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

Return completed workbook

STATEM	ENT OF ACCOUNT FOR COPYRIGHT OFFICE USE ONLY		by email to:	
for Seconda	ry Transmissions by	DATE RECEIVED	AMOUNT	
	ems (Short Form)			<u>coplicsoa@loc.gov</u>
General instru	of this workbook	2/28/2020	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))	
	2019/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional	I - see instructions)	
Accounting Period				
	Instructions:			
В			sidiary of another corporation, give the full c	corporate
Owner	List any other name or names under whic	h the owner conducts the business of	the cable system.	
	If there were different owners during the single statement of account and royalty for		the last day of the accounting period should nting period.	d submit a
	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.	2179
	LEGAL NAME OF OWNER/MAILIN		a	
		GADDRESS OF CABLE STSTEN	n	
	MEDIACOM SOUTHEAST LLC (GRE	· ·		
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFEREN	Т)	
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
	ONE MEDIACOM WAY (Number, street, rural route, apartment, or suite ni	umber)		
	MEDIACOM PARK, NY 10918			
	(City, town, state, zip)			
<u> </u>	INSTRUCTIONS: In line 1, give any busir		,	5
C	names 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			
	MEDIACOM SOUTHEAST LLC			
	MAILING ADDRESS OF CABLE SYSTEM	:		
	2 5973 HWY. 90 W. (Number, street, rural route, apartment, or suite no	umber)		
	THEODORE, AL 36582			
	(City, town, state, zip code)			

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Nume	MEDIACOM SOUTHEAST LLC (GREENSBORO, AL)	2179
	Instructions: List each separate community served by the cable system. A "communit	
D	"a separate and distinct community or municipal entity (including unincorporated con	
U	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis	t will serve as a form of system identification hereafter known
	as the "first community." Please use it as the first community on all future filings.	
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho	ome parks should be reported in parentheses below the
Area	identified city.	
Served		
		OTATE
_		STATE
First	GREENSBORO	AL
Community	HALE COUNTY	AL
	LINDEN	AL
s as Necessary		

								FORM SA1-	2E. PAGE
Name	LEGAL NAME OF OWNER OF C MEDIACOM SOUTHEAS							313	217
	MEDIACOW SOUTHEAS		EENS	BURU, AL)					
Е	SECONDARY TRANSMISSION								
	In General: The information in s system, that is, the retransmission	•		-		•			
Secondary	about other services (including p								
Transmission	last day of the accounting period	l (June 30 or D	ecemb	er 31, as the ca	se may be	e).		C C	
Service: Sub-	Number of Subscribers: Both						,	,	
scribers and Rates	down by categories of secondar each category by counting the n			•		•			
Nates	separately for the particular serv	•		0,0			<i>,</i>	scharged	
	Rate: Give the standard rate of							ge and the	
	unit in which it is generally billed				ny standa	rd rate variation	is within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				ies of sec	ondary transmi	ssion servi	ce that cable	
	systems most commonly provide	•		0		,			
	that applies to your system. Not								
	categories, that person or entity						•		
	subscriber who pays extra for ca first set" and would be counted of					d in the count ur	nder "Servi	ce to the	
	Block 2: If your cable system					service that are	e different f	rom those	
	printed in block 1 (for example, t	-		•					
	with the number of subscribers a	and rates, in the	e right-	hand block. A tw	o- or thre	e-word descript	tion of the s	service is	
	sufficient.	DCK 1					BLOCK	(2	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT
	Service to first set		580	30.95-69.99					
	Service to additional set(s)		500	30.95-69.99					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		1	30.95-69.99					
	Converter		•						
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SSIONS: RATES	6				
F	In General: Space F calls for ra	•	,		-	• •			
•	not covered in space E, that is, t service for a single fee. There ar								
Services	furnished at cost or (2) services		,		0		0.	,	
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the								
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that							were not	
Nates	listed in block 1 and for which a				0	Ũ	•		
	brief (two- or three-word) descrip	•							
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	-	GORY OF SER	/ICE	RATE	CATEG	DRY OF SERVICE	RATE
			Install	ation: Non-resi	dential				
	Continuing Services:		• Mc	otel, hotel			Family	Cable	79.4
	• Pay cable	PP							
	•	PP PP	• Co	mmercial					
	• Pay cable			mmercial y cable					
	• Pay cable • Pay cable—add'l channel		• Pa		annel				
	Pay cable Pay cable—add'l channel Fire protection		• Pa • Pa • Fir	y cable y cable-add'l ch e protection	annel				
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection 		• Pa • Pa • Fir	y cable y cable-add'l ch	annel				
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential 	PP	• Pa • Pa • Fir • Bu	y cable y cable-add'l ch e protection rglar protection	annel				
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set 	PP 99.99	• Pa • Pa • Fir • Bu Other	y cable y cable-add'l ch e protection rglar protection	annel	29.00			
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) 	PP 99.99	• Pa • Pa • Fir • Bu Other • Re	y cable y cable-add'l ch: e protection rglar protection services:	annel	29.00			
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	99.99 15.00-29.00	• Pa • Pa • Fir • Bu Other • Re • Dis	y cable y cable-add'l ch e protection rglar protection services: connect	annel	29.00			

ounting Period:	-			FORM SA1-2E. PA
Name	LEGAL NAME OF OWNER OF			SYSTEM 21
		AST LLC (GREENSBORO, AL)		
	PRIMARY TRANSMITTERS:		· · · · · · · · · · · · · · · · · · ·	· · · · · · · ·
G	•	ntify every television station (including n during the accounting period, <i>except</i>	•	,
Primary	5	n effect on June 24, 1981, permitting th)(2) and (4), or 76.63 (referring to 76.6	a . a	•
ansmitters:	substitute program basis, as	explained in the next paragraph.		
Television		With respect to any distant stations ca les, regulations, or authorizations:	arried by your cable system on a su	bstitute program
	• Do not list the station here	e in space G—but do list it in space I (th	he Special Statement and Program	Log)—if the
	station was carried only on aList the station here, and a	a substitute basis. Ilso in space I, if the station was carried	d both on a substitute basis and als	o on some other
		n concerning substitute basis stations, i's call sign. <i>Do not</i> report origination p		
	multicast stream associated	with a station according to its over-the	-	-
	"WETA-2" as the same on the Column 2 : Give the channe	he form. I number the FCC assigned to the tele	evision station for broadcasting over	the air in its community
	of license. For example, WF	RC is channel 4 in Washington, D.C.	-	-
		case whether the station is a network ring the letter "N" (for network), "N-M" (, , ,	
	(for independent multicast),	"E" (for noncommercial educational), c	or "E-M" (for noncommercial education	
		rms, see page (iv) of the general instru n of each station. For U.S. stations, list		is licensed by the
	FCC. For Mexican or Canad	lian stations, if any, give the name of th	he community with which the station	ו is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WABM-DT (MyNet)	36	I	BIRMINGHAM, AL
	WABM-DT2/WABM-DT2 HD (ABC	36.2	N-M	BIRMINGHAM, AL
ows as Necessary	WABM-DT3 ACCUWEATHER	36.3	I-M	BIRMINGHAM, AL
	WAKA/WAKA(HD) CBS	42	N	SELMA, AL
	WAKA-DT2 MeTV	42.2	I-M	SELMA, AL
	WBIH IND	29	I	SELMA, AL
	WBRC/WBRC(HD) FOX	50	I	BIRMINGHAM, AL
	WBRC-DT2 Bounce TV	50.2	I-M	BIRMINGHAM, AL
	WBRC-DT3 Grit	50.3	I-M	BIRMINGHAM, AL
	WBRC-DT4 Laff	50.4	I-M	BIRMINGHAM, AL
	WCOV/WCOV (HD) FOX	20	I	MONTGOMERY, AL
	WCOV-DT2 Antenna TV	20.2	I-M	MONTGOMERY, AL
	WCOV-DT3 This TV	20.3	I-M	MONTGOMERY, AL
	WDBB/WDBB (HD) CW	18	I	BESSEMER, AL
	WDBB-DT2 ABC/WBMA-LD	18.2	N-M	BESSEMER, AL
	WIAT/WIAT(HD) CBS	30	N	BIRMINGHAM, AL
	WIAT-DT2 Escape	30.2	I-M	BIRMINGHAM, AL
	WIAT-DT3 Justice Network	30.3	I-M	BIRMINGHAM, AL
	WIAT-DT4 Court TV	30.4	I-M _	BIRMINGHAM, AL
	WIIQ/WIIQ(HD) PBS	19	E	DEMOPOLIS, AL
	WIIQ-DT2 PBS Kids	19.2	E-M	DEMOPOLIS, AL
	WIIQ-DT3 PBS CREATE	19.3	E-M	DEMOPOLIS, AL
	WIIQ-DT4 PBS WORLD	19.4	E-M	DEMOPOLIS, AL

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:			SYSTEM		
Name	MEDIACOM SOUTHEA	AST LLC (GREENSBORO, AL)			2		
	PRIMARY TRANSMITTERS:	TELEVISION					
G	•	ntify every television station (including trans the accounting period, <i>except</i> (•	,			
_ .	0	effect on June 24, 1981, permitting the	0				
Primary ransmitters:)(2) and (4), or 76.63 (referring to 76.61(explained in the next paragraph.	e(2) and $(4))];$ and (2) certain s	stations carried on a			
Television		With respect to any distant stations carr	ied by your cable system on a s	substitute program			
	•	es, regulations, or authorizations:					
		in space G—but do list it in space I (the	Special Statement and Program	n Log)—if the			
	station was carried <i>only</i> on a	lso in space I, if the station was carried b	ooth on a substitute basis and a	lso on some other			
		n concerning substitute basis stations, se					
	Column 1: List each station	's call sign. <i>Do not</i> report origination pro	ogram services such as HBO, E	SPN, etc. Identify each			
		with a station according to its over-the-a	air designation. For example, re	port multistream			
	"WETA-2" as the same on the channel	ne form. I number the FCC assigned to the televis	sion station for broadcasting ov	er the air in its community			
		Ũ	sion station for broadbasting of				
	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						
	Column 3: Indicate in each	case whether the station is a network sta	ation, an independent station, o	r a noncommercial			
	educational station, by enter	ing the letter "N" (for network), "N-M" (fo	r network multicast), "I" (for inde	ependent), "I-M"			
	educational station, by enter (for independent multicast),	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or '	r network multicast), "I" (for inde "E-M" (for noncommercial educ	ependent), "I-M"			
	educational station, by enter (for independent multicast), For the meaning of these ter	ing the letter "N" (for network), "N-M" (fo	r network multicast), "I" (for inde "E-M" (for noncommercial educ ions in the paper SA1-2 form.	ependent), "I-M" ational multicast).			
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' ms, see page (iv) of the general instruct	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. he community to which the static	ependent), "I-M" ational multicast). on is licensed by the			
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' rms, see page (iv) of the general instruct of each station. For U.S. stations, list th	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. he community to which the static	ependent), "I-M" ational multicast). on is licensed by the			
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' ms, see page (iv) of the general instruct of each station. For U.S. stations, list th ian stations, if any, give the name of the	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. ne community to which the static community with which the static	ependent), "I-M" ational multicast). on is licensed by the on is identified.	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' rms, see page (iv) of the general instruct of each station. For U.S. stations, list th	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. he community to which the static	ependent), "I-M" ational multicast). on is licensed by the on is identified.	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' ms, see page (iv) of the general instruct of each station. For U.S. stations, list th ian stations, if any, give the name of the	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. ne community to which the static community with which the static	ependent), "I-M" ational multicast). on is licensed by the on is identified.	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' rms, see page (iv) of the general instruct to of each station. For U.S. stations, list th ian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. he community to which the static community with which the static 3. TYPE OF STATION	ependent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' ms, see page (iv) of the general instruct of each station. For U.S. stations, list th ian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. ne community to which the static community with which the static 3. TYPE OF STATION N	ependent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION MONTGOMERY, AL	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN WSFA/WSFA(HD) NBC WSFA-DT2 Bounce TV	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' rms, see page (iv) of the general instruct of each station. For U.S. stations, list th ian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 12 12.	r network multicast), "I" (for inde "E-M" (for noncommercial educ- tions in the paper SA1-2 form. the community to which the station to community with which the station 3. TYPE OF STATION N I-M	ependent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION MONTGOMERY, AL MONTGOMERY, AL	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN WSFA/WSFA(HD) NBC WSFA-DT2 Bounce TV WSFA-DT3 Grit	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' rms, see page (iv) of the general instruct to of each station. For U.S. stations, list th ian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 12 12.2 12.3	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. he community to which the static community with which the static 3. TYPE OF STATION N I-M I-M	ependent), "I-M" ational multicast). on is licensed by the on is identified.	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN WSFA/WSFA(HD) NBC WSFA-DT2 Bounce TV WSFA-DT3 Grit WNCF-DT2 /WNCF-DT2 (HD) CW	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or " rms, see page (iv) of the general instruct of each station. For U.S. stations, list the ian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 12 12.2 12.3 31.2	r network multicast), "I" (for inde "E-M" (for noncommercial educ- tions in the paper SA1-2 form. the community to which the static community with which the static 3. TYPE OF STATION N I-M I-M I-M	ependent), "I-M" ational multicast). on is licensed by the on is identified.	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN WSFA-WSFA(HD) NBC WSFA-DT2 Bounce TV WSFA-DT2 Bounce TV WSFA-DT3 Grit WNCF-DT2 /WNCF-DT2 (HD) CW WVTM/WVTM(HD) NBC	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' ms, see page (iv) of the general instruct of each station. For U.S. stations, list th ian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 12 12.2 12.3 31.2 13	r network multicast), "I" (for inde "E-M" (for noncommercial educ- tions in the paper SA1-2 form. ne community to which the static community with which the static 3. TYPE OF STATION N I-M I-M I-M N	ependent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION MONTGOMERY, AL MONTGOMERY, AL SELMA, AL BIRMINGHAM, AL	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN WSFA/WSFA(HD) NBC WSFA-DT2 Bounce TV WSFA-DT2 Bounce TV WSFA-DT3 Grit WNCF-DT2 /WNCF-DT2 (HD) CW WVTM/WVTM(HD) NBC	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' ms, see page (iv) of the general instruct of each station. For U.S. stations, list th ian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 12 12. 12.3 31.2 13 13.2	r network multicast), "I" (for inde "E-M" (for noncommercial educ- ions in the paper SA1-2 form. he community to which the static community with which the static 3. TYPE OF STATION N I-M I-M I-M I-M	ependent), "I-M" ational multicast). on is licensed by the on is identified.	OF STATION		
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN WSFA.WSFA(HD) NBC WSFA-DT2 Bounce TV WSFA-DT2 Bounce TV WSFA-DT3 Grit WNCF-DT2 /WNCF-DT2 (HD) CW WVTM/WVTM(HD) NBC WVTM-DT2 MeTV WVUA/WVUA(HD) IND	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or ' ms, see page (iv) of the general instruct of each station. For U.S. stations, list th ian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 12 12.2 12.3 31.2 13 13.2 7	r network multicast), "I" (for inde "E-M" (for noncommercial educ- tions in the paper SA1-2 form. the community to which the static community with which the static 3. TYPE OF STATION N I-M I-M I-M I-M I-M	ependent), "I-M" ational multicast). on is licensed by the on is identified.	OF STATION		

MEDIACOM	SOUTHEA		YSTEM: C (GREENSBORO, AL)				1	SYSTEM I 21
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of r for detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to mation abou m. entify the call tate whether t the radio stat this by placing ive the statior	y the sys be recein at the Co sign of e the static ion's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on t each station carried. on is AM or FM. hal was electronically processor (mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante his point, see par ed by the cable s e station is licens	adend, and (2 enna, during c ge (v) of the g ystem as a se sed by the FC	!) it can ertain st eneral ii eparate a	be expected, ated 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	
						·	·	
						·	·	
						·		
				r			·	

Accounting Perio	od: 2019/2							FORM	/I SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	TEM:						SYSTEM ID#
Name	MEDIACOM SOUTHEA	AST LLC (O	GREENSBO	DRO, AL)					2179
		•							-
_	SUBSTITUTE CARRIAG	E: SPECIA	L STATEME	NT AND PROGRAM LO	G				
	In General: In space I, ident	tify every non	nnetwork televi	sion program, broadcast by	/ a <i>distant</i> sta	tion, that y	our	cable syst	tem carried on a
	substitute basis during the a	accounting pe	eriod, under sp	ecific present and former F	CC rules, reg	ulations, c	r au	thorizatior	ns. For a further
Substitute	explanation of the programm	ning that mus	st be included	in this log, see page (v) of t	he general in:	structions	in the	e paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMEN	T CONCER	NING SUBS	TITUTE CARRIAGE					
Special	 During the accounting per 	riod, did you	ır cable syster	n carry, on a substitute ba	isis, any noni	network te	levis	sion progi	ram
Statement and Program Log	broadcast by a distant sta	ition?						YES	× NO
Frogram Log								_	
	Note: If your answer is "No	o", leave the	rest of this pa	ge blank. If your answer is	s "Yes," you i	must com	plete	e the prog	Iram
	log in block 2.								
	2. LOG OF SUBSTITUTI								
	In General: List each subs				s wherever p	ossible, if	theii	r meaning	g is
	clear. If you need more spa								·
	period, was broadcast by a			vision program ("substitute					
	under certain FCC rules, re								
	Do not use general categor								
	"NBA Basketball: 76ers vs.			1 1 5	,	1 /		,	
			dcast live, ente	er "Yes." Otherwise enter '	"No."				
				asting the substitute progr					
				the community to which the			the	FCC or,	in
	the case of Mexican or Car							with the m	aanth
	first. Example: for May 7 gi		when your sy	stem carried the substitute	e program. U	se numera	ais, v	with the fi	nonun
			e substitute pr	ogram was carried by you	r cable syste	m Listthe	e tim	es accura	atelv
	to the nearest five minutes.								atory
	stated as "6:00–6:30 p.m."		1 3	, ,	-	1			
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Accounting Period:	2019/2		FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM SOUTHEAST LLC (GREENSBORO, AL)		S	YSTEM ID# 2179
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the ar all amounts (gross receipts) paid to your cable system by subscribers for the system's (as identified in space E) during the accounting period. For a further explanation of how 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.	secondary transm v to compute this :	ission service amount, see	2,440.90 coss 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 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less See page (vi) of the general instructions located in the paper SA1-2 form for more informati	than \$527,600 on.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 O	R LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that accounting period is \$52.00			
	Line 1. Royalty fee for accounting period			
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and	d 2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but			
	1. Base amount under statutory formula	263,800.00	_	
	2. Enter amount of gross receipts from space K	142,440.90	_	
	3. Subtract line 2 from line 1	121,359.10	_	
	4. Enter the amount of gross receipts from space K	\$	142,440.90	
	5. Enter the amount from line 3	\$	121,359.10	
	6. Subtract line 5 from line 4	\$	21,081.80	
	7. Multiply line 6 by .005 (enter figure here)		\$	105.41
	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.		\$	105.41
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (b)	ut less than \$527	,600)	
	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			
		• • • • • • • • • • • • • • • • • • • •		
	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)	\$	105.41	
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		\$	125.41
	Important: Your remittance must be in the form of an electronic payment pa See page i of the general instructions in the paper SA1-2 form			hts!

Accounting Period:	2019/2		FORM SA1-2E. PAGE 7
Name		F OWNER OF CABLE SYSTEM: SOUTHEAST LLC (GREENSBORO, AL)	SYSTEM ID# 2179
M Channels	to its subscrib 1. Enter the to system carrie 2. Enter the to on which the	You must give (1) the number of channels on which the cable system carried television broadcast stations ers, and (2) the cable system's total number of activated channels during the accounting period. otal number of channels on which the cable ed television broadcast stations	44 74
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom ct about this statement of account.)	
for Further Information	Name	Kenneth J. Kohrs Telephone 845	5-443-2762
	Address	One Mediacom Way (Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip)	
	Email	Copyrights@mediacomcc.com Fax (optional)	
O Certification	I, the undersig (Ow X (Age (Of I have examinare true, comp	(This statement of account must be certified and signed in accordance with Copyright Office regulations) gned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) (Iner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or ent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or fficer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner or in line 1 of space B. ned the statement of account and hereby declare under penalty of law that all statements of fact contained herein blete, and correct to the best of my knowledge, information, and belief, and are made in good faith. (ction 1001(1986)] X /s/ Kenneth J. Kohrs	em as identified
		Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) Typed or printed name: Kenneth J. Kohrs Title: Vice President, Financial Reporting (Title of official position held in corporation or partnership)	
		Date: 2/18/2020	

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.

unting Period: 2019/2	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
DIACOM SOUTHEAST LLC (GREENSBORO, AL)	217
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	-
Name Mailing Address 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	
x	Interest Assessmer
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessmer
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Line 2 Multiply line 1 by the interest rate* and enter the sum here - x	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme

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