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 COPYRIG	Return completed workbook by email to:				
for Seconda	ary Tr	ansmissions by	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov			
Cable Systems (Short Form) General instructions are located in the first tab of this workbook			2/23/2023	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150			
Α	ACC	OUNTING PERIOD COVERED E	BY THIS STATEMENT: (YY	YY/(Period))				
		2022/02	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31				
		20222	Barcode Data Filing Period (optional	- see instructions)				
Accounting Period								
В		Instructions: Give the full legal name of the owner of the the subsidiary, not that of the parent corpo		liary of another corporation, give the full corp	orate title of			
Owner		List any other name or names under which	the owner conducts the business of th	e cable system.				
		If there were different owners during the a statement of account and royalty fee paym		ne last day of the accounting period should su iod.	bmit a single			
		Check here if this is the system's first filing	. If not, enter the system's ID number a	ssigned by the Licensing Division.	63605			
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM					
		Burlington, Brighton & Wheatland To	elephone Company, LLC					
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)					
		MAILING ADDRESS OF OWNER OF 0	CABLE SYSTEM					
		(Number, street, rural route, apartment, or suite no Madison, WI 53717	umber)					
		(City, town, state, zip)						
С				tify the business and operation of the e system, if different from the address				
System	1	IDENTIFICATION OF CABLE SYSTEM:						
		MAILING ADDRESS OF CABLE SYSTEM						
	2	(Number, street, rural route, apartment, or suite n	umber)					
		(City, town, state, zip code)						
L								

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Burlington, Brighton & Wheatland Telephone Company, LLC	63605
D	Instructions: List each separate community served by the cable system. A "commun separate and distinct community or municipal entity (including unincorporated com unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will se community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile	munities within unincorporated areas and including single, discrete erve as a form of system identification hereafter known as the "first
Area Served	city.	nome parks should be reported in parentneses below the identified
F 1(CITY OR TOWN Wheatland	STATE WI
First Community	Bohners Lake	WI
-		
Rows as Necessary		

	LEGAL NAME OF OWNER OF C							FORM SA1	TEM ID	
Name	Burlington, Brighton & Wheatland Telephone Company, LLC									
Е	SECONDARY TRANSMISSION									
	In General: The information in s system, that is, the retransmissi			-		•				
Secondary	about other services (including p									
Transmission	last day of the accounting period	d (June 30 or D	ecembe	er 31, as the ca	se may be	e).		Ū		
Service: Sub-	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken									
scribers and Rates	down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged									
Ruco	separately for the particular serv			0,0				onargea		
	Rate: Give the standard rate of	-	-	•				-		
	unit in which it is generally billed				ny standa	rd rate variation	s within a	particular rate		
	category, but do not include disc Block 1: In the left-hand block				ies of sec	ondarv 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 first set" and would be counted o					i în the count un	der "Servi	ce to the		
						service that are	different	from those		
	Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together									
	with the number of subscribers and rates, in the right-hand block. A two- or three-word description							service is		
	sufficient. BL				BLOC	< 2				
		D				NO. OF				
	CATEGORY OF SERVICE Residential:	SUBSCRIBI	ERS	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RATI	
	Service to first set		200	\$25/mo						
	Service to additional set(s)		200	<i>\$25/110</i>						
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial									
	Converter									
	Residential		200	\$6/Mo.						
	Non-residential									
									1	
	SERVICES OTHER THAN SEC									
F	In General: Space F calls for ran not covered in space E, that is,	•	,		•					
-	• • •									
Services	service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the									
Other Than	amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis,									
Secondary ransmissions:	enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.									
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							e 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		RATE	CATEG	ORY OF SERVICE	RATE	
	Continuing Services:			ation: Non-resi	dential					
	Pay cable Add'l abannal	\$8.00-\$15.00		tel, hotel		£0. £50.00				
	Pay cable—add'l channel Fire protection			mmercial (cablo		\$0 - \$50.00				
	Fire protection Burglar protection		· · ·	/ cable / cable-add'l ch	annal					
	 Burglar protection Installation: Residential 			protection						
	First set	\$0-\$50.00		glar protection						
	Additional set(s)	\$0-\$50.00		services:						
	• FM radio (if separate rate)	φ 0- φ00.00		connect		\$0-\$25.00				
	• Converter			connect		φ0 φ20.00				
				tlet relocation		19.98-39.96				
			- 1010	ve to new addre	ess					

Nama	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	Burlington, Brighton	& Wheatland Telephone Comp	any, LLC	636
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ransmitters: Television	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a	ntify every television station (including the n during the accounting period, <i>except</i> (n effect on June 24, 1981, permitting the ()(2) and (4), or 76.63 (referring to 76.61 s explained in the next paragraph. : With respect to any distant stations ca iles, regulations, or authorizations: a in space G—but do list it in space I (the a substitute basis. Ilso in space I, if the station was carried in concerning substitute basis stations, s	 stations carried only on a part-tile carriage of certain network progra (e)(2) and (4))]; and (2) certain statistic rried by your cable system on a sub- e Special Statement and Program is both on a substitute basis and also 	me basis under ams [sections tions carried on a ostitute program Log)—if the o on some other
	Column 1: List each station	n's call sign. <i>Do not</i> report origination pr	ogram services such as HBO, ESF	PN, etc. Identify each
	"WETA-2" as the same on t Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio	I with a station according to its over-the- he form. I number the FCC assigned to the telev RC is channel 4 in Washington, D.C. case whether the station is a network s ring the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), oi rms, see page (iv) of the general instruc- n of each station. For U.S. stations, list to dian stations, if any, give the name of the	tation, an independent station, or a or network multicast), "I" (for indep "E-M" (for noncommercial educati stions in the paper SA1-2 form. the community to which the station	the air in its community noncommercial endent), "I-M" ional multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WISN	12.1	Ν	Milwaukee, WI
	WISN-DT2	12.2	N-M	Milwaukee, WI
vs as Necessary	WDJT	58.1	Ν	Milwaukee, WI
	WBME-CD	58.2	<u> </u>	Milwaukee, WI
	WITI	6.1	Ν	Milwaukee, WI
	WITI-DT2	6.2	N-M	Milwaukee, WI
	WTMJ	4.1	Ν	Milwaukee, WI
	WTMJ-DT2	4.2	N-M	Milwaukee, WI
	WTMJ-DT3	4.3	N-M	Milwaukee, WI
	WTMJ-DT4	4.4	N-M	Milwaukee, WI
	WTMJ-DT5	4.5	N-M	Milwaukee, WI
	WMLW	49.1	I	Racine, WI
	WMLW-DT2	49.2	I-M	Racine, WI
	WMLW-DT3	49.3	I-M	Racine, WI
	WMLW-DT4	49.4	I-M	Racine, WI
	WVTV	18.1	I	Milwaukee, WI
	WVTV-DT2	18.2	I-M	Milwaukee, WI
	WVTV-DT3	18.3	I-M	Milwaukee, WI
	WVTV-DT4	18.4	I-M	Milwaukee, WI
	WYTU	63.1	<u> </u>	Milwaukee, WI
	WYTU-DT2	63.2	I-M	Milwaukee, WI
	WPXE	55.1	I	Kenosha, WI
		55.1 10.1	l E	Kenosha, WI Milwaukee, WI

ounting Period:	-							
Name	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:			SYSTEM 636			
	Burlington, Brighton & Wheatland Telephone Company, LLC							
	PRIMARY TRANSMITTERS:	TELEVISION						
G	In General: In space G, ide	/						
Ŭ	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 Transmitters: Television		e)(2) and (4), or 76.63 (referring to 76.61)	(e)(2) and (4))]; and (2) certain sta	tions carried on a				
		as explained in the next paragraph. s: With respect to any distant stations car	rried by your cable system on a su	bstitute program				
	basis under specific FCC ru	ules, regulations, or authorizations:	Created Chatemant and Drawner	l.o.r.) ;f.th.o.				
	station was carried only on	e in space G—but do list it in space I (the a substitute basis.	e Special Statement and Program	Log)—II the				
		also in space I, if the station was carried I						
		on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination pro						
	multicast stream associated	d with a station according to its over-the-a	-	-				
	"WETA-2" as the same on Column 2: Give the channel	the form. el number the FCC assigned to the televi	ision station for broadcasting over	the air in its community				
		/RC is channel 4 in Washington, D.C.	loon olalion for produceding ever					
	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, "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).							
		S	or network multicast), "I" (for indep					
	(for independent multicast) For the meaning of these te	, "E" (for noncommercial educational), or erms, see page (iv) of the general instruct	or network multicast), "I" (for indep "E-M" (for noncommercial educat tions in the paper SA1-2 form.	ional multicast).				
	(for independent multicast), For the meaning of these te Column 4: Give the location	, "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th	or network multicast), "I" (for indep "E-M" (for noncommercial educat tions in the paper SA1-2 form. he community to which the station	ional multicast). is licensed by the				
	(for independent multicast), For the meaning of these te Column 4: Give the location	, "E" (for noncommercial educational), or erms, see page (iv) of the general instruct	or network multicast), "I" (for indep "E-M" (for noncommercial educat tions in the paper SA1-2 form. he community to which the station	ional multicast). is licensed by the				
	(for independent multicast), For the meaning of these te Column 4: Give the location	, "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th	or network multicast), "I" (for indep "E-M" (for noncommercial educat tions in the paper SA1-2 form. he community to which the station	ional multicast). is licensed by the				
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	(for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Cana	, "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th Idian stations, if any, give the name of the	or network multicast), "I" (for indep "E-M" (for noncommercial educat stions in the paper SA1-2 form. he community to which the station e community with which the station	ional multicast). is licensed by the is identified.	TATION			
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	(for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Cana 1. CALL SIGN WMVT WMVT-DT3	, "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list the idian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 36.1 36.2	or network multicast), "I" (for indep "E-M" (for noncommercial educat etions in the paper SA1-2 form. the community to which the station community with which the station 3. TYPE OF STATION E E-M	ional multicast). is licensed by the is identified. 4. LOCATION OF S Milwaukee, WI Milwaukee, WI Milwaukee, WI	TATION			
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	(for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Cana 1. CALL SIGN WMVT WMVT-DT3 WVCY	, "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list the idian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 36.1 36.2 30.1	or network multicast), "I" (for indep "E-M" (for noncommercial educat etions in the paper SA1-2 form. the community to which the station community with which the station 3. TYPE OF STATION E E-M	ional multicast). is licensed by the is identified. 4. LOCATION OF S Milwaukee, WI Milwaukee, WI Milwaukee, WI				
	(for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Cana 1. CALL SIGN WMVT WMVT-DT3 WVCY	, "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list the idian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 36.1 36.2 30.1	or network multicast), "I" (for indep "E-M" (for noncommercial educat etions in the paper SA1-2 form. the community to which the station community with which the station 3. TYPE OF STATION E E-M	ional multicast). is licensed by the is identified. 4. LOCATION OF S Milwaukee, WI Milwaukee, WI Milwaukee, WI				
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Accounting Period: 2022/02 FORM						M SA1-2E. PAGE 4.		
LEGAL NAME O	F OWNER OF	CABLE S	YSTEM:					SYSTEM ID#
Burlington,	Brighton &	Wheat	tland Telephone Compa	any, LLC				6360
PRIMARY TRA		RADIO						
			arried on a separate and discre				ied on an	H
all-band basis whose signals were generally receivable by your cable system during the accounting period.								
Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally							Primary	
			tem whenever it is received a					Transmitters:
			ved at the headend, with the s pyright Office regulations on t					Radio
paper SA1-2 fo			pyngnt Onice regulations on t	inis point, see paç	ge (v) of the ge	eneral in		
		l sign of e	each station carried.					
			on is AM or FM.					
		-	nal was electronically process	ed by the cable s	ystem as a se	parate a	nd discrete	
			c mark in the "S/D" column. on (the community to which th	e station is licens	ed by the FC(Corint	he case of	
			the community with which the			5 01, 111		
			·		,			
	A.A	0/D			A.M	0/D		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
N/A						L		
						L		
						 		
						+		
						+		
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Accounting Perio	od: 2022/02					FOR	M SA1-2E. PAGE 5
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				SYSTEM ID#
Name	Burlington, Brighton	& Wheatla	nd Telephon	e Company, LLC			63605
	SUBSTITUTE CARRIAG	E: SPECIA	L STATEMEN	T AND PROGRAM LOG			
Substitute	In General: In space I, iden substitute basis during the a explanation of the programm	accounting pe	eriod, under spe	cific present and former FC	C rules, regu	lations, or authorizations.	For a further
Carriage:	1. SPECIAL STATEMEN	T CONCER	NING SUBST	TUTE CARRIAGE			
Special	 During the accounting per 	-			is any nonne	twork television progra	n
Statement and	broadcast by a distant sta	-		our, j, on a casonato suc	.e, any norm		
Program Log	broadcast by a distant sta					YES	X NO
	Note: If your answer is "No log in block 2.	o", leave the	rest of this pag	e blank. If your answer is	"Yes," you m	ust complete the progra	m
	2. LOG OF SUBSTITUT		MS				
	In General: List each subs			te line. Lise abbreviations	wherever no	ssible, if their meaning i	e
	clear. If you need more spa				wherever po	ssible, if their meaning i	3
				ision program ("substitute	program") th	at, during the accounting	q
	period, was broadcast by a						
	under certain FCC rules, re	egulations, o	r authorization	s. See page (v) of the gen	eral instructio	ons for further informatio	n.
	Do not use general catego		vies" or "baske	tball." List specific prograr	n titles, for ex	ample, "I Love Lucy" or	
	"NBA Basketball: 76ers vs			<i>"</i>			
				r "Yes." Otherwise enter "N sting the substitute progra			
				the community to which the		ensed by the ECC or in	
	the case of Mexican or Ca		· ·	5		,	
				tem carried the substitute			nth
	first. Example: for May 7 g	ive "5/7."					
				gram was carried by your			ely
	to the nearest five minutes		a program carri	ed by a system from 6:01:	15 p.m. to 6:	28:30 p.m. should be	
	stated as "6:00–6:30 p.m."		listed are group	was substituted for press	una una in ar the art i		a d
	to delete under FCC rules			was substituted for progra			
	was substituted for program						ram
	effect on October 19, 1976						
	,						1
					WHE	EN SUBSTITUTE	
	:	SUBSTITUT	E PROGRAM		CARR	IAGE OCCURRED	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. TIMES FROM — TO	DELETION
	N/A					_	
			+			<u> </u>	
						_	
			+			<u> </u>	
						_	
		-†					
		-+					
						_	
						_	
		-+					
						_	
						_	
		-+					
						_	
		-+					

Accounting Period:	2022/02	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Burlington, Brighton & Wheatland Telephone Company, LLC	SI	STEM ID# 63605
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Entral 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	,003.06 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 \$2 Use block 3 if the amount of gross receipts in space K is more than \$60,800 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	- 1 1	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for th accounting period is \$52.00	his six-month	
	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		52.00
	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		
	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
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2022/02	FO	RM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Burlington, Brighton & Wheatland Telephone Company, LLC		SYSTEM ID# 63605
M Channels	 CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried televito its subscribers, and (2) the cable system's total number of activated channels during the according to the total number of channels on which the cable system carried television broadcast stations	unting period.	
	on which the cable system carried television broadcast stations and nonbroadcast services	159	
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an indivi- we can contact about this statement of account.)	dual to whom	
for Further Information	Name Mitchell Maier	Telephone (608) 886-8210	
	Address 525 Junction Rd (Number, street, rural route, apartment, or suite number) Madison, WI 53593 (City, town, state, zip) Email <u>Finance@tdstelecom.com</u>	-ax (optional	
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copy I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as id (Agent of owner other than corporation or partnership) I am the duly authorized agent in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the le in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statement are true, complete, and correct to the best of my knowledge, information, and belief, and are made in [18 U.S.C., Section 1001(1986)] 	entified in line 1 of space B; or of the owner of the cable system as identified gal entity identified as owner of the cable system s of fact contained herein	
	X /s/ Sharon V. Tisdale Enter an electronic signature on the line above to certil Enter signature using an "/s/ signature" (e.g., /s/ John Typed or printed name: Sharon V. Tisdale Title: Assistant Treasurer Critte of official position held in corporation or partnership) Date: F		

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

Accounting Period: 2022/02	FORM SA1-2E. PAGE 8
EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Burlington, Brighton & Wheatland Telephone Company, LLC	63605
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 fol- lowing 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 sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
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. \$	
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. 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@copyright.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 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	d on this

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.