THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 Short Form

Return to: Library of Congress FOR COPYRIGHT OFFICE USE ONLY STATEMENT OF ACCOUNT Copyright Office for Secondary Transmissions by DATE RECEIVED AMOUNT Licensing Division Cable Systems (Short Form) 101 Independence Ave. SE Washington, DC 20557-6400 \$ (202) 707-8150 General instructions are at the 3/24/2023 end of this form [pages (i)-(vii)]. ALLOCATION NUMBER For courier deliveries, see page ii of the general instructions

| Α | | OUNTING PERIOD COVERE | | | | | | | |
|----------------------|---|---|--|--|------------|--|--|--|--|
| Accounting Period | July 1-December 31, 2020 | | | | | | | | |
| B Owner | incorr (rate t | rect information and print or type the of Give the full legal name of the owner of itle of the subsidiary, not that of the pi- List any other name or names under v of there were different owners during in gle statement of account and royalty. | correct information beside it. of the cable system. If the owner is a sub arent corporation. which the owner conducts the business of | the last day of the accounting period should submit ing period. | 28 | | | | |
| | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM | | | | | | | | |
| | | Eagle Communications Inc | <u>,</u> | | | | | | |
| | | | | *2 | 81102020 | | | | |
| | | | | | 28110 2020 | | | | |
| | | PO Box 817 | | | | | | | |
| | | Hays KS 67601 | uningge or trade names used to identi | futhe business and energian of the system un | and there | | | | |
| С | | | | fy the business and operation of the system unl system, if different from the address given in sp | | | | | |
| System | 1 | DENTIFICATION OF CABLE SYSTEM: | | | | | | | |
| | l t | MAILING ADDRESS OF CABLE SYSTEM | Л: | | | | | | |
| | 2 (Number, street, rural route, apartment, or suite number) | | | | | | | | |
| | | City, town, state, zip code) | | | | | | | |
| D | Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entitiy (including unincorporated communities within unincorporated | | | | | | | | |
| Area | | | | (dd). The first community that list will serve as e it as the first community on all future filings | a form | | | | |
| Served | | | | | | | | | |
| | | CITY OR TOWN | STATE | CITY OR TOWN | STATE | | | | |
| First Community | Rile | y | KS | | | | | | |
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| - | | | 17 0 | personally identifying information (PII) requested on this | | | | | |
| | | | establish and maintain a public record, which | race an individual, such as name, address and telephone | | | | | |

Form SA1-2c Rev 04/2011

ACCOUNTING PERIOD: 2020/2

| Name | LEGAL NAME OF OWNER OF CABLE SYS | STEM: | | SYSTEM 281 | | | | |
|-----------|----------------------------------|-------|--------------|---------------|--|--|--|--|
| Name | Eagle Communications Inc. | | | | | | | |
| | CITY OR TOWN | STATE | CITY OR TOWN | STATE | | | | |
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| ontinued) | | | | | | | | |
| Area | | | | | | | | |
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Form SA1-2c Rev 04/2011

| E Secondary Transmission Service: Sub- scribers and Rates | each category by counting the nu separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | SERVICE: SUE pace E should c on of television a aay cable) in spa (June 30 or De blocks in spac y transmission s umber of billings ice at the rate ir harged for each | cover all categ and radio broa ace F, not here ecember 31, as the E call for the service. In gene s in that catego | ories of second dcasts by your a All the facts y the case may number of sub eral, you can co pry (the numbe | system to subscrive you state must be be). bscribers to the ca ompute the number | ibers. Give those exist ible system | information ing on the , broken | 2811 | | | | | | |
|--|---|--|--|--|--|---|---------------------------------------|-------|--|--|--|--|--|--|
| E Secondary Transmission Service: Sub- scribers and Rates | In General: The information in s system, that is, the retransmissic about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the m separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | pace E should c on of television a bay cable) in spa (June 30 or De blocks in space (transmission s umber of billings ice at the rate ir harged for each | cover all categ and radio broa ace F, not here ecember 31, as the E call for the service. In gene s in that catego | ories of second dcasts by your a All the facts y the case may number of sub eral, you can co pry (the numbe | system to subscrive you state must be be). bscribers to the ca ompute the number | ibers. Give those exist ible system | information ing on the , broken | | | | | | | |
| E Secondary Transmission Service: Sub- scribers and Rates | In General: The information in s system, that is, the retransmissic about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the m separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | pace E should c on of television a bay cable) in spa (June 30 or De blocks in space (transmission s umber of billings ice at the rate ir harged for each | cover all categ and radio broa ace F, not here ecember 31, as the E call for the service. In gene s in that catego | ories of second dcasts by your a All the facts y the case may number of sub eral, you can co pry (the numbe | system to subscrive you state must be be). bscribers to the ca ompute the number | ibers. Give those exist ible system | information ing on the , broken | | | | | | | |
| Secondary Transmission Service: Sub- scribers and Rates | about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the nu separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | eay cable) in spa I (June 30 or De I blocks in space I transmission s umber of billings ice at the rate ir harged for each | ace F, not here ecember 31, as e E call for the service. In gene s in that catego | e. All the facts y s the case may e number of sub eral, you can co ory (the numbe | you state must be be). oscribers to the ca ompute the numbe | those exist ble system | ing on the , broken | | | | | | | |
| Transmission Service: Sub- scribers and Rates | last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the nu separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | I (June 30 or De blocks in space y transmission s umber of billings ice at the rate ir harged for each | ecember 31, as the E call for the service. In gene s in that catego | s the case may e number of sub eral, you can co ory (the numbe | be). bscribers to the ca ompute the numbe | ible system | , broken | | | | | | | |
| Service: Sub- scribers and Rates | Number of Subscribers: Both down by categories of secondary each category by counting the nu separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | h blocks in space y transmission s umber of billings ice at the rate ir harged for each | e E call for the service. In gene s in that catego | e number of sub eral, you can co ory (the numbe | oscribers to the ca ompute the numbe | • | | | | | | | | |
| scribers and Rates | down by categories of secondary each category by counting the m separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | y transmission s umber of billings ice at the rate ir harged for each | service. In gene s in that catego | eral, you can co ory (the numbe | ompute the numbe | • | | | | | | | | |
| Rates | each category by counting the nu separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | umber of billings ice at the rate ir harged for each | s in that catego | ory (the numbe | | | | | | | | | | |
| | separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc | ice at the rate ir harged for each | | | 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 | | | | | | | | | |
| | unit in which it is generally billed. category, but do not include disc | | | each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). | | | | | | | | | | |
| | category, but do not include disc | (Evample: "¢?(| | | | | | | | | | | | |
| | | Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate | | | | | | | | | | | | |
| | DIOCK I. III the left-hand block | category, but do not include discounts allowed for advance payment. | | | | | | | | | | | | |
| | Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category | | | | | | | | | | | | | |
| | systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different | | | | | | | | | | | | | |
| | that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential | | | | | | | | | | | | | |
| | subscriber who pays extra for ca | | | | | | | | | | | | | |
| | first set" and would be counted o | 0 | | () | · | | | | | | | | | |
| | Block 2: If your cable system I | - | | • | | | | | | | | | | |
| | printed in block 1 (for example, ti | | | | • | | | | | | | | | |
| | with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. | | | | | | | | | | | | | |
| - | | DCK 1 | | | | BLOCK | BLOCK 2 | | | | | | | |
| | CATEGORY OF SERVICE | NO. OF SUBSCRIBEI | RS RAT | | ATEGORY OF SEI | PVICE | NO. OF SUBSCRIBERS | RAT | | | | | | |
| F | Residential: | SUBSCRIBE | | | TEGORT OF SET | VICE | SUBSCRIBERS | - RAI | | | | | | |
| | Service to first set | | 24 2 | 27.95 | | | | | | | | | | |
| | | | | .7.95 | | | | | | | | | | |
| | Service to additional set(s) | | | | | | | | | | | | | |
| | • FM radio (if separate rate) | | ; | | | | | | | | | | | |
| | Motel, hotel | | | 27.95 | | | | | | | | | | |
| | Commercial | | 1 2 | 27.95 | | | | | | | | | | |
| | Converter | | | | | | | | | | | | | |
| | Residential | | | | | | | | | | | | | |
| | Non-residential | | | | | | | | | | | | | |
| | SERVICES OTHER THAN SEC | | | RATES | | | | | | | | | | |
| | In General: Space F calls for rat | | | | o all your cable sys | stem's serv | ices that were | | | | | | | |
| | not covered in space E, that is, t | | | | | | | | | | | | | |
| | service for a single fee. There ar | | • | - | | • • • | | | | | | | | |
| | furnished at cost or (2) services | | | | | | | | | | | | | |
| | amount of the charge and the un | | Isually billed. I | r any rates are | charged on a vari | able per-pr | ogram basis, | | | | | | | |
| 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 the form of a | | | | | | | | | | | | | |
| | brief (two- or three-word) descrip | | | | | | | | | | | | | |
| | | BLOC | | | | | BLOCK 2 | | | | | | | |
| - | CATEGORY OF SERVICE | | CATEGORY O | | RATE | CATEGO | ORY OF SERVICE | RAT | | | | | | |
| | Continuing Services: | | | on-residential | | | | | | | | | | |
| | • Pay cable | 27.95 | Motel, hote | | | | | | | | | | | |
| | Pay cable—add'l channel | 60.50 | Commercia | al | | | | | | | | | | |
| | | | Day cable | | | | | | | | | | | |
| | • Fire protection | | Pay cable | | | | | | | | | | | |
| | | | | add'l channel | | | | | | | | | | |
| | Fire protection | | | | | | | | | | | | | |
| | Fire protectionBurglar protection | 15.00 | • Pay cable-a | tion | | | | | | | | | | |
| | Fire protection Burglar protection Installation: Residential | | • Pay cable-a • Fire protect | tion tection | | | | | | | | | | |
| | Fire protection Burglar protection Installation: Residential First set | | • Pay cable-a • Fire protect • Burglar pro | tion itection s: | 30.00 | | | | | | | | | |
| | Fire protection Burglar protection Installation: Residential First set Additional set(s) | | • Pay cable-a • Fire protect • Burglar pro Other services | tion dection s: | 30.00 | | | | | | | | | |
| | Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) | 5.00 0 | • Pay cable-a • Fire protect • Burglar pro Other services • Reconnect | tion itection s: | 30.00 | | | | | | | | | |

Name

G

Primary

Transmitters:

Television

| | | | FORM SA1 | -2. PAGE 3. |
|--|---|--|--|-------------|
| LEGAL NAME OF OWNER | R OF CABLE SYSTEM | : | SYS | TEM ID# |
| Eagle Communicat | tions Inc. | | | 28110 |
| PRIMARY TRANSMITTERS: | TELEVISION | | | |
| carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(6 substitute program basis, a Substitute Basis Static basis under specifc FCC rules Do not list the station here, and basis. For further inform Column 1: List each state Column 2: Give the nur This may be different from associated with a station active same on the form. Column 3: Indicate in e educational station, by ente (for independent multicast) For the meaning of these to Column 4: Give the location | m during the accour in effect on June 24 e)(2) and (4), or 76.6 as explained in the n ons: With respect to alles, regulations, or a e in space G—but d on a substitute basis also in space I, if the ation concerning su ation's call sign. Do i mber of the channel the channel on whic ccording to its over-t ach case whether the ering the letter "N" (for , "E" (for noncomme erms, see page (iv) ation of each station | nting period, except , 1981, permitting th 63 (referring to 76.6 ext paragraph. any distant stations authorizations: o list it in space I (th s. e station was carried bstitute basis station not report originatior on which the station thy our cab;e system thje-air designation. e station is a netwo or network), "N-M" (t ercial educational), o of the general instru b. For U.S. stations, | translator stations and low power television stations) (1) stations carried only on a part-time basis under e carriage of certain network programs [sections 1(e)(2) and (4))]; and (2) certain stations carried on a a carried by your cable system on a substitute program e Special Statement and Program Log)—if the d both on a substitute basis and also on some other ns, see page (v) of the general instructions. n program services such as HBO, ESPN, etc. 's broadcasts are carried in its own community. n carried the station. Identify each multicast stream For example, report multicast stream "WETA-2" as rk station, an independent station, or a noncommercial for network multicast), "I" (for independent), "I-M" r "E-M" (for noncommercial educational multicast). ctions. list the community to which the station is licensed by the lie community with which the station is identifed. | |
| 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 6. LOCATION OF STATION | |
| KTMJ FOX | 2 | l | Topeka KS | |
| | | | | |

| | NOWBER | STATION | |
|----------|--------|---------|-----------|
| КТМЈ FOX | 2 | I | Topeka KS |
| KSNT NBC | 5 | N | Topeka KS |
| КТКА АВС | 8 | N | Topeka KS |
| KTWU PBS | 11 | E | Topeka KS |
| WIBW CBS | 13 | N | Topeka KS |
| KTKA CW | 5 | N | Topeka KS |
| | 49 | N | Topeka KS |
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ACCOUNTING PERIOD: 2020/2

| FORM SA1-2. F EGAL NAME OF Eagle Comm | FOWNER OF (| | YSTEM: | | | | | SYSTEM ID# 28110 | Name |
|--|------------------|-------------|--|---|-----------|----------|------------|---------------------|------|
| | | , 110. | | | | | | 20110 | |
| | t every radio s | tation ca | rried on a separate and discr nerally receivable" by your ca | | | | | | н |
| Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (v) of the general instructions. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete | | | | | | | | | |
| Column 4: G | live the station | n's locatio | x mark in the "S/D" column. on (the community to which th the community with which the | | | | C or, in t | he case of | |
| CALL SIGN | AM or FM | S/D | LOCATION OF STATION | | CALL SIGN | AM or FM | S/D | LOCATION OF STATION | |
| | | 5,0 | LOOMING OF STATION | Η | | | 5,0 | | |
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FORM SA1-2. PAGE 5.

| | LEGAL NAME OF OWNER OF (| CABLE SYST | EM: | | | | SYSTEM ID# | | | | |
|--|---|---------------|------------------|-----------------------------|------------------|----------------------------|--------------|--|--|--|--|
| Name | Eagle Communications | s Inc. | | | | | 28110 | | | | |
| | | | | | _ | | | | | | |
| | SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions. | | | | | | | | | | |
| Carriage: | 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE | | | | | | | | | | |
| Special Statement and | • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program | | | | | | | | | | |
| Program Log | broadcast by a distant stati | | | | | | | | | | |
| | Note: If your answer is "No" | , leave the | rest of this pag | ge blank. If your answer is | "Yes," you m | ust complete the pr | rogram | | | | |
| | log in block 2. 2. LOG OF SUBSTITUTE | PROGRA | MS | | | | | | | | |
| | In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is | | | | | | | | | | |
| clear. If you need more space, please attach additional pages. | | | | | | | | | | | |
| | Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another static | | | | | | | | | | |
| | under certain FCC rules, rec | | | | | | | | | | |
| | Do not use general categori "NBA Basketball: 76ers vs. | | vies of daske | abali. List specific progra | m titles, for ea | xample, TLove Luc | y or | | | | |
| | Column 2: If the program | | | | | | | | | | |
| | Column 3: Give the call s Column 4: Give the broa | | | | | ensed by the FCC o | or. in | | | | |
| | the case of Mexican or Can | adian statio | ns, if any, the | community with which the | station is ide | ntified). | | | | | |
| | Column 5: Give the mon first. Example: for May 7 giv | | when your sys | tem carried the substitute | program. Us | e numerals, with the | e month | | | | |
| | Column 6: State the time | es when the | | | | | | | | | |
| | to the nearest five minutes. stated as "6:00–6:30 p.m." | Example: a | program carri | ed by a system from 6:01 | :15 p.m. to 6: | 28:30 p.m. should b | be | | | | |
| | • | er "R" if the | listed program | was substituted for progr | amming that | your system was re | quired | | | | |
| | Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in | | | | | | | | | | |
| | effect on October 19, 1976. | ogramming | that your syste | em was permitted to delet | e under FCC | rules and regulation | ns in | | | | |
| | | | | | 11 | | | | | | |
| | c | | E PROGRAM | | WHEN SU | JBSTITUTE CARR OCCURRED | T. REASON | | | | |
| | | 2. LIVE? | 3. STATION'S | | 5. MONTH | | FOR DELETION | | | | |
| | 1. TITLE OF PROGRAM | Yes or No | CALL SIGN | 4. STATION'S LOCATION | AND DAY | FROM — | то | | | | |
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| FORM SA1-2. PAGE 6. | |
|--|-------------------------------|
| LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# | Name |
| Eagle Communications Inc. 28110 | Name |
| GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. 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. | K Gross Receipts |
| COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions for more information. | L Copyright Royalty Fee |
| 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 this six-month accounting period is \$52.00 Line 1. Royalty fee for accounting period | |
| Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 | |
| 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 \$137,100) | |
| 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 | |
| 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 recepits (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 | |
| IMPORTANT : Your remittance must be in the form of an <i>electronic payment</i> payable to <i>Register of Copyrights</i> . See page I of the general instructions for more information. | |

| | · | FORM SA1-2. PAGE 7. |
|----------------------------|--|-------------------------|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# |
| | Eagle Communications Inc. | 28110 |
| | CHANNELS | |
| M | Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s | tations |
| | to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. | |
| Channels | 1. Enter the total number of channels on which the cable | |
| | system carried television broadcast stations | 7 |
| | | |
| | 2. Enter the total number of activated channels | |
| | on which the cable system carried television broadcast stations | 47 |
| | and nonbroadcast services | |
| N | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom | |
| | we can write or call about this statement of account.) | |
| Individual to | | |
| Be Contacted | Nume Maria Canaanlana Talanbara (| 44 005 0040 |
| for Further Information | Name Marie Censoplano Telephone S | 014-235-8313 |
| | | |
| | Address 4 International Dr Suite 330 (Number, street, rural route, apartment, or suite number) | |
| | Rye Brook, NY 10573 | |
| | (City, town, state, zip) | |
| | | |
| | Email (optional) marie.censoplano@vyvebb.com Fax (optional 914-234-8363 | |
| | | |
| | CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regula as explained in the general instructions.) | tions, |
| O Certifcation | | |
| Certification | • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) | |
| | (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space I | 3; or |
| | | |
| | (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable | system as identified |
| | 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 legal entity identifed as ow | ner of the cable system |
| | in line 1 of space B. | |
| | • I have examined the statement of account and hereby declare under penalty of law that all statements of fact containe | d herein |
| | are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] | |
| | | |
| | Handwritten signature: /s/ Daniel J White | |
| | Handwritten signature: /s/ Daniel J. White | |
| | | |
| | Typed or printed name: Daniel J White | |
| | | |
| | Title: SVP Financial Planning | |
| | (Title of official position held in corporation or partnership) | |
| | | |
| | Date: 2/26/2021 | |
| | | |

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 effects 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 suffciency of the fling, a determination that would be made by a court of law.

FORM SA1-2. PAGE 8.

| LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# | |
|---|--------------|---|
| Eagle Communications Inc. | 28110 | Name |
| 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 addir lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the | | Ρ |
| service of providing secondary transmissions of primary broadcast transmitters, the system shall not scribers and amounts collected from subscribers receiving secondary transmissions pursuant to sect | include sub- | Special Statement |
| For more information on when to exclude these amounts, see the note on page (vii) of the general instruction During the accounting period did the cable system exclude any amounts of gross receipts for secondary tran | | Concerning Gross Receipts Exclusion |
| made by satellite carriers to satellite dish owners? | | |
| YES. Enter the total here and list the satellite carrier(s) below | | |
| Name | | |
| Mailing Address Mailing Address | | |
| | | |
| | | |
| INTEREST ASSESSMENTS | | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or und For an explanation of interest assessment, see page (viii) of the general instructions. | erpayment. | Q |
| Line 1 Enter the amount of late payment or underpayment | | Interest Assessment |
| x | | |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here | - | |
| x | days | |
| | | |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | - 00274 | |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, | | |
| space L, (page 7) | - | |
| (interes | st charge) | |
| * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assista contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. | ance please | |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. | | |
| NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Off list below the owner, address, first community served, ID number, and accounting period as given in the orig | | |
| | | |
| Owner | | |
| Address | | |
| ID number | | |
| First community served | | |
| Accounting period | | |
| | I | |
| | | |

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