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.

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

SA1-2E Short Form

Return completed workbook by email to:

coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

in the first tab	of this	workbook		ALLOCATION NUMBER	Tel: (202) 707-8150				
Α	ACCO	DUNTING PERIOD COVERED E	BY THIS STATEMENT: (YYYY)	(Period))					
			1						
		2021/2	Period 1 = January 1 - June 30 F	Period 2 = July 1 - December 31					
		20212	Barcode Data Filing Period (optional - see	e instructions)					
Accounting			1						
Period									
		Instructions:							
В		Give the full legal name of the owner of th the subsidiary, not that of the parent corpo	e cable system. If the owner is a subsidiary opration.	of another corporation, give the full corpor	rate title of				
Owner		List any other name or names under which the owner conducts the business of the cable system.							
			accounting period, only the owner on the las nent covering the entire accounting period.	t day of the accounting period should subr	nit a single				
		Check here if this is the system's first filing	. If not, enter the system's ID number assign	ed by the Licensing Division.	39945				
]		,					
		LEGAL NAME OF OWNER/MAILING							
		WASHINGTON CABLE SYSTEMS IN							
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)						
		MAILING ADDRESS OF OWNER OF 700 7TH ST SW STE S3	CABLE SYSTEM						
		(Number, street, rural route, apartment, or suite n	umber)						
		WASHINGTON DC 20024-24 (City, town, state, zip)	484						
	INSTR		ess or trade names used to identify t	the business and operation of the s	system unless these				
С			2, give the mailing address of the sys						
System	1	IDENTIFICATION OF CABLE SYSTEM:							
		MAILING ADDRESS OF CABLE SYSTEM	:						
	1								
	2	(Number, street, rural route, apartment, or suite n	umber)						
		(City, town, state, zip code)							
Privacy Act Notic	e: Sectior	111 of title 17 of the United States Code aut	thorizes the Copyright Offce to collect the pers	sonally identifying information (PII) requested	d on this				

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

DATE RECEIVED

02/08/22

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offee 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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
Name	WASHINGTON CABLE SYSTEMS INC	39945						
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified							
Area Served	city.							
	CITY OR TOWN	STATE						
First	WASHINGTON	DC						
Community	US GOVERNMENT							
ws as Necessary								

	LEGAL NAME OF OWNER OF C							FORM SA1	TEM ID
Name	WASHINGTON CABLE S		с					515	3994
			<u> </u>						
Е	SECONDARY TRANSMISSION								
L	In General: The information in s system, that is, the retransmission			-		•			
Secondary	about other services (including p								
Transmission	last day of the accounting period	l (June 30 or De	ecembe	er 31, as the ca	ase may be	e).		Ū	
Service: Sub-	Number of Subscribers: Both	•							
scribers and Rates	down by categories of secondar	•		•		•			
Rates	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).								
	Rate: Give the standard rate of							ge and the	
	unit in which it is generally billed	· ·	,		iny standai	rd rate variation	s within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				ries of sec	ondary transmis	sion servi	ce that cable	
	systems most commonly provide			-					
	that applies to your system. Not								
	categories, that person or entity						•		
	subscriber who pays extra for ca					I in the count un	der "Servi	ce to the	
	first set" and would be counted of Block 2: If your cable system					service that are	different	from those	
	printed in block 1 (for example, t	-		•					
	with the number of subscribers a					•	,.		
	sufficient.				1				
	BLO	OCK 1 NO. OF					BLOC	< 2 NO. OF	1
	CATEGORY OF SERVICE	SUBSCRIBE	RS	RATE	CATE	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT
	Residential:								
	Service to first set								
	Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		1	20,691.00	U.S. Go	vt. special b	ulk		
	Converter				rates (a				
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC						tom'a con	viene that wore	
F	In General: Space F calls for rain not covered in space E, that is, t	•	,		-	• •			
-	service for a single fee. There a					,	,		
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the ur		usually	billed. If any ra	ates are ch	arged on a vari	able per-p	rogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the rate column.								
Rates	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								
	listed in block 1 and for which a separate charge was made or established. List these other services in the form of a								
	brief (two- or three-word) descrip	otion and includ	e the ra	ite for each.					
				BLOCK 2					
		BLOO	CK 1						
	CATEGORY OF SERVICE			ORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATE
	CATEGORY OF SERVICE Continuing Services:	RATE	CATEG	ORY OF SER		RATE	CATEG	ORY OF SERVICE	RATE
		RATE	CATEG Installa			RATE	CATEG	ORY OF SERVICE	RATI
	Continuing Services:	RATE	CATEG Installa • Mot	ation: Non-res		RATE 150.00	CATEG	ORY OF SERVICE	RATE
	Continuing Services: • Pay cable	RATE	CATEG Installa • Mot • Cor	ation: Non-res			CATEG	ORY OF SERVICE	RATI
	Continuing Services: • Pay cable • Pay cable—add'l channel	RATE	CATEG Installa • Mot • Cor • Pay	ition: Non-res iel, hotel nmercial	idential		CATEG	ORY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	RATE	CATEG Installa • Mot • Cor • Pay • Pay	ation: Non-res tel, hotel nmercial r cable	idential		CATEG	ORY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	RATE	CATEG Installa • Mot • Cor • Pay • Pay • Fire	ation: Non-res tel, hotel nmercial / cable / cable-add'l cl	idential		CATEG	ORY OF SERVICE	RATE
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	RATE	CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur	ation: Non-res tel, hotel nmercial / cable / cable-add'l ch e protection	idential		CATEG	ORY OF SERVICE	RATI
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	RATE	CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur Other •	tion: Non-res tel, hotel mmercial cable cable-add'l ch protection glar protection	idential		CATEG	ORY OF SERVICE	RATI
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	RATE	CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s	tion: Non-res tel, hotel nmercial cable cable-add'l ch protection glar protection services:	idential		CATEG	ORY OF SERVICE	RATI
	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)	RATE	CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur • Bur • Rec • Dis	tion: Non-res tel, hotel mmercial cable cable-add'l ch protection glar protection services: connect	idential		CATEG	ORY OF SERVICE	RATI

nting Period:	-			FORM SA1-2E. PAGE				
Name	LEGAL NAME OF OWNER O			SYSTEM II 3994				
	WASHINGTON CABL			3994				
G Primary insmitters: elevision	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 of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper							
	1. CALL SIGN	4. LOCATION OF STATION						
	WRC-4.1	48.1	N-M	Washington, DC				
	COZI-4.2	48.2	N-M	Washington, DC				
ows as Necessary	WZDC-4.3	48.3	N-M	Washington, DC				
	XITOS-4.4	48.4	N-M	Washington, DC				
	WTTG-5.1	36.1	N-M	Washington, DC				
	BUZZR-5.2	36.2	N-M	Washington, DC				
	METV-5.3	36.3	N-M	Washington, DC				
	WJLA-7.1	7.1	N-M	Washington, DC				
	010 7 0							
	CHG-7.2	7.2	N-M	Washington, DC				
	CHG-7.2 COMET-7.3	7.2	N-M N-M					
				Washington, DC				
	COMET-7.3	7.3	N-M	Washington, DC Washington, DC				
	COMET-7.3 TBD-7.4	7.3 7.4	N-M N-M	Washington, DC Washington, DC Washington, DC				
	COMET-7.3 TBD-7.4 WUSA-9.1	7.3 7.4 9.1	N-M N-M N-M	Washington, DC Washington, DC Washington, DC Washington, DC				
	COMET-7.3 TBD-7.4 WUSA-9.1 Justice-9.2	7.3 7.4 9.1 9.2	N-M N-M N-M N-M	Washington, DC Washington, DC Washington, DC Washington, DC Washington, DC				
	COMET-7.3 TBD-7.4 WUSA-9.1 Justice-9.2 Quest-9.3	7.3 7.4 9.1 9.2 9.3	N-M N-M N-M N-M N-M	Washington, DC Washington, DC Washington, DC Washington, DC Washington, DC Washington, DC				
	COMET-7.3 TBD-7.4 WUSA-9.1 Justice-9.2 Quest-9.3 WDCA-20.1	7.3 7.4 9.1 9.2 9.3 35.1	N-M N-M N-M N-M N-M N-M	Washington, DCWashington, DCWashington, DCWashington, DCWashington, DCWashington, DCWashington, DCWashington, DCWashington, DC				
	COMET-7.3 TBD-7.4 WUSA-9.1 Justice-9.2 Quest-9.3 WDCA-20.1 MOVIES-20.2	7.3 7.4 9.1 9.2 9.3 35.1 35.2	N-M N-M N-M N-M N-M N-M N-M	Washington, DCWashington, DC				
	COMET-7.3 TBD-7.4 WUSA-9.1 Justice-9.2 Quest-9.3 WDCA-20.1 MOVIES-20.2 HEROES-20.3	7.3 7.4 9.1 9.2 9.3 35.1 35.2 35.3	N-M N-M N-M N-M N-M N-M N-M N-M	Washington, DCWashington, DC				
	COMET-7.3 TBD-7.4 WUSA-9.1 Justice-9.2 Quest-9.3 WDCA-20.1 MOVIES-20.2 HEROES-20.3 LIGHTV-20.4	7.3 7.4 9.1 9.2 9.3 35.1 35.2 35.3 35.4	N-M N-M N-M N-M N-M N-M N-M N-M N-M N-M	Washington, DCWashington, DC				
	COMET-7.3 TBD-7.4 WUSA-9.1 Justice-9.2 Quest-9.3 WDCA-20.1 MOVIES-20.2 HEROES-20.3 LIGHTV-20.4 MPT-22.1	7.3 7.4 9.1 9.2 9.3 35.1 35.2 35.3 35.4 22.1	N-M N-M N-M N-M N-M N-M N-M N-M N-M E-M	Washington, DC Mashington, DC Mashin				
	COMET-7.3 TBD-7.4 WUSA-9.1 Justice-9.2 Quest-9.3 WDCA-20.1 MOVIES-20.2 HEROES-20.3 LIGHTV-20.4 MPT-22.1 MPT2-22.2	7.3 7.4 9.1 9.2 9.3 35.1 35.2 35.3 35.4 22.1 22.2	N-M N-M N-M N-M N-M N-M N-M N-M N-M E-M E-M	Washington, DCWashington, DCManapolis, MD				

ounting Period:	-			FORM SA1-2E. PAGE :					
Name	LEGAL NAME OF OWNER OF			SYSTEM ID 3994					
	WASHINGTON CABLI								
G Primary Transmitters: Television	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, except (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 substitue 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 of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.								
	1. CALL SIGN	4. LOCATION OF STATION							
	WETA-26.1	27.1	E-M	Washington, DC					
	WETA-UK-26.2	27.2	E-M	Washington, DC					
d Rows as Necessary	WETA-KIDS-26.3	27.3	E-M	Washington, DC					
	WETA-World-26.4	27.4	E-M	Washington, DC					
	WETA Metro-26.5	27.5	E-M	Washington, DC					
	WHUT-32.1	33.1	E-M	Washington, DC					
	WHUT-Kids-32.2	33.2	E-M	Washington, DC					

EGAL NAME OF								SYSTEM II 399
	every radio s	tation ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) n the basis of r for detailed info aper SA1-2 for Column 1: Id Column 2: St Column 3: If ignal, indicate t	it is carried by monitoring, to irmation abou m. entify the call tate whether t the radio stati this by placing	y the sys be receint t the Co sign of e he station on's sign g a check	Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which th	t the system's he system's FM ante his point, see pag ed by the cable s	adend, and (2) nna, during ce ge (v) of the ge ystem as a se) it can b ertain sta eneral in parate a	e expected, ated intervals. structions in the. nd discrete	Primary Transmitters Radio
		-	the community with which the	1				
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
none)								

Accounting Perio							FUF	RM SA1-2E. PAGE 5		
Name	LEGAL NAME OF OWNER OF							SYSTEM ID#		
	WASHINGTON CABLE	SYSIEM	SINC					39945		
I	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify <i>every nonnetwork television program,</i> broadcast by a <i>distant</i> station, that your cable system carried <i>substitute basis</i> during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a fur explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.							For a further		
Substitute Carriage:	1. SPECIAL STATEMEN				general motie			2 101111.		
Special	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program									
Statement and Program Log	broadcast by a distant sta	tion?	-		-		YES	×NO		
	Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program									
	log in block 2.									
	In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried 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 letter "R" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect durin									
	5	SUBSTITUT	E PROGRAM					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	6. FROM	TIMES — TO	DELETION		
	(none)						_			
							_			
							-			
							_ _ _			
					· · · · · · · · · · · · · · · · · · ·					

Accounting Period:	2021/2	FORM SA	1-2E. PAGE 6.						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WASHINGTON CABLE SYSTEMS INC	S	STEM ID# 39945						
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ission service mount, see	I,146.00 ss receipts)						
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 \$263,800 • 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								
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for the	is six-month							
	accounting period is \$52.00 Line 1. Royalty fee for accounting period		52.00						
	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 \$ 52.								
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,								
	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		0.00						
	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	-							
	2. Base amount under statutory formula	-							
	3. Subtract line 2 from line 1	-							
	4. Multiply line 3 by .01								
	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								
	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)	52.00							
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00							
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00						
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		ts!						

Accounting Period:	2021/2					FORM SA1-2E. PAGE 7.
Name		WNER OF CABLE SYSTEM: CABLE SYSTEMS INC				SYSTEM ID# 39945
M Channels	to its subscriber		total numb	s on which the cable system carried tele er of activated channels during the acc		29
	system carrie	d television broadcast stations	s			29
	on which the	I number of activated channel cable system carried television dcast services	n broadca			46
N Individual to Be Contacted		D BE CONTACTED IF FURTH about this statement of account		RMATION IS NEEDED (Identify an indix	vidual to whom	
for Further	Name	Perry I. Klein, Vice-Pr	residen	t	Telephone	202-646-1600
Information	Address	700 Seventh St SW (Number, street, rural route, apartm Washington, DC 2002		e number)		
	Email	(City, town, state, zip)	tv		Fax (optional 202-479-439	6
	CERTIFICATION	(This statement of account mu	ust be cert	fied and signed in accordance with Cop	oyright Office regulations)	
O Certification		ed, hereby certify that (Check on r other than corporation or pa		r one , of the boxes.)) I am the owner of the cable system as in	dentified in line 1 of space B	; or
				rtnership) I am the duly authorized agent not a corporation or partnership; or	of the owner of the cable s	ystem as identified
		er or partner) I am an officer (il in line 1 of space B.	f a corpora	tion) or a partner (if a partnership) of the I	legal entity identified as own	er of the cable system
		te, and correct to the best of my		lare under penalty of law that all statemen e, information, and belief, and are made i		
				/s/ Perry I. Klein	tify this statement.	
			Enter sign	ature using an "/s/ signature" (e.g., /s/ John	n Smith)	
		Typed or printed	name:	Perry I. Klein		
		Title: (Titl		resident position held in corporation or partnership)		
		Date:			February 8, 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 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.

ounting Period: 2021/2	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
SHINGTON CABLE SYSTEMS INC	39945
 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 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.	Q
Line 1 Enter the amount of late payment or underpayment	interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	
* 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 Accounting pariod	
Accounting period	

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.