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

| STATEMENT OF ACCOUNT | | | FOR COPYRIGI | Return completed workbook by email to: | | | | | | |
|----------------------------------|---------|---|--|---|---|--|--|--|--|--|
| | | ransmissions by | DATE RECEIVED | AMOUNT | | | | | | |
| Cable Syste | ems (| Short Form) | | \$ | For additional information, contact the U.S. Copyright | | | | | |
| General instructions are located | | | 08/26/2022 | | Office Licensing Division at: | | | | | |
| in the first tab | of this | s workbook | | ALLOCATION NUMBER | Tel: (202) 707-8150 | | | | | |
| | | | | | | | | | | |
| Α | ACC | OUNTING PERIOD COVERED | BY THIS STATEMENT: (Y | 'YYY/(Period)) | | | | | | |
| | | 2022/1 | Period 1 = January 1 - June 30 | Period 2 = July 1 - December 31 | | | | | | |
| | | 20221 | Barcode Data Filing Period (optional | I - see instructions) | | | | | | |
| Accounting Period | | | | | | | | | | |
| в | | Instructions: Give the full legal name of the owner of th title of the subsidiary, not that of the pare | | sidiary of another corporation, give the full c | orporate | | | | | |
| Owner | | List any other name or names under which 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 | g. If not, enter the system's ID numbe | r assigned by the Licensing Division. | 34163 | | | | | |
| | | LEGAL NAME OF OWNER/MAILIN | G ADDRESS OF CABLE SYSTEM | 1 | | | | | | |
| | | CABLE ONE, INC. | | | | | | | | |
| | | BUSINESS NAME(S) OF OWNER OF | F CABLE SYSTEM (IF DIFFEREN | Т) | | | | | | |
| | | | | | | | | | | |
| | | MAILING ADDRESS OF OWNER OF 210 E EARLL DRIVE | CABLE SYSTEM | | | | | | | |
| | | (Number, street, rural route, apartment, or suite number) PHOENIX, AZ 85012-2626 (City, town, state, zip) | | | | | | | | |
| С | | | | entify the business and operation of the | | | | | | |
| System | name | es already appear in space B. In line | 2, give the mailing address of t | he system, if different from the addre | ss given in space B | | | | | |
| System | 1 | SPARKLIGHT | | | | | | | | |
| | | MAILING ADDRESS OF CABLE SYSTEM | : | | | | | | | |
| | 2 | 1930 BREWER RD. (Number, street, rural route, apartment, or suite no | umber) | | | | | | | |
| | | DYERSBURG, TN 83024 (City, town, state, zip code) | | | | | | | | |
| | 1 | P - · · · · / | | | | | | | | |

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: CABLE ONE, INC. | SYSTEM ID: 34163 | | | | | |
|----------------------|---|--|--|--|--|--|--|
| | Instructions: List each separate community served by the cable system. A "con | | | | | | |
| D | "a separate and distinct community or municipal entity (including unincorporat discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that as the "first community." Please use it as the first community on all future filin | ted communities within unincorporated areas and including single, you list will serve as a form of system identification hereafter known gs. | | | | | |
| Area Served | Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city. | | | | | | |
| _ | | STATE | | | | | |
| First Community | FRIENDSHIP | | | | | | |
| dd Rows as Necessary | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| | FOR LEGAL NAME OF OWNER OF CABLE SYSTEM: | | | | | | | | | | |
|-------------------------------|--|--------------------|---------|------------------------------|----------|--------------------|-------------|-----------------------|----------------|--|--|
| Name | CABLE ONE, INC. | | | | | | | 010 | TEM II 3416 | | |
| | SECONDARY TRANSMISSION | | IBSCB | | ATES | | | | | | |
| Ε | In General: The information in s | | | | | ry transmission | service of | the cable | | | |
| | system, that is, the retransmission | | | | | | | | | | |
| Secondary | about other services (including p | | | | | | those exist | ting on the | | | |
| Transmission Service: Sub- | last day of the accounting period Number of Subscribers: Both | | | | | | ble system | broken | | | |
| scribers and | 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. In general, you can compute the number of subscribers in | | | | | | | | | | |
| Rates | each category by counting the number of billings in that category (the number of persons or organizations charged | | | | | | | | | | |
| | separately for the particular serv Rate: Give the standard rate of | | | | | • | , | ac and the | | | |
| | unit in which it is generally billed | - | - | | | | | - | | | |
| | category, but do not include disc | | | | | | o mann a | particular rate | | | |
| | 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 | | | | •• | | • | | | | |
| | first set" and would be counted of | | | | | | | | | | |
| | Block 2: If your cable system | | | | | | | | | | |
| | printed in block 1 (for example, t with the number of subscribers a | | | | | | | | | | |
| | sufficient. | | e ngin | | | | | | | | |
| | BLO | DCK 1 | | | | | BLOCK 2 | | | | |
| | CATEGORY OF SERVICE | NO. OF SUBSCRIB | | RATE | САТИ | EGORY OF SEF | | NO. OF SUBSCRIBERS | RA | | |
| | Residential: | SOBOCIAL | | | U/LI | | (VIOL | GODOCINIDEIKO | | | |
| | Service to first set | | 18 | 42.00 | IPTV | | | 2 | 54 | | |
| | Service to additional set(s) | | 25 | 2.75 | | | | | | | |
| | • FM radio (if separate rate) | | | | | | | | | | |
| | Motel, hotel | | | | | | | | | | |
| | Commercial | | 1 | 42.00 | | | | | | | |
| | Converter | | | | | | | | | | |
| | Residential | | | | | | | | | | |
| | Non-residential | | | | | | | | | | |
| | SERVICES OTHER THAN SEC | | | SSIONS: RATE | s | | | | | | |
| - | In General: Space F calls for ra | | | | - | all your cable sys | stem's serv | vices that were | | | |
| F | not covered in space E, that is, t | | | | | | | | | | |
| Services | service for a single fee. There an furnished at cost or (2) services | | | | | | | | | | |
| Other Than | | | | | | | | | | | |
| Secondary | 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. | | | | | | | | | | |
| ransmissions: | Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. | | | | | | | | | | |
| Rates | 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) description and include the rate for each. | | | | | | | | | | |
| | | BLO | CK 1 | | | | | BLOCK 2 | | | |
| | CATEGORY OF SERVICE | RATE | | GORY OF SER | VICE | RATE | CATEG | ORY OF SERVICE | RA | | |
| | Continuing Services: | | Install | ation: Non-res | idential | | | | | | |
| | • Pay cable | 57.75 | | otel, hotel | | 90.00 | | | 69. | | |
| | Pay cable—add'l channel | 16.00 | | ommercial | | 90.00 | | | 16 | | |
| | Fire protection | | | y cable | | | | | 19. | | |
| | •Burglar protection | | | iy cable-add'l cl | nannel | | SHOW | IIME | 10 | | |
| | Installation: Residential | 00.00 | | e protection | | | HBO | A Y | 19 | | |
| | First set | 90.00 | | Irglar protection | | | CINEM | AX | 19 | | |
| | Additional set(s) EM radio (if separate rate) | 60.00 | | services: | | 00.00 | | | | | |
| | FM radio (if separate rate) Converter | | | connect sconnect | | 90.00 | | | | | |
| | - Converter | | | sconnect utlet relocation | | 90.00 | | | | | |
| | | | - | | 000 | | | | | | |
| | 1 | | - 1010 | ove to new add | 600 | 30.00 | | | | | |

| Name | LEGAL NAME OF OWNER O |)F CABLE SYSTEM: | | SYSTE | | | | | |
|------------------------|---|--|---|--|--|--|--|--|--|
| Name | CABLE ONE, INC. | | | | | | | | |
| | PRIMARY TRANSMITTERS: TELEVISION | | | | | | | | |
| G | | dentify every television station (including tr em during the accounting period, <i>except</i> | | | | | | | |
| U | | s in effect on June 24, 1981, permitting the | | | | | | | |
| Primary ansmitters: | | (e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph. | (e)(2) and (4))]; and (2) certain s | tations carried on a | | | | | |
| Television | Substitute Basis Station | s: With respect to any distant stations car | rried by your cable system on a s | ubstitute program | | | | | |
| | | rules, regulations, or authorizations: ere in space G—but do list it in space I (the | e Special Statement and Progran | n Log)—if the | | | | | |
| | station was carried only o | n a substitute basis. I also in space I, if the station was carried | both on a substitute basis and a | so on some other | | | | | |
| | basis. For further informat | ion concerning substitute basis stations, s | see page (v) of the general instru | ctions. | | | | | |
| | | on's call sign. <i>Do not</i> report origination pro ed with a station according to its over-the- | - | - | | | | | |
| | "WETA-2" as the same on | n the form. nel number the FCC assigned to the telev | vision station for broadcasting over | ar the air in its community | | | | | |
| | of license. For example, \ | WRC is channel 4 in Washington, D.C. | | | | | | | |
| | | ch case whether the station is a network st tering the letter "N" (for network), "N-M" (fo | • | | | | | | |
| | (for independent multicast | t), "E" (for noncommercial educational), or | "E-M" (for noncommercial educa | | | | | | |
| | | terms, see page (iv) of the general instruc ion of each station. For U.S. stations, list t | | n is licensed by the | | | | | |
| | 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 | | | | | |
| | WATN | 25 | N | MEMPHIS, TN | | | | | |
| | WBBJ | 35 | Ν | JACKSON, TN | | | | | |
| Rows as Necessary | WBBJ-2 | 35 | N-M | JACKSON, TN | | | | | |
| | WLMT-2 | 31 | I-M | MEMPHIS, TN | | | | | |
| | WHBQ | 13 | I | MEMPHIS, TN | | | | | |
| | WKNO | 29 | E | MEMPHIS, TN | | | | | |
| | WLJT | 27 | Е | LEXINGTON, TN | | | | | |
| | | | | | | | | | |
| | WLMT | 31 | I | MEMPHIS, TN | | | | | |
| | WLMT WMC | <u>31</u> 5 | IN | | | | | | |
| | | | I N I-M | MEMPHIS, TN | | | | | |
| | WMC | 5 | | MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 | 5 5 5 | I-M | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX | 5 5 5 33 | I-M I-M I | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG | 5 5 5 33 28 | I-M I-M I N | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG WATN-2 | 5 5 5 33 28 25 | I-M I-M I N I-M | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG WATN-2 WMC-4 | 5 5 5 33 28 25 5 | I-M I-M I I I I-M I-M | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG WATN-2 WMC-4 WANT-SIMUL | 5 5 5 33 28 25 5 25 25 | I-M I-M I I N I-M I-M N | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG WATN-2 WMC-4 WANT-SIMUL WMC-SIMUL | 5 5 5 33 28 25 5 25 5 5 | I-M I-M I I N I-M N N N | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG WATN-2 WMC-4 WANT-SIMUL WMC-SIMUL WREG-SIMUL | 5 5 5 33 28 25 5 25 5 25 5 28 | I-M I-M I I N I-M I-M N | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG WATN-2 WMC-4 WANT-SIMUL WMC-SIMUL WREG-SIMUL WHBQ-SIMUL | 5 5 5 33 28 25 5 25 5 25 5 28 13 | I-M I-M I I N I-M N N N | MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG WATN-2 WMC-4 WANT-SIMUL WMC-SIMUL WREG-SIMUL | 5 5 5 33 28 25 5 25 5 25 5 28 | I-M I-M I I N I-M N N N | MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN | | | | | |
| | WMC WMC-2 WMC-3 WPXX WREG WATN-2 WMC-4 WANT-SIMUL WMC-SIMUL WREG-SIMUL WHBQ-SIMUL | 5 5 5 33 28 25 5 25 5 25 5 28 13 | I-M I-M I I N I-M N N N | MEMPHIS, TN MEMPHIS, TN | | | | | |

| EGAL NAME OF | | CABLE S | ITSTEM: | | | | | SYSTEM I 341 |
|--|---|--|---|--|---|--|---|----------------------------------|
| | t every radio s | station ca | arried on a separate and discr nerally receivable by your cat | | | | | н |
| eceivable if (1) on the basis of or detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf idgnal, indicate Column 4: G | it is carried b monitoring, to prmation abourn. Identify the call tate whether the the radio stat this by placing tive the station | y the sys be rece it the Co I sign of the statio tion's sig g a chec n's locati | II-Band FM Carriage: Under (stem whenever it is received a ived at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. ion (the community to which the the community with which the | at the system's he system's FM anter this point, see pa sed by the cable s ne station is licen | eadend, and (2 enna, during c ge (v) of the c system as a s sed by the FC | 2) it can certain s general i eparate | be expected, tated intervals. nstructions in the. and discrete | Primary Transmitters Radio |
| CALL SIGN | AM or FM | S/D | LOCATION OF STATION | CALL SIGN | AM or FM | S/D | LOCATION OF STATION | |
| OALL DIGIN | AWOTIW | 0,0 | | OALL OIGH | AWOTIW | 0/0 | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | · | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | · | · | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | · | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | 1 | | | | | | |
| | | | | | | | | |

| Accounting Perio | od: 2022/1 | | | | | | FORM | 1 SA1-2E. PAGE 5. |
|----------------------|---|------------------------------|---------------------------|--|---------------------------------|-------------------------------|-----------------------|---------------------------|
| | LEGAL NAME OF OWNER OF | CABLE SYS | TEM: | | | | | SYSTEM ID# |
| Name | CABLE ONE, INC. | | | | | | | 34163 |
| | SUBSTITUTE CARRIAGE | E: SPECIA | L STATEME | NT AND PROGRAM LO | G | | | |
| | In General: In space I, ident | ify every noi | nnetwork televi | sion program, broadcast by | a distant stat | tion, that you | r cable syst | em carried on a |
| | substitute basis during the a | | | | | | | |
| Substitute | explanation of the programm | | | | he general ins | tructions in t | he paper S | A1-2 form. |
| Carriage: Special | 1. SPECIAL STATEMENT | - | | | | | | |
| Statement and | During the accounting per | | ir cable systen | n carry, on a substitute ba | sis, any nonr | etwork telev | | |
| 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 | te the prog | ram |
| | log in block 2. | | | | | | | |
| | 2. LOG OF SUBSTITUTE | | | ata lina. Llas abbraviations | | aaibla iftha | ir meenine | , in |
| | In General: List each subst clear. If you need more spa | | | | s wherever po | ossidie, ii the | er meaning | 15 |
| | Column 1: Give the title | of every no | nnetwork telev | vision program ("substitute | | | | |
| | period, was broadcast by a | | | | | | | |
| | under certain FCC rules, re Do not use general categor | guiations, c ies like "mo | or authorization | etball." List specific progra | neral instruction titles, for e | ons for furth xample, "I L | er informatiove Lucv" | or |
| | "NBA Basketball: 76ers vs. | Bulls." | | | | 1 / | , | |
| | | | | er "Yes." Otherwise enter " | | | | |
| | | | | asting the substitute progr he community to which the | | ensed by th | e FCC or, i | 'n |
| | the case of Mexican or Car | adian statio | ons, if any, the | community with which the | e station is id | entified). | | |
| | Column 5: Give the mor first. Example: for May 7 give | • | when your sys | stem carried the substitute | e program. Us | se numerals, | with the m | onth |
| | | | e substitute pro | ogram was carried by you | r cable syster | n. List the tir | nes accura | ately |
| | to the nearest five minutes. | | | | | | | - |
| | stated as "6:00–6:30 p.m." Column 7: Enter the left | er "R" if the | listed program | n was substituted for prog | ramming that | vour system | was requ | ired |
| | to delete under FCC rules a | | | | | | | |
| | was substituted for program effect on October 19, 1976. | | our system w | as permitted to delete und | ler FCC rules | and regulat | ions in | |
| | | | | | | | | |
| | | | | | | N SUBSTIT | | |
| | | 2. LIVE? | E PROGRAM 3. STATION'S | | 5. MONTH | AGE OCCU 6. TIN | | 7. REASON FOR DELETION |
| | 1. TITLE OF PROGRAM | Yes or No | CALL SIGN | 4. STATION'S LOCATION | AND DAY | FROM - | то | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | = | | ······ |
| | | | | | | | - | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| Accounting Period: | 2022/1 | FORM S | A1-2E. PAGE 6. |
|------------------------------------|---|-------------------------------|---------------------------|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. | S | WSTEM ID# 34163 |
| K Gross Receipts | GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En 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 amount, see | 8,830.23 oss receipts) |
| L Copyright Royalty Fee | COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> 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 \$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 accounting period is \$52.00 | this six-mon | |
| | 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 | \$ | 52.00 |
| | BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1 | 00) | |
| | 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 | | ghts! |

| Accounting Period: | 2022/1 | | | | FORM SA1-2E. PAGE 7 |
|---|---|--|---|--|---------------------|
| Name | LEGAL NAME OF OWNER OF CAN CABLE ONE, INC. | BLE SYSTEM: | | | SYSTEM ID# 34163 |
| M Channels | to its subscribers, and (2) the of1. Enter the total number of charsystem carried television broad2. Enter the total number of action which the cable system carried | cable system's total num annels on which the cab adcast stations tivated channels arried television broadca | | e accounting period. | 20 275 |
| N Individual to Be Contacted | INDIVIDUAL TO BE CONTAC we can contact about this state | | DRMATION IS NEEDED (Identify a | an individual to whom | |
| for Further Information | Name JENAE H | | | Telephone 60 | 02-364-6092 |
| | (Number, street | ARLL DRIVE t, rural route, apartment, or su (, AZ 85012-2626 te, zip) | ile number) | | |
| | Email | ENAE.HECK@CABLE | EONE.BIZ | Fax (optional) 602-364-6013 | |
| O Certification | I, the undersigned, hereby cert (Owner other than cert) (Agent of owner other in line 1 of space X (Officer or partner) in line 1 of space I have examined the statement | tify that (Check one, <i>but o</i> corporation or partnersh ther than corporation or p B and that the owner is n I am an officer (if a corpo B. t of account and hereby o to the best of my knowled | ip) I am the owner of the cable system partnership) I am the duly authorized iot a corporation or partnership; or | tern as identified in line 1 of space B; ed agent of the owner of the cable sy) of the legal entity identified as owne statements of fact contained herein | stem as identified |
| | | | /s/ Quynh Tran electronic signature on the line abov gnature using an "/s/ signature" (e.g., | | |
| | | | QUYNH TRAN PRESIDENT & & TREASU on held in corporation or partnership) | IRER | |
| | Di | late: | | August 26, 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 fing, a determination that would be made by a court of law.

| ccounting Period: 2 | 022/1 | FORM SA1-2E. PAGE 8 |
|--|---|--|
| EGAL NAME OF OW | IER OF CABLE SYSTEM: | SYSTEM ID |
| ABLE ONE, INC | 2 | 3416 |
| The Satellite Ho lowing sentence "In deter service of scribers For more inform located in the p During the acco | CATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS ome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- e: mining 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- and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." mation on when to exclude these amounts, see the note on page (vii) of the general instructions aper SA1-2 form. punting period, did the cable system exclude any amounts of gross receipts for secondary transmissions the carriers to satellite dish owners? | P Special Statement Concerning Gross Receipts Exclusion |
| X NO | the total here and list the satellite carrier(s) below | |
| Name Mailing Address | Name Mailing Address | |
| You must comp | ASSESSMENT lete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. ion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. | Q |
| Line 1 Enter th | e 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 3 by 0.00274** and enter here L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 | |
| | e interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please e Licensing Division at (202) 707-8150 or licensing@loc.gov. | |
| ** This is the | e decimal equivalent of 1/365, which is the interest assessment for one day late. | |
| • | e filing this worksheet covering a statement of account already submitted to the Copyright Office, please wner, address, first community served, ID number, and accounting period as given in the original filing. | |
| Owner Address | | |
| ID number First community | | |
| Accounting peri | od | |

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 th 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.