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 COPYRIG	 Return completed workbook by email to 						
		ransmissions by	DATE RECEIVED	AMOUNT						
		(Short Form)	04/00/0000	\$	<u>coplicsoa@copyright.gov</u> For additional information, contact the U.S. Copyright					
General instru in the first tab			01/28/2022	ALLOCATION NUMBER	Office Licensing Division at (202) 707-8150.					
Α	0.00	OUNTING PERIOD COVERED	DY THIS STATEMENT. /Y	VYY/(Period))						
	ACC	2021/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31						
Accounting Period										
В		Instructions: Give the full legal name of the owner of of the subsidiary, not that of the parent		idiary of another corporation, give the full corp	porate title					
Owner		List any other name or names under whi	ch the owner conducts the business of	the cable system.						
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.								
		Check here if this is the system's first filin	ng. If not, enter the system's ID number	assigned by the Licensing Division.	20172					
		LEGAL NAME OF OWNER/MAILIN	IG ADDRESS OF CABLE SYSTEM							
		MARNE ELK HORN TELEPHONE C	OMPANY							
		BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFERENT	Г)						
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM PO BOX 120								
		(Number, street, rural route, apartment, or suite i ELK HORN, IA 51531 (City, town, state, zip)	number)							
С				ntify the business and operation of the ne system, if different from the address						
		1								
System	1	IDENTIFICATION OF CABLE SYSTEM:								
	1	IDENTIFICATION OF CABLE SYSTEM: MAILING ADDRESS OF CABLE SYSTEM	И:							
	1									

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 filing, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name	MARNE ELK HORN TELEPHONE COMPANY	201
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
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobil identified city.	e home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	ELK HORN	IA
Community	BRAYTON	
dd Rows as Necessary	KIMBALLTON	
	EXIRA	IA

	T							FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM						SYS	TEM IC 2017
	MARNE ELK HORN TELEPHONE COMPANY								
-	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCRI	BERS AND R	ATES				
E	In General: The information in s	•		-		•			
Cocondom	system, that is, the retransmissi								
Secondary Transmission	about other services (including particular about other services (including particular about the accounting period						nose exist	ing on the	
Service: Sub-	Number of Subscribers: Bot						ble system	, broken	
scribers and	down by categories of secondar								
Rates	each category by counting the n		<i>,</i>	0,0				charged	
	separately for the particular server Rate: Give the standard rate of					•	,	be and the	
	unit in which it is generally billed	-	-	•				-	
	category, but do not include disc								
	Block 1: In the left-hand block	•		-		•			
	systems most commonly provide that applies to your system. Not								
	categories, that person or entity			-		-			
	subscriber who pays extra for ca					d in the count ur	der "Servi	ce to the	
	first set" and would be counted of Block 2: If your cable system					convice that are	different f	rom these	
	printed in block 1 (for example, 1	•							
	with the number of subscribers a						,.		
	sufficient.				1			- ·	
	BLO	OCK 1 NO. OF					BLOCK	X 2 NO. OF	r –
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATI	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT
	Residential:								
	Service to first set		636	38.95					
	 Service to additional set(s) 		I						
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC				e				
-	In General: Space F calls for ra	· · · · · ·				Ill your cable sys	stem's serv	vices that were	
F	not covered in space E, that is, t								
0	service for a single fee. There a	•			U		0.0		
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		acaany	smouth any r		.a.goa on a ran	anio hei h	ogiani zaolo,	
ransmissions:	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								
Rates	-	• •			-				
	listed in block 1 and for which a separate charge was made or established. List these other services in the form of brief (two- or three-word) description and include the rate for each.								
								BLOCK 2	
			CK 1				CATEC	DRY OF SERVICE	
	CATEGORY OF SERVICE		CATEG	ORY OF SER	VICE	RATE			I RAI
	CATEGORY OF SERVICE Continuing Services:	RATE		ORY OF SER ation: Non-res		RATE	CATEGO	JRT OF SERVICE	RAT
			Installa			RATE	CATEGO	DRT OF SERVICE	RAT
	Continuing Services:		Installa • Mot	ation: Non-res		RATE	CATEGO	DKT OF SERVICE	RAT
	Continuing Services: • Pay cable		Installa • Mot • Cor	ation: Non-res tel, hotel		RATE		JAT OF SERVICE	KAT
	Continuing Services: • Pay cable • Pay cable—add'l channel		Installa • Mot • Cor • Pay	ation: Non-res tel, hotel mmercial	idential	RATE			KAT
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection		Installa • Mot • Cor • Pay • Pay	ation: Non-res tel, hotel mmercial / cable	idential	RATE			KAII
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection		Installa • Mot • Cor • Pay • Pay • Fire	ation: Non-res tel, hotel mmercial / cable / cable-add'l cl	idential	RATE			KAI
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	RATE	Installa • Mot • Cor • Pay • Pay • Fire • Bur	ation: Non-res tel, hotel mmercial / cable / cable-add'l ch e protection	idential	RATE			KAI
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	RATE	Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s	ation: Non-res tel, hotel mmercial / cable / cable-add'l cł e protection glar protection	idential	RATE			KAI
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	RATE	Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s • Rec	ation: Non-res tel, hotel mmercial / cable / cable-add'l ch protection glar protection services:	idential				KAI
	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	Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s • Rec • Dise	ation: Non-res tel, hotel mmercial / cable / cable-add'l ch protection glar protection services: connect	idential				KAT

	LEGAL NAME OF OWNER O			SYSTEM	
Name				20	
	PRIMARY TRANSMITTERS:				
G Primary ansmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station here station was carried <i>only</i> or • List the station here, and basis. For further informati Column 1: List each station multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location	also in space I, if the station was carried ion concerning substitute basis stations, on's call sign. <i>Do not</i> report origination p ed with a station according to its over-the	t (1) stations carried only on a part ne carriage of certain network prog 1(e)(2) and (4))]; and (2) certain st arried by your cable system on a su ne Special Statement and Program d both on a substitute basis and all see page (v) of the general instruc- orogram services such as HBO, ES e-air designation. For example, rep evision station for broadcasting over station, an independent station, or for network multicast), "I" (for inde or "E-M" (for noncommercial educa- lictions in the paper SA1-2 form. the community to which the station	-time basis under rams [sections rations carried on a ubstitute program in Log)—if the so on some other ctions. SPN, etc. Identify each boort multistream er the air in its community a noncommercial pendent), "I-M" tional multicast). n is licensed by the	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION	
			3. TYPE OF STATION		
	KMTV-TV	3.1		OMAHA, NE	
. .	GRIT LAFF-TV	3.2	N-M N-M	OMAHA, NE OMAHA, NE	
lows as Necessary	ESCAPE	3.4	N-M	OMAHA, NE	
	COURT TV	3.5	N-M	OMAHA, NE	
	WOWT	6.1	N	OMAHA, NE	
	COZI	6.2	N-M	OMAHA, NE	
	H&I	6.3	N-M	OMAHA, NE	
		6.4	N-M	OMAHA, NE	
	StartTV	6.5	N-M	OMAHA, NE	
	CIRCLE	6.6	N-M	OMAHA, NE	
	KETV-DT	7.1	N	OMAHA, NE	
	KETV-ME	7.2	N-M	OMAHA, NE	
	KCCI-HD	8.1	N	DES MOINES, IA	
	KCCI-SD	8.2	N-M	DES MOINES, IA	
	KCCI-MY	8.3	N-M	DES MOINES, IA	
	TBD	15.1	N-M	OMAHA, NE	
			N-M	OMAHA, NE	
	STADIUM	15.2	13-191		
	STADIUM	<u>15.2</u> 15.3	N-M	OMAHA, NE	
	STADIUM Charge!	15.3	N-M	OMAHA, NE	
	STADIUM Charge! KDSM-DT	15.3 17.1	N-M N	OMAHA, NE DES MOINES, IA	
	STADIUM Charge! KDSM-DT COMET	15.3 17.1 17.2	N-M N N-M	OMAHA, NE DES MOINES, IA DES MOINES, IA	

	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTE				
Name	MARNE ELK HORN TELEPHONE COMPANY							
	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 FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections							
Primary ransmitters: Television	substitute program basis, a Substitute Basis Stations	(e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph. s: With respect to any distant stations ca						
	• Do <i>not</i> list the station her station was carried <i>only</i> or			<i>c,</i>				
	basis. For further information Column 1: List each station	also in space I, if the station was carried on concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pu	see page (v) of the general instru program services such as HBO, E	ctions. SPN, etc. Identify each				
	"WETA-2" as the same on Column 2: Give the chann	nel number the FCC assigned to the telev						
	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. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.							
	(for independent multicast) For the meaning of these to Column 4: Give the location), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list	or "E-M" (for noncommercial educa ictions in the paper SA1-2 form. the community to which the static	ational multicast). on is licensed by the				
	(for independent multicast) For the meaning of these to Column 4: Give the location), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list	or "E-M" (for noncommercial educa ictions in the paper SA1-2 form. the community to which the static	ational multicast). on is licensed by the				
	(for independent multicast) For the meaning of these to Column 4: Give the locatio FCC. For Mexican or Cana), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list adian stations, if any, give the name of th	or "E-M" (for noncommercial educa actions in the paper SA1-2 form. the community to which the static ne community with which the static	ational multicast). on is licensed by the on is identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the locatio FCC. For Mexican or Cana 1. CALL SIGN), "E" (for noncommercial educational), ou erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER	or "E-M" (for noncommercial educa actions in the paper SA1-2 form. the community to which the static ne community with which the static 3. TYPE OF STATION	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION				
	(for independent multicast) For the meaning of these to Column 4: Give the locatio FCC. For Mexican or Cana 1. CALL SIGN KYNE), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list is adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 26.1	or "E-M" (for noncommercial educa actions in the paper SA1-2 form. the community to which the station ne community with which the station 3. TYPE OF STATION E	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OMAHA, NE				
	(for independent multicast) For the meaning of these to Column 4: Give the locatio FCC. For Mexican or Cana 1. CALL SIGN KYNE IPTV-H), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 26.1 36.1	or "E-M" (for noncommercial educa actions in the paper SA1-2 form. the community to which the static ne community with which the static 3. TYPE OF STATION E E	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OMAHA, NE RED OAK, IA				
	(for independent multicast) For the meaning of these to Column 4: Give the locatio FCC. For Mexican or Cana 1. CALL SIGN KYNE IPTV-H IPTV21-H), "E" (for noncommercial educational), ou erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 26.1 36.1 36.2	or "E-M" (for noncommercial educa actions in the paper SA1-2 form. the community to which the static ne community with which the static 3. TYPE OF STATION E E E E	Ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OMAHA, NE RED OAK, IA RED OAK, IA				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN KYNE IPTV-H IPTV21-H IPTV3-H), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list is adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 26.1 36.1 36.2 36.3	or "E-M" (for noncommercial educations in the paper SA1-2 form. the community to which the static ne community with which the static 3. TYPE OF STATION E E E E-M E-M	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OMAHA, NE RED OAK, IA RED OAK, IA RED OAK, IA				
	(for independent multicast) For the meaning of these to Column 4: Give the locatio FCC. For Mexican or Cana 1. CALL SIGN KYNE IPTV-H IPTV21-H IPTV3-H IPTV4-H), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 26.1 36.1 36.2 36.3 36.4	or "E-M" (for noncommercial educa actions in the paper SA1-2 form. the community to which the static ne community with which the static 3. TYPE OF STATION E E E E E E E E E E	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OMAHA, NE RED OAK, IA RED OAK, IA RED OAK, IA RED OAK, IA				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN KYNE IPTV-H IPTV21-H IPTV21-H IPTV3-H IPTV4-H FOX 42), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- to of each station. For U.S. stations, list is adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 26.1 36.1 36.2 36.3 36.4 42.1	or "E-M" (for noncommercial educations in the paper SA1-2 form. the community to which the static ne community with which the static 3. TYPE OF STATION E E E E-M E-M E-M N	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OMAHA, NE RED OAK, IA RED OAK, IA RED OAK, IA RED OAK, IA OMAHA, NE				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN KYNE IPTV-H IPTV21-H IPTV21-H IPTV3-H IPTV4-H FOX 42 MYTV), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list is adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 26.1 36.1 36.2 36.3 36.4 42.1 42.2	or "E-M" (for noncommercial educations in the paper SA1-2 form. the community to which the static ne community with which the static 3. TYPE OF STATION E E E E E E M E-M E-M E-M N N N-M	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OMAHA, NE RED OAK, IA RED OAK, IA RED OAK, IA RED OAK, IA OMAHA, NE OMAHA, NE				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN KYNE IPTV-H IPTV21-H IPTV21-H IPTV3-H IPTV4-H FOX 42 MYTV CW), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list is adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 26.1 36.1 36.2 36.3 36.4 42.1 42.2 42.3	r "E-M" (for noncommercial educations in the paper SA1-2 form. the community to which the static ne community with which the static 3. TYPE OF STATION E E E E -M E-M E-M E-M N N N N	ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OMAHA, NE RED OAK, IA RED OAK, IA RED OAK, IA RED OAK, IA RED OAK, IA OMAHA, NE OMAHA, NE				

EGAL NAME OF	FOWNER OF (CABLE S	YSTEM:					SYSTEM ID
MARNE ELK	HORN TE	LEPHO	ONE COMPANY					2017
PRIMARY TRA								ы
			arried on a separate and discr nerally receivable by your cal					Н
•		•	II-Band FM Carriage: Under	., .	•	-		Primary Transmitters:
			stem whenever it is received a ived at the headend, with the					Radio
			pyright Office regulations on t					
paper SA1-2 for	rm.				, -			
			each station carried.					
			on is AM or FM. nal was electronically process	sed by the cable	system as a s	enarate	and discrete	
			k mark in the "S/D" column.	sed by the cable	3y3t011 d3 d 3	eparate		
			on (the community to which the	he station is lice	nsed by the FC	C or, in	the case of	
Mexican or Can	adian stations	s, if any,	the community with which the	e station is ident	ified).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
UALL OIGH		0/D		OALL OIGH		0,0		
					·			

Accounting Perio	od: 2021/2						FORM	M SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	MARNE ELK HORN TE	LEPHON	E COMPAN	Y				20172
	SUBSTITUTE CARRIAGE	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	ify every nor	nnetwork televi eriod, under sp	<i>sion program,</i> broadcast by ecific present and former F	/ a <i>distant</i> stat	ulations, or	authorization	ns. For a further
Carriage:	1. SPECIAL STATEMEN				<u></u>			
Special	 During the accounting per 	-			isis anv nonr	network tele	evision prod	ram
Statement and	broadcast by a distant star	•		n ourry, on a ousoillato sa	loio, any nom			NO
Program Log	5					L	YES	
	Note: If your answer is "No	," leave the	rest of this pa	ge blank. If your answer is	s "Yes," you r	nust compl	ete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTE In General: List each subst			ato lino. Lico abbroviation	s whorovor p	occiblo if th		a ie
	clear. If you need more spa				s wherever po			y 15
				vision program ("substitute	e program") tł	nat, during	the account	ing
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.			etball. List specific progra	ann uues, ior e	stample, i	LOVE LUCY	01
				er "Yes." Otherwise enter '				
				asting the substitute progr				
	the case of Mexican or Car			he community to which the			ne FCC or,	IN
				stem carried the substitute			s, with the n	nonth
	first. Example: for May 7 giv							
	to the nearest five minutes.			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."		a program can	led by a system nom 0.01	i. io p.iii. io o	.20.00 p.m		
		er "R" if the	listed progran	n was substituted for prog	ramming that	your syste	m was <i>requ</i>	iired
	to delete under FCC rules a	and regulati	ons in effect d	uring the accounting perio	d: enter the l	etter "P" if t	ha liatad mr	ogram
								ogram
	was substituted for program	nming that y						ogram
		nming that y						
	was substituted for progran effect on October 19, 1976.	nming that y	your system w	as permitted to delete und	ler FCC rules	and regula	TUTE	7. REASON FOR
	was substituted for progran effect on October 19, 1976.	nming that y	your system w	as permitted to delete und	ler FCC rules	and regula	ations in TUTE	
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976. SI	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
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Accounting Period:	2021/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MARNE ELK HORN TELEPHONE COMPANY	S	YSTEM ID# 20172
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enial 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 amount, se	3,633.20
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 \$2 • Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 • 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.	263,800	
	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 thi accounting period is \$52.00.	s six-month	
	Line 1. Royalty fee for accounting period		
	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 \$137,10	0)	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K \$ 148,633.20		
	3. Subtract line 2 from line 1		
		8,633.20	
		<u> </u>	
		5,166.80	
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)	\$	167.33
	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	\$	167.33
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,6	00)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	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)	167.33	
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	\$	187.33
	EFT Trace # or TRANSACTION ID # 26UP7T7H		
	Important: Your remittance must be in the form of an electronic payment payable to the Register o See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more		

Accounting Period:	2021/2					FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNE MARNE ELK HORN	ER OF CABLE SYSTEM: I TELEPHONE COMP	PANY			SYSTEM ID# 20172
M Channels	 to its subscribers, and Enter the total num system carried telev Enter the total num on which the cable s 	I (2) the cable system's t ber of channels on whic ision broadcast stations ber of activated channel system carried television	total numb h the cable Is i broadcast			35 70
N Individual to Be Contacted		CONTACTED IF FURTH this statement of account		RMATION IS NEEDED (Identify an ir	ndividual	
for Further Information	Name Ra	chel Hamilton			Telephone	712-764-6161
	(Nun	D Box 120 nber, street, rural route, apart K Horn, IA 51531 (, town, state, zip)	ment, or suit	te number)		
	Email	rachel@metcte	am.com		Fax (optional) 712-764-277	73
O Certification	 I, the undersigned, he (Owner other othe	ereby certify that (Check of er than corporation or p wner other than corpor of space B and that the of partner) I am an officer (of space B. statement of account and d correct to the best of m	one, <i>but oni</i> partnership ation or pa owner is no (if a corpora i hereby de y knowledg	rtified and signed in accordance with <i>ily one</i> , of the boxes.) ip) I am the owner of the cable system artnership) I am the duly authorized a ot a corporation or partnership; or ration) or a partner (if a partnership) of eclare under penalty of law that all stat ge, information, and belief, and are ma /s/ Rachel Hamilton	as identified in line 1 of space gent of the owner of the cable the legal entity identified as o ements of fact contained here	e B; or e system as identified wner of the cable system
		Typed or printed Title:	Enter an e Enter sign d name: CEO	/S/ Kachel Hamilton electronic signature on the line above to nature using an "/s/ signature" (e.g., /s/ Rachel Hamilton		-
		Date:			1.28.2022	

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 its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

	2021/2	FORM SA1-2E. PAGE 8
GAL NAME OF OV	/NER OF CABLE SYSTEM:	SYSTEM ID
ARNE ELK HO	ORN TELEPHONE COMPANY	2017:
The Satellite F lowing senten "In dete service	TATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- ce: ermining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- s and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
	mation on when to exclude these amounts, see the note on page (vii) of the general instructions paper SA1-2 form.	
-	counting period, did the cable system exclude any amounts of gross receipts for secondary transmissions lite carriers to satellite dish owners?	
NO		
YES. Ente	er the total here and list the satellite carrier(s) below	
Name Mailing Address	Name Mailing Address	
You must com	ASSESSMENT plete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. ation 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 Assessmen
Line 2 Multip	x	
Line 3 Multip	ly line 2 by the number of days late and enter the sum here	
Line 4 Multip	ly line 3 by 0.00274** and enter here	
in spac	e L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6 \$ -	
in opu	(interest charge)	
* To view t	(interest charge) he interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf.</i> For further assistance please he Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
* To view t contact t	he interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please	
* To view t contact t ** This is t NOTE: If you a	he interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please he Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
* To view t contact t ** This is t NOTE: If you a	he interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further assistance please he Licensing Division at (202) 707-8150 or licensing@copyright.gov. he decimal equivalent of 1/365, which is the interest assessment for one day late. are filing this worksheet covering a statement of account already submitted to the Copyright Office, please	

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 the 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 filing, a determination that would be made by a court of law.