio categories, that person or entity should be counted as a subscriber in subscriber who pays extra for cable service to additional sets would b first set" and would be counted once again under "Service to addition Block 2: If your cable system has rate categories for secondary tra printed in block 1 (for example, tiers of services that include one or m with the number of subscribers and rates, in the right-hand block. A the sufficient. BLOCK 1 NO. OF CATEGORY OF SERVICE NO. OF Service to first set 751 40.00 Service to additional set(s) Services that are not offered in service for a single fee. There are two exceptions; you do not need to furnished at cost or (2) services or facilities furnished to nonsubscribe amount of the charge and the unit in which it is usually billed. If any re neter only the letters "PP" in the rate column.	CABLE ONE, INC. SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondar system, that is, the retransmission of television and radio broadcasts by your s about other services (including pay cable) in space F, not here. All the facts yo last day of the accounting period (June 30 or December 31, as the case may b Number of Subscribers: Both blocks in space E call for the number of subscribers: Both blocks in space E call for the number of subscribers: Both blocks in space E, hot here number of subscribers: Both blocks in space E, hot number of subscribers and rate charged for each category of service. Include bu unit in which it is generally billed. (Example: "\$20/MT*). Summarize any stands category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categories of sec systems most commonly provide to their subscribers. Give the number of subscriber who pays extra for cable service to additional set(s)." Block 1: In the left-hand block in space E, the form lists the categories of sec systems most commonly provide to their subscribers. Give the number of subscriber who pays extra for cable service to additional set(s)." Block 2: If your cable system has rate categories for secondary transmission printed in block 1 (for example, liers of services that include one or more secor with the number of subscribers and rates, in the right-hand block. A two- or three sufficient. Service to first set 751 40.00 40.00 Service to first set 751 40.00 40.00 Services of additional set(s) NO OF	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission at system, that is, the retransmission of television and radio broadcasts by your system to subscrib abut other services (including pay cable) in space F, not here. All the facts you state must be I last day of the accounting period (June 30 or December 31, as the case may be). Number of Subscribers: Both blocks in space E call for the number of subscribers to the cald own by categories of secondary transmission service. In general, you can compute the number each category by counting the number of bilings in that category (the number of persons or orge separately for the particular service at the rate indicated—not the number of subscribers and rate that applies to do not include discounts allowed for advance payment. Bock 1: In the left-hand block in space E, the form lists the categories of secondary transmissing systems most commonly provide to their subscribers. Give the number of subscribers and rate that applies to your system. Not: Where an individual or organization is receiving service that categories to pays extra for cable service to additional sets would be included in the count uf first set and would be counted once again under "Service to additional set(s)." Block 1: In the Idel-hand block in space E, the form lists the categories for secondary transmission service that categories for secondary transmission service that categories to reach applicable category usubscriber who pays extra for cable service to additional sets would be included in the count uf first set Startice 1 Service to additional sets Service to additional set(s)." Block 1: If your cable system has rate categoris	CABLE ONE, INC. SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission service of 1 system, that is, the retransmission is pace F, and there. All the facts you state must be those exist last day of the accounting period (June 30 or December 31, as the case may be). Number of Subscribers: Softbolcok in space F. call for the number of subscribers to the cable system down by categories of secondary transmission service. In general, you can compute the number of subscribers is to the cable system down by categories of secondary transmission service. Include both the amount of the charg unit in which it is generally lidel. (Example: "20/mth"). Summarize any standard rate variations within a category, but do not include discounts allowed for advance payment. Block 1: In the left-hand bock in space E, the form lists the categories of secondary transmission service systems most commonly provide to their subscribers. Give the number of subscribers and rate for each list that applies to your system. Note: Where an individual or organization is receiving service that falls under categories, that person or entity should be counted as a subscriber in each applicable category. Example subscribers and rates for cable setwice to additional sets would be included in the count under "Servic to additional set(s)." Block 1: In would be counted once again under "Service to additional set(s)." Block 2: If your cable system has rate categories for secondary transmission service that are different f printed in block 1 (for example, lies of Services that include one or more secondary transmission), silt with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the sufficient. <td>CABLE ONE, INC. SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all calegories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Note information about other services (including pay cable) in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each radged (una 30 or December 31, as the case may be). Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. Include both the amount of the charge and the unit in which it is generally billed. (Example: '320mth'). Summarize any standard rate variations within a particular rate category of service. Include both the amount of the charge and the category that applies to your system. Note: Where an individual or organization is receiving service. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission. Halls under different categories the second settered in each histed category systems most commonly provide to their subscribers. Give the number of subscribers in each histed category that applies to your system. Note: Where a mindividual or organization is receiving service that affitted in the count under "Service to additional sets".) Block 2: If your cable system has rate categories for secondary transmission. Service is sufficient. BLOCK 1 BLOCK 2 Residential Service to distict as subscriber to more secondary transmissi</td>	CABLE ONE, INC. SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all calegories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Note information about other services (including pay cable) in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each radged (una 30 or December 31, as the case may be). Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. Include both the amount of the charge and the unit in which it is generally billed. (Example: '320mth'). Summarize any standard rate variations within a particular rate category of service. Include both the amount of the charge and the category that applies to your system. Note: Where an individual or organization is receiving service. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission. Halls under different categories the second settered in each histed category systems most commonly provide to their subscribers. Give the number of subscribers in each histed category that applies to your system. Note: Where a mindividual or organization is receiving service that affitted in the count under "Service to additional sets".) Block 2: If your cable system has rate categories for secondary transmission. Service is sufficient. BLOCK 1 BLOCK 2 Residential Service to distict as subscriber to more secondary transmissi		

	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTEM				
Name	CABLE ONE, INC.	0,12220.0.2		104				
	PRIMARY TRANSMITTERS:	TELEVISION						
G Primary Issmitters: Nevision	In General: In space G, ide carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(d substitute program basis, a Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station her station was carried <i>only</i> on • List the station here, and basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on	 In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do <i>not</i> list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried <i>only</i> on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community 						
	educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location	ering the letter "N" (for network), "N-M" (, "E" (for noncommercial educational), o erms, see page (iv) of the general instru on of each station. For U.S. stations, list idian stations, if any, give the name of th	for network multicast), "I" (for inde or "E-M" (for noncommercial educa loctions in the paper SA1-2 form. the community to which the statio	ependent), "I-M" ational multicast). In is licensed by the				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	KDOR	36	l	BARTLESVILLE, OK/INDEPENDENC				
	KFJX-1	13	I	PITTSBURG, KS/JOPLIN, MO/NEOD				
ws as Necessary	KJRH	8	Ν	TULSA, OK/INDEPENDENCE				
	KMYT-1	34	I	TULSA, OK/INDEPENDENCE				
	KJRH-SIMUL	8	Ν	TULSA/OK/INDEPENDENCE				
	KOKI-1	22	I	TULSA, OK/INDEPENDENCE				
	KOTV-3	26	I-M	TULSA, OK/INDEPENDENCE				
	KQCW	20	1					
		20		MUSKOGEE, OK/INDEPENDENCE				
	KTUL-1	10	· N	MUSKOGEE, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE				
			N E					
	KTUL-1	10		TULSA, OK/INDEPENDENCE				
	KTUL-1 KTWU	10 11	E	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA				
	KTUL-1 KTWU KTUL-3	10 11 10	E I-M	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA TULSA, OK/INDEPENDENCE				
	KTUL-1 KTWU KTUL-3 KTUL-4	10 11 10 10	E I-M I-M	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE				
	KTUL-1 KTWU KTUL-3 KTUL-4 KTUL-2	10 11 10 10 10	E I-M I-M I-M	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE				
	KTUL-1 KTWU KTUL-3 KTUL-4 KTUL-2 KMYT-2	10 11 10 10 10 34	E I-M I-M I-M I-M	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK				
	KTUL-1 KTWU KTUL-3 KTUL-4 KTUL-2 KMYT-2 KFJX-2	10 11 10 10 10 34 13	E I-M I-M I-M I-M I-M	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK PITTSBURG, KS/JOPLIN, MO				
	KTUL-1 KTWU KTUL-3 KTUL-4 KTUL-2 KMYT-2 KFJX-2 KSNF-1	10 11 10 10 10 10 34 13 17	E i-M i-M i-M i-M N	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK PITTSBURG, KS/JOPLIN, MO JOPLIN, MO/NEODASHA				
	KTUL-1 KTWU KTUL-3 KTUL-4 KTUL-2 KMYT-2 KFJX-2 KSNF-1 KODE	10 11 10 10 10 10 34 13 17 23	E I-M I-M I-M I-M N N N	TULSA, OK/INDEPENDENCETOPEKA, KS/NEODASHATULSA, OK/INDEPENDENCETULSA, OK/INDEPENDENCETULSA, OK/INDEPENDENCETULSA, OKPITTSBURG, KS/JOPLIN, MOJOPLIN, MO/NEODASHAJOPLIN, MO/NEODASHA				
	KTUL-1 KTWU KTUL-3 KTUL-4 KTUL-2 KMYT-2 KFJX-2 KSNF-1 KODE KSNF-2	10 11 10 10 10 10 34 13 17 23 17	E I-M I-M I-M I-M N N N	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE JULSA, OK PITTSBURG, KS/JOPLIN, MO JOPLIN, MO/NEODASHA JOPLIN, MO/NEODASHA				
	KTUL-1 KTWU KTUL-3 KTUL-4 KTUL-2 KMYT-2 KFJX-2 KSNF-1 KODE KSNF-2 KOKI-SIMUL	10 11 10 10 10 10 34 13 17 23 17 22	E i-M i-M i-M i-M N N N i-M i-M i-M i-M i-M	TULSA, OK/INDEPENDENCETOPEKA, KS/NEODASHATULSA, OK/INDEPENDENCETULSA, OK/INDEPENDENCETULSA, OK/INDEPENDENCETULSA, OKPITTSBURG, KS/JOPLIN, MOJOPLIN, MO/NEODASHAJOPLIN, MO/NEODASHAJOPLIN, MO/NEODASHATULSA, OK/INDEPENDENCE				
	KTUL-1 KTWU KTUL-3 KTUL-4 KTUL-2 KMYT-2 KFJX-2 KSNF-1 KODE KSNF-2 KOKI-SIMUL KOTV-SIMUL	10 11 10 10 10 10 34 13 17 23 17 22 26	E I-M I-M I-M I-M N N N N I-M I N I N	TULSA, OK/INDEPENDENCE TOPEKA, KS/NEODASHA TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE TULSA, OK PITTSBURG, KS/JOPLIN, MO JOPLIN, MO/NEODASHA JOPLIN, MO/NEODASHA JOPLIN, MO/NEODASHA TULSA, OK/INDEPENDENCE TULSA, OK/INDEPENDENCE				

ounting Period:	2021/2			FORM SA1-2E. PAGE 3					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID:								
-	CABLE ONE, INC.			10481					
	PRIMARY TRANSMITTERS: TELEVISION								
G	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under								
•			the carriage of certain network program						
ry	76.59(d)(2) and (4), 76.61(e	e)(2) and (4), or 76.63 (referring to 76.	61(e)(2) and (4))]; and (2) certain stati						
tters: sion		s explained in the next paragraph. : With respect to any distant stations	carried by your cable system on a subs	stitute program					
	basis under specific FCC ru	lles, regulations, or authorizations:							
	 Do not list the station here station was carried only on 		the Special Statement and Program L	og)—if the					
	List the station here, and a	also in space I, if the station was carri	ed both on a substitute basis and also						
			s, see page (v) of the general instruction program services such as HBO, ESP1						
			ne-air designation. For example, repor						
	"WETA-2" as the same on t		levision station for broadcasting over th	ne air in its community					
	of license. For example, W	RC is channel 4 in Washington, D.C.	C C						
			k station, an independent station, or a i						
			' (for network multicast), "I" (for indepen or "E-M" (for noncommercial education						
		rms, see page (iv) of the general inst		, 					
			st the community to which the station is the community with which the station i	-					
	FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.								
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION					
sary									

CABLE ONE	FOWNER OF (, INC.	JABLE S	ITSTEM:					SYSTEM ID 1048
	t every radio s	tation ca	arried on a separate and discr nerally receivable by your cab					н
receivable if (1) on the basis of For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf	it is carried by monitoring, to prmation about rm. lentify the call tate whether to the radio stat	y the sys be rece it the Co sign of the static ion's sig	II-Band FM Carriage: Under C stem whenever it is received a ived at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column.	t the system's he system's FM ante his point, see pa	eadend, and (2 enna, during c ge (v) of the c	2) it can certain s general i	be expected, tated intervals. nstructions in the.	Primary Transmitters: Radio
Column 4: G	live the station	n's locati	ion (the community to which the the community with which the			C or, in	the case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

	od: 2021/2						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	CABLE ONE, INC.							10481
	SUBSTITUTE CARRIAGE	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
I	In General: In space I, ident substitute basis during the a	ccounting p	eriod, under sp	ecific present and former F	CC rules, reg	ulations, or a	authorization	ns. For a further
Substitute	explanation of the programm	ning that mu	st be included i	n this log, see page (v) of t	he general ins	structions in f	the paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMENT		RNING SUBS	TITUTE CARRIAGE				
Special Statement and	 During the accounting per 	iod, did yoι	ur cable systen	n carry, on a substitute ba	sis, any nonr	etwork telev	vision prog	
Program Log	broadcast by a distant sta	tion?					YES	X NO
	Note: If your answer is "No	", leave the	rest of this pa	ge blank. If your answer is	s "Yes," you r	nust comple	ete the prog	jram
	log in block 2.							
	2. LOG OF SUBSTITUTE In General: List each subst			ate line. Lise abbreviation	wherever n	peeible if th	eir meaning	n ie
	clear. If you need more spa				s wherever po		en meaning	y is
				vision program ("substitute	e program") tł	nat, during t	he account	ing
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor	gulations, o	or authorization	ns. See page (v) of the gen othell " List apositio progra	neral instructi	ions for furth	ner informa	tion.
	"NBA Basketball: 76ers vs.		ovies of bask	etball. List specific progra	in lues, lor e	example, 1L	Love Lucy	01
	Column 2: If the program	n was broa		er "Yes." Otherwise enter '				
				asting the substitute progr he community to which th		oncod by th		in
	the case of Mexican or Car							
				stem carried the substitute			, with the n	nonth
	first. Example: for May 7 give							
	to the nearest five minutes.			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."				. 10 p.m. to 0	.20.00 p.m.		
	Column 7: Enter the lett			n was substituted for prog				
	to delete under FCC rules a							ogram
	was substituted for program effect on October 19, 1976.		your system wa	as permitted to delete und	er FCC fules	anu regula		
		•						
								1
	SI	UBSTITUT	E PROGRAM			N SUBSTIT AGE OCCL	JRRED	7. REASON FOR
	SI 1. TITLE OF PROGRAM	UBSTITUT 2. LIVE? Yes or No	E PROGRAM 3. STATION'S CALL SIGN	4. STATION'S LOCATION			JRRED	7. REASON FOR DELETION
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	
		2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCCL 6. TI	JRRED MES	

Accounting Period:	2021/2			FORM	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.			S	8YSTEM ID# 10481
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and t all amounts (gross receipts) paid to your cable system by subscribers for the syst (as identified in space E) during the accounting period. For a further explanation of 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	tem's sec of how to	ondary transmi compute this a	ssion service mount, see \$2	
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 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but See page (vi) of the general instructions located in the paper SA1-2 form for more info	t less thar ormation.	\$527,600	63,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,1	00 OR LI	ESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fe accounting period is \$52.00	,			
	Line 1. Royalty fee for accounting period				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines	s 1 and 2 .			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS	(but mor	e than \$137,1	00)	
	1. Base amount under statutory formula	5	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)		-		0.00
			·····.		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 an	nd 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,80	00 (but le	ss than \$527,	600)	
	1. Enter the amount of gross receipts from space K	6	277,074.29		
	2. Base amount under statutory formula	6	263,800.00		
	3. Subtract line 2 from line 1	5	13,274.29		
	4. Multiply line 3 by .01	-		132.74	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	_		1,319.00	
	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	••••••	\$	1,451.74
	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)	·····- <u>-</u>	\$	1,451.74	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	· · · · · · · - <u>-</u>	\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,471.74
	Important: Your remittance must be in the form of an electronic payme See page i of the general instructions in the paper SA1-2		-		ghts!

Accounting Period:	2021/2			FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.			SYSTEM ID# 10481
M Channels	 CHANNELS Instructions: You must give (1) the number of cha to its subscribers, and (2) the cable system's total r 1. Enter the total number of channels on which the system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broad- and nonbroadcast services	umber of activated channels during the a	accounting period.	23 229
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER II we can contact about this statement of account.)		individual to whom	
for Further Information	Name JENAE HECK		Telephone 602-	-364-6092
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or PHOENIX, AZ 85012-262 (City, town, state, zip)			
	Email JENAE.HECK@CAB	BLEONE.BIZ	Fax (optional) 602-364-6013	
O Certification	Ente	at only one, of the boxes.) rship) I am the owner of the cable system or partnership) I am the duly authorized a is not a corporation or partnership; or orporation) or a partner (if a partnership) or by declare under penalty of law that all stat vledge, information, and belief, and are main /s/ Raymond Storck r an electronic signature on the line above to r signature using an "/s/ signature" (e.g., /s/	n as identified in line 1 of space B; or agent of the owner of the cable system f the legal entity identified as owner o tements of fact contained herein ade in good faith.	m as identified
		E PRESIDENT osition held in corporation or partnership)		
	Date:		February 28, 2022	

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 it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

BLE ONE, INC. 104 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS Image: Comparison of the terminating 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." Image: Comparison on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. Image: Comparison on when to exclude these amounts, see the note on page (vii) of the general instructions concerning Gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? Image: Comparison on when to exclude the carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and list the satellite carrier(s) below. Image: Comparison on the total here and lis	unting Period: 2021/2	FORM SA1-2E. PAGE
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Stateline there view rate of 1988 amended Tite 17, section 111(g)(1)(A), of the Copyright Act by adding the following service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- corbers and anomato colspan="2">Control 1000000000000000000000000000000000000	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
The Satellis Home View Act of 1988 anended Tile 17, section 111(q)(1)(A), of the Copyright Act by adding the following sentence: P In determining the total number of subscribers and the gross amounts paid to the cable system for the basic providing secondary transmissions pursuant to section 119.* P For more information on when to exclude these amounts, see the note on page (vii) of the general instructions for a providing secondary transmissions pursuant to section 119.* P For more information on when to exclude these amounts, see the note on page (vii) of the general instructions for a providing secondary transmissions marked by satellite carriers to satellite dati owners? Image information on when to exclude these amounts of gross receipts for secondary transmissions marked by satellite carriers to satellite carrier(s) below. Image information on when to exclude these amounts of gross receipts for secondary transmissions marked by satellite carriers to satellite carrier(s) below. Image information on when to exclude these amounts of gross receipts for secondary transmissions marked by satellite carriers below. Image information on when to exclude these amounts of gross receipts for secondary transmissions marked by satellite carriers below. Image information on underpayment. Image information on underpayment or underpayment. Image information on underpayment or underpayment. For an explanation of interest rate' and enter the sum here x Interest Assessment x Line 1 whithy line 1 by the interest rate' and enter the sum here x x udays Line 2 Multiply line 1 by the interest rate and enter the sum here x x udays Line 4 Multiply line 3 by 0.002	3LE ONE, INC.	1048
YES. Enter the total here and list the satellite carrier(s) below. \$ Name Name Maling Address Name Maling Address Name INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Interest Assessment. Line 1 Enter the amount of late payment or underpayment. x	 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? 	P Special Statement Concerning Gross Receipts Exclusion
Name Name Mailing Address Mailing Address INTEREST ASSESSMENT Mailing Address You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Interest Assessme Line 1 Enter the amount of late payment or underpayment		
You must complete this worksheet for those royally payments submitted as a result of a late payment or underpayment. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest comparison of the paper SA1-2 form. Image: Comparison of the paper SA1-2 form. Image: Comparison of the payment or underpayment. Image: Comparison of the paper SA1-2 form. Image: Comparison of the paper SA1-2 form		
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Interest Assessment Line 1 Enter the amount of late payment or underpayment		
Line 1 Enter the annount of nate payment of underpayment		Q
x	Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 3 Multiply line 2 by the number of days late and enter the sum here		
in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	Line 3 Multiply line 2 by the number of days late and enter the sum here	_
To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please	
list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
Address ID number First community served		
First community served		

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