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

STΔ	TEM	ENT (OF A	0.0.0	IINT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY				
DATE RECEIVED	AMOUNT			
02/24/21	\$			
	ALLOCATION NUMBER			

Return completed workbook by email to:

oplicsoa@loc.gov

or additional information, ontact the U.S. Copyright office Licensing Division at: el: (202) 707-8150

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		2020/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		Barcode Data Filing Period (optional - see instructions)
Accounting Period		
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		Starpower Communications, LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		650 College Road East, Suite 3100 (Number, street, rural route, apartment, or suite number)
		Princeton, NJ 08540 (City, town, state, zip)
С		UCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(תישוושה), שניפה, הנושר השנה, שלאו וושוו, טו שנונד וושוושה)
		(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 suffciency of the fling, a determination that would be made by a court of law.

Form SA1-2E Short Form (Rev. 05-17)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Starpower Communications, LLC	063300
D	Instructions: List each separate community served by the cable system. A "com "a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that y as the "first community." Please use it as the first community on all future filing	ed communities within unincorporated areas and including single, you list will serve as a form of system identification hereafter known ys.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mo identified city.	olle nome parks should be reported in parentneses below the
		07475
First	CITY OR TOWN Bristow	STATE VA
Community		
d Rows as Necessary		

	1							FORM SA1-				
Name	LEGAL NAME OF OWNER OF C	SYSTEM ID										
	Starpower Communicat	tions, LLC							06330			
-	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCRI	BERS AND R	ATES							
E	In General: The information in s											
Secondam/	system, that is, the retransmission about other services (including particulation)											
Secondary Transmission	last day of the accounting period	, , ,	,		,		linose exis	ung on the				
Service: Sub-	Number of Subscribers: Both						ble system	n, broken				
scribers and	down by categories of secondar											
Rates	each category by counting the n		0	0,0			,	s charged				
	separately for the particular serv Rate: Give the standard rate of							ae and the				
	unit in which it is generally billed	-	-	•				-				
	category, but do not include disc	· ·	,									
	Block 1: In the left-hand block	•		•		•						
	systems most commonly provide											
	that applies to your system. Not			-		-						
	categories, that person or entity subscriber who pays extra for ca						•					
		first set" and would be counted once again under "Service to additional set(s)." 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 a	and rates, in th	e right-h	and block. A tv	vo- or thre	ee-word descript	ion of the	service is				
	sufficient. BLC	DCK 1					BLOC	< 2				
		NO. OF		DATE	0.4.7							
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT			
	Service to first set		2,095	8.63								
			2,035	0.03								
	 Service to additional set(s) FM radio (if separate rate) 											
	Motel, hotel											
	Commercial											
	Converter											
	Residential											
	Non-residential											
	SERVICES OTHER THAN SEC	ONDARY TRA		SIONS: RATE	s							
F	In General: Space F calls for rate											
Г	not covered in space E, that is, t											
Services	service for a single fee. There ar furnished at cost or (2) services	•			•		0 (,				
Other Than												
Secondary	amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.											
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.											
Rates	Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a											
	brief (two- or three-word) descrip	vices in th	e ionn of a									
	CATEGORY OF SERVICE	BLO RATE		ORY OF SER		RATE	CATEC	BLOCK 2 ORY OF SERVICE	RATE			
	Continuing Services:	NATE		tion: Non-res		NATE	CATEG	ORT OF SERVICE	NATE			
	• Pay cable		• Mot	el, hotel			See Ne	xt Tab				
	• Pay cable—add'l channel			nmercial								
	-		_	cable								
	 Fire protection 		-	cable-add'l ch	annel							
	Fire protection Burglar protection		, .uy									
	•Burglar protection		• Fire	protection								
	•Burglar protection Installation: Residential			protection								
	•Burglar protection Installation: Residential • First set	35.00	• Burg	glar protection								
	•Burglar protection Installation: Residential • First set • Additional set(s)	35.00	• Burg Other s	glar protection ervices:								
	 Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	35.00	• Burg Other s • Rec	glar protection ervices: onnect								
	•Burglar protection Installation: Residential • First set • Additional set(s)	35.00	• Burg Other s • Rec • Disc	glar protection ervices: onnect connect		25.00						
	 Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	35.00	• Burg Other s • Rec • Disc • Out	glar protection ervices: onnect		35.00						

RCN Telecom Services - Starpower Page 2 - Section F- Block 2 Additional Services Other Than Secondary Transmissions:Rate

Service	Туре	Retail Rate		
Playboy-Adult	Adult Premium	\$	14.95	
Aapka Colors	International Premium	\$	14.95	
ART-Arabic	International Premium	\$	12.95	
CCTV4	International Premium	\$	9.95	
CTI Zhong Tian	International Premium	\$	11.95	
CCTV4/CTI Zhong Tian	International Premium	\$	11.95	
The Filipino Channel (TFC)	International Premium	\$	11.95	
GMA Pinoy TV	International Premium	\$	12.95	
GMA Life TV	International Premium	\$	9.95	
GMA Pinoy/TFC	International Premium	\$	19.95	
GMA Life/GMA Pinoy/TFC	International Premium	\$	29.95	
GMA Pinoy/TFC/Filipino On Demand	International Premium	\$	29.95	
GMA Life/GMA Pinoy/TFC/Filipino On Demand	International Premium	\$	35.95	
TV-5 Monde	International Premium	\$	9.95	
Antenna Satellite	International Premium	\$	14.95	
Mega Cosmos	International Premium	\$	11.95	
Antenna Satellite/Mega Cosmos	International Premium	\$	25.95	
RAITALIA	International Premium	\$	9.95	
TV Japan	International Premium	\$	24.95	
MBC (Muhwa Broadcasting Corporation)	International Premium	\$	12.95	
TVK24	International Premium	\$	12.95	
TVK24/MBC	International Premium	\$	19.95	
MYX	International Premium	\$	4.95	
TVN24	International Premium	\$	9.95	
iTVN	International Premium	\$	14.95	
TVN24/iTVN	International Premium	\$	19.95	
RTPi	International Premium	\$	9.95	
TV Globo	International Premium	\$	19.99	
PFC	International Premium	\$	19.95	
TV Globo/PFC	International Premium	\$	29.95	
RTVI	International Premium	\$	9.95	
RTVI Plus	International Premium	\$	9.95	
RTVI/RTVI Plus	International Premium	\$	14.95	
Channel One Russia (C1R)	International Premium	\$	14.95	
Russian Television Network (RTN)	International Premium	\$	15.95	
NTV America	International Premium	\$	15.95	
C1R/RTN/NTV America/RTVI/RTVI Plus	International Premium	\$	28.95	
ITV Gold	International Premium	\$	9.95	
Star India Gold	International Premium	\$	9.95	
Star One (name change to LifeOK in 2012)	International Premium	\$	9.95	
Star India Plus	International Premium	\$	11.95	
TV Asia	International Premium	\$	14.95	
Zee TV	International Premium	\$	14.95	
ITV/TV Asia	International Premium	\$	17.95	

Service	Туре	Retail Rate		
ITV/Zee TV/Aapka Colors	International Premium	\$	19.95	
Star Gold/Life OK/Star Plus/Aapka Colors	International Premium	\$	21.95	
TV Asia/Zee TV	International Premium	\$	19.95	
Star Gold/Life OK/Star Plus/ITV	International Premium	\$	26.95	
Star Gold/Life OK/Star Plus/TV Asia	International Premium	\$	27.95	
Star Gold/Life OK/Star Plus/Zee TV/Aapla Colors	International Premium	\$	34.95	
Star Gold/Life OK/Star Plus/ITV/Tv Asia/Zee TV/Aapka Colors	International Premium	\$	39.95	
MiVision Lite	International Premium	\$	12.00	
MiVision Plus	International Premium	\$	22.95	
Premiere Sports	Premiere Packages	\$	8.99	
Premiere News & Information	Premiere Packages	\$	5.99	
Premiere Children & Family	Premiere Packages	\$	5.99	
Premiere Movies & Entertainment	Premiere Packages	\$	10.99	
Premiere Total (includes all 4)	Premiere Packages	\$	18.95	
HBO	Premium	\$	19.95	
Showtime/The Movie Channel (TMC)	Premium	\$	16.95	
Cinemax	Premium	\$	8.95	
Starz	Premium	\$	11.95	
Showtime/TMC/Starz	Premium	\$	21.95	
1D Tier	High Definition Package	\$	9.95	
ID Expanded Tier	High Definition Package	\$	8.99	
he Jewish Channel	Subscription VOD	\$	6.50	
Bollywood Hits On Demand	Subscription VOD	\$	9.95	
Filipino On Demand	Subscription VOD	\$	7.95	
nere! On Demand	Subscription VOD	\$	8.95	
Anime Network On Demand	Subscription VOD	\$	6.99	
oo Much for TV On Demand	Subscription VOD	\$	17.99	
Disney Channel Video On Demand	Subscription VOD	\$	4.99	
Fox Soccer Plus	Sports Premium	\$	14.95	
MLB Extra Innings (Regular Season)	Sports Package	\$	164.99	
MLB Extra Innings (Half Season)	Sports Package	\$	119.99	
MLB Extra Innings (Pennant Race)	Sports Package	\$	37.49	
MLS Direct Kick (Full Season)	Sports Package	\$	89.00	
MLS Direct Kick (Half Season)	Sports Package	\$	59.00	
NFL Redzone (Full Season)	Sports Package	\$	54.95	
NHL Center Ice (Regular Season)	Sports Package	\$	139.56	
NBA League Pass (Early Bird Season)	Sports Package	\$	189.00	
NBA League Pass (Full Season)	Sports Package	\$	199.00	
NBA League Pass (Holiday Offer)	Sports Package	\$	169.00	
NBA League Pass (Half Season)	Sports Package	\$	99.00	
NBA League Pass (Race to Playoffs)	Sports Package	\$	49.00	

ounting Period: 2	2020/2			FORM SA1-2E. PAGE 3.		
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#		
	Starpower Communic	· ·		063300		
G Primary Transmitters: Television	PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do <i>not</i> list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried <i>only</i> on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "T" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general					
	FCC. For Mexican or Canac 1. CALL SIGN	dian stations, if any, give the name of th	the community with which the station 3. TYPE OF STATION	h is identified. 4. LOCATION OF STATION		
	WDCA	20		Washington, DC		
	WDCW	50		Washington, DC		
Rows as Necessary	WETA	26	E	Washington, DC		
UWS as Necessary	WFDC	14	-	Washington, DC		
	WGN	27		Chicago, IL		
	WHUT	32	E	Washington, DC		
	WJLA	7		Washington, DC		
	WMDO	17		Washington, DC		
	WMPT	22		Annapolis, MD		
	WNVC (MHz2)	56	E	Fairfax, VA		
	WRVC (MH22)	66		Manassas, VA		
	WRC	4	N	Washington, DC		
	WTTG	5		Washington, DC		
	WUSA	9	N	Washington, DC		
	WWPB	31	E	Hagerstown, MD		
	WZDC	25		Washington, DC		
	WEDC					

Accounting Perio	od: 2020/2						FORM	A SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	Starpower Communic	ations, Ll	_C					063300
	SUBSTITUTE CARRIAG			NT AND PROGRAM I O	G			
I I	In General: In space I, ident	-	-			tion that you	coble eve	tem carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN				0			
Special	During the accounting per	-			sis anv noni	network telev	ision prog	ram
Statement and		-		n ouny, on a substitute ba	olo, any nom			
Program Log	broadcast by a distant sta	lion?					YES	× NO
	Note: If your answer is "No	", leave the	e rest of this pa	ige blank. If your answer is	s "Yes," you i	must comple	te the prog	Iram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs				s wherever p	ossible, if the	ir meaning	g is
	clear. If you need more spa			vision program ("substitute	program") t	hat during th	e account	ing
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general catego		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I L	ove Lucy"	or
	"NBA Basketball: 76ers vs.				(N.L. 2)			
				er "Yes." Otherwise enter ' asting the substitute progr				
				the community to which th		censed by th	e FCC or.	in
	the case of Mexican or Car						,	
			when your sy	stem carried the substitute	e program. U	se numerals,	with the n	nonth
	first. Example: for May 7 gi							
	to the nearest five minutes.			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."		a program car	neu by a system nom 0.01	i. i5 p.iii. to t	.20.30 p.m. s		
		er "R" if the	listed prograr	n was substituted for prog	ramming tha	t your system	n was <i>requ</i>	ired
	to delete under FCC rules							
	was substituted for program		your system w	as permitted to delete und	ler FCC rules	s and regulat	ons in	
	effect on October 19, 1976							
					WHF	N SUBSTIT	UTF	
	s	UBSTITUT	E PROGRAM	1		AGE OCCU		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIN	/IES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	ТО	
						_		
						_		
						_		
						_		
						_		
						_		
						_		
1			 			h		

EGAL NAME OF								SYSTEM I 0633
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of a cor detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recein the Co sign of a che static ion's sign g a chech n's locati	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k 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 pay ed by the cable s e station is licens	adend, and (2 nna, during c ge (v) of the g ystem as a se sed by the FC	?) it can ertain st eneral ii eparate :	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	
						·		

Accounting Period:	2020/2			FORM S	A1-2E. PAGE 6.
Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:			S	YSTEM ID#
Name	Starpower Communications, LLC				063300
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file an all amounts (gross receipts) paid to your cable system by subscribers for the s (as identified in space E) during the accounting period. For a further explanatic 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	ystem's se on of how to	condary transm o compute this a	ission service amount, see	1,411.02
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 f Use block 3 if the amount of gross receipts in space K is more than \$263,800 f See page (vi) of the general instructions located in the paper SA1-2 form for more in	out less than the second se	an \$527,600	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137	',100 OR I	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalt accounting period is \$52.00	y fee that y	ou must pay for	this six-mon	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lin	nes 1 and 2	!	·	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	SS (but mo	ore than \$137,1	00)	
	1. Base amount under statutory formula	\$	263,800.00		
	2. Enter amount of gross receipts from space K	\$	221,411.02		
	3. Subtract line 2 from line 1	\$	42,388.98		
	4. Enter the amount of gross receipts from space K			221,411.02	
	5. Enter the amount from line 3		. \$	42,388.98	
	6. Subtract line 5 from line 4		\$ 1	79,022.04	
	7. Multiply line 6 by .005 (enter figure here)			\$	895.11
	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		\$	895.11
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	,800 (but l	less than \$527,	600)	
	1. Enter the amount of gross receipts from space K				
	2. Base amount under statutory formula				
	3. Subtract line 2 from line 1				
	4. Multiply line 3 by .01				
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)			1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8			0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4	, 5, and 6 .			
	FILING FEE AND TOTAL REMITTANCE DU	E			
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)			895.11	
	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			\$	915.11
	Important: Your remittance must be in the form of an electronic payr See page i of the general instructions in the paper SA1		-		hts!

Accounting Period:	2020/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Starpower Communications, LLC	SYSTEM ID# 063300
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast state to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations	16
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name Chris Connolly Tele	phone 609-681-2178
	Address 650 College Road East, Suite 3100 (Number, street, rural route, apartment, or suite number) Princeton, NJ 08540 (City, town, state, zip) Email chris.connolly@rcn.net Fax (optional)	
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regula 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 identified in line 1 of (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifies 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 contained 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)] X /s/ Parisa Salehani 	space B; or e cable system as identified d as owner of the cable system
	Typed or printed name: Parisa Salehani Title: Senior Vice President - Controller (Title of official position held in corporation or partnership)	
	Date: 2/24/21	

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.

	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
rpower Communications, LLC	06330
 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
Name Mailing Address	
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 Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	
×	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here - x	
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x	
Line 3 Multiply line 2 by the number of days late and enter the sum here - - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - x 0.00274 - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - <td></td>	
x	
x	
x	
x	
x	

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