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

STATEM	ENT OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	Return completed workbook by email to:	
	ry Transmissions by	DATE RECEIVED	AMOUNT		
	ems (Short Form)	BATERLOEIVEB		coplicsoa@copyright.gov	
General instru	ctions are located	\$		For additional information, contact the U.S. Copyright Office Licensing Division at:	
in the first tab	of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150	
	1				
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY)	YY/(Period))		
		7			
	2021/01	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31		
		7			
	2021	Barcode Data Filing Period (optional -	see instructions)		
Accounting Period					
В	Instructions: Give the full legal name of the owner of t of the subsidiary, not that of the parent o		ary of another corporation, give the full corpo	orate title	
Owner	List any other name or names under which	ch the owner conducts the business of the	e cable system.		
	-	e accounting period, only the owner on the equipment covering the entire accounting	e last day of the accounting period should sub g period.	omit a	
	Check here if this is the system's first filir	g. If not, enter the system's ID number as	signed by the Licensing Division.	24871	
	LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM			
	TDS Metrocom, LLC				
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFERENT)			
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM			
	525 Junction Road (Number, street, rural route, apartment, or suite				
	Madison, WI 53717 (City, town, state, zip)	nuniver)			
C	INSTRUCTIONS: In line 1, give any busi	ness or trade names used to identi	ify the business and operation of the s	system unless these	

	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
1	IDENTIFICATION OF CABLE SYSTEM:
I	TDS Telecom, Inc.
	MAILING ADDRESS OF CABLE SYSTEM:
2	(Number, street, rural route, apartment, or suite number)
	(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.

		FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
	TDS Metrocom, LLC	248
	Instructions: List each separate community served by the cable system. A "community" is the	
D	"a separate and distinct community or municipal entity (including unincorporated communitidiscrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will see 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 home par	ks should be reported in parentheses below the
Area Served	identified city.	
	CITY OR TOWN	STATE
First	Village of Merrimac	WI
Community	Village of Prairie du Sac	WI
	Village of Sauk City	WI
d Rows as Necessary	Southeast Telephone Co. of Wisconsin, LLC	WI
,	Town of Greenfield	WI
	Town of Mazomanie	wi
	Town of Merrimac	WI
	Town of Prairie du Sac	WI
	Town of Roxbury	WI
	Town of Sumpter	WI
	Town of West Point	WI

	LEGAL NAME OF OWNER OF C	ARI E SVSTEM				FORM SA1-	TEM IC	
Name		ADLE STOTEM.				010	2487	
	TDS Metrocom, LLC							
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCRIBERS AND R	ATES				
E	In General: The information in s		-					
Secondary	system, that is, the retransmission about other services (including particular services)							
Transmission	last day of the accounting period	, ,		•				
Service: Sub-	Number of Subscribers: Both	h blocks in spa	ce E call for the numb	er of subscribers to the c	able system	, broken		
scribers and	down by categories of secondar		•	•				
Rates	each category by counting the n separately for the particular service					charged		
	Rate: Give the standard rate of					ge and the		
	unit in which it is generally billed	• •	,	ny standard rate variatio	ons within a	particular rate		
	category, but do not include disc			ing of an and any transm	laalan aami	a that askis		
	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				under "Servi	ce to the		
	first set" and would be counted of Block 2: If your cable system				re different f	rom those		
	printed in block 1 (for example, t	-						
	with the number of subscribers a			•	,.			
	sufficient.	0.014.4		I	DI OOI			
	BLU	OCK 1 NO. OF			BLOCK	NO. OF		
	CATEGORY OF SERVICE	SUBSCRIB	ERS RATE	CATEGORY OF SE	ERVICE	SUBSCRIBERS	RAT	
	Residential:							
	Service to first set		376 \$25/mo					
	 Service to additional set(s) 							
	• FM radio (if separate rate)							
	Motel, hotel		4 \$40/mo					
	Commercial		6 \$40/mo					
	Converter		270 60.04-					
	Residential		376 \$6/Mo.					
	Non-residential							
	SERVICES OTHER THAN SEC	ONDARY TRA	ANSMISSIONS: RATE	s				
-	In General: Space F calls for ra				ystem's serv	rices that were		
F	not covered in space E, that is, t			•				
Services	service for a single fee. There and furnished at cost or (2) services	•	•	•	• • • •			
Other Than	amount of the charge and the ur							
Secondary	enter only the letters "PP" in the	rate column.		-				
ransmissions:								
Rates	Block 2: List any services that your cable system furnished or offered during the accounting period that listed in block 1 and for which a separate charge was made or established. List these other services in the							
	brief (two- or three-word) description and include the rate for each.							
	, , ,	BLO				BLOCK 2		
	CATEGORY OF SERVICE	RATE	CATEGORY OF SER	VICE RATE	CATEGO	DRY OF SERVICE	RAT	
	Continuing Services:		Installation: Non-res					
	• Pay cable	\$8.00-\$19.99	• Motel, hotel					
	• Pay cable—add'l channel		 Commercial 	\$0 - \$49.95				
	Fire protection		• Pay cable					
	•Burglar protection		• Pay cable-add'l ch	annel				
	Installation: Residential		 Fire protection 					
	• First set	\$0-\$49.95	 Burglar protection 					
	 Additional set(s) 	\$0-\$49.95	Other services:					
			Decomposit	\$0-\$25				
	• FM radio (if separate rate)		 Reconnect 	φ0-φ23				
	 FM radio (if separate rate) Converter 		Disconnect					
	, , ,			19.98-39.96	· · · · · · · · · · · · · · · · · · ·			

Name	LEGAL NAME OF OWNER O)F CABLE SYSTEM:		SYST			
	TDS Metrocom, LLC						
	PRIMARY TRANSMITTERS						
G		dentify every television station (including tr em during the accounting period, except	•	,			
	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						
rimary Ismitters:	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.						
levision		with respect to any distant stations car rules, regulations, or authorizations:	ried by your cable system on a s	substitute program			
		ere in space G—but do list it in space I (the	e Special Statement and Prograr	n Log)—if the			
	-	also in space I, if the station was carried	both on a substitute basis and a	lso on some other			
		tion concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pro					
	multicast stream associate	ed with a station according to its over-the-	-	-			
	"WETA-2" as the same or Column 2: Give the chan	n the form. nel number the FCC assigned to the telev	ision station for broadcasting over	er the air in its community			
	•	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st	tation an independent station or	r a noncommercial			
	educational station, by en	tering the letter "N" (for network), "N-M" (for	or network multicast), "I" (for inde	ependent), "I-M"			
	· ·	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc		ational multicast).			
		ion of each station. For U.S. stations, list t adian stations, if any, give the name of the	•	-			
	1 CC. I OF MEXICAN OF CAN	adian stations, it any, give the name of the					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION			
	wkow	27.1	N	Madiaan Wi			
	WKOW-DT2	27.2	N-M	Madison, WI Madison, WI			
ws as Necessary	WKOW-DT2 WKOW-DT3		N-M N-M	Madison, WI Madison, WI Madison, WI			
ws as Necessary		27.2		Madison, WI			
ws as Necessary	WKOW-DT3	27.2 27.3	N-M	Madison, WI Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4	27.2 27.3 27.4	N-M N-M	Madison, WI Madison, WI Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5	27.2 27.3 27.4 27.5	N-M N-M N-M	Madison, WI Madison, WI Madison, WI Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2	27.2 27.3 27.4 27.5 3.1 3.2	N-M N-M N-M N N-M	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3	27.2 27.3 27.4 27.5 3.1 3.2 3.3	N-M N-M N-M N	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1	N-M N-M N-M N-M N-M I	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN WMSN-DT2	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2	N-M N-M N-M N-M N-M I I-M	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.3	N-M N-M N-M N-M N-M I I I-M	Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN WMSN-DT2 WMSN-DT3 WMSN-DT4	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4	N-M N-M N-M N-M N-M I I I-M I-M	Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN WMSN-DT3 WMSN-DT4 WMTV	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1	N-M N-M N-M N-M N-M I I I-M I-M I-M N	Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV WMTV-DT2	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2	N-M N-M N-M N-M N-M I I-M I-M I-M N N-M	Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN-DT3 WMSN-DT3 WMSN-DT4 WMTV-DT2 WMTV-DT2 WMTV-DT2	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 15.1 15.2 15.3	N-M N-M N-M N-M N-M I I I-M I-M I-M N N-M N-M	Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT3 WMTV-DT3	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4	N-M N-M N-M N-M N-M I I-M I-M I-M N-M N-M N-M N-M	Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT3 WMSN-DT3 WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT2 WMTV-DT3 WMTV-DT3	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.3 15.4 15.5	N-M N-M N-M N-M N-M I I-M I-M I-M N-M N-M N-M N-M N-M	Madison, WIMadison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT2 WMSN-DT4 WMTV-DT3 WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5 WHA	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 21.1	N-M N-M N-M N-M N-M I I I-M I-M I-M I-M N-M N-M N-M N-M N-M N-M E	Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5 WHA WHA-DT2	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 21.1 21.2	N-M N-M N-M N-M N-M I I-M I-M I-M I-M N-M N-M N-M N-M N-M N-M E E	Madison, WIMadison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN-DT2 WMSN-DT2 WMSN-DT4 WMSN-DT4 WMTV-DT3 WMTV-DT2 WMTV-DT3 WMTV-DT5 WHA WHA-DT2 WHA-DT3	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 21.1 21.3	N-M N-M N-M N-M N-M N-M I I-M I-M I-M N-M N-M N-M N-M N-M N-M N-M E E E-M E-M	Madison, WI Madison, WI			
ws as Necessary	WKOW-DT3 WKOW-DT4 WKOW-DT5 WISC WISC-DT2 WISC-DT2 WISC-DT3 WMSN WMSN-DT3 WMSN-DT4 WMSN-DT4 WMTV-DT2 WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5 WHA WHA-DT2	27.2 27.3 27.4 27.5 3.1 3.2 3.3 47.1 47.2 47.3 47.4 15.1 15.2 15.3 15.4 21.1 21.2	N-M N-M N-M N-M N-M I I-M I-M I-M I-M N-M N-M N-M N-M N-M N-M E E	Madison, WIMadison, WI			

	LEGAL NAME OF OWNER OF	CABLE SYSTEM			SYSTEM I
Name		CABLE STOTEINI.			248
	TDS Metrocom, LLC				
			4 Letter stations and low nerver tal.	· ·	
G	· · · ·		g translator stations and low power tele of (1) stations carried only on a part-tir	,	
•		a b i i	the carriage of certain network program		
Primary ransmitters:	76.59(d)(2) and (4), 76.61(e	e)(2) and (4), or 76.63 (referring to 76.6	61(e)(2) and (4))]; and (2) certain stati		
		s explained in the next paragraph. With respect to any distant stations c	carried by your cable system on a subs	stitute program	
Television		les, regulations, or authorizations:			
	• Do not list the station here	e in space G—but do list it in space I (l	the Special Statement and Program L	og)—if the	
	station was carried only on		the there are the titute basis and also		
		•	ed both on a substitute basis and also , see page (v) of the general instruction		
			program services such as HBO, ESPI		
		0	e-air designation. For example, repor	t multistream	
	"WETA-2" as the same on the channel		evision station for broadcasting over th	he air in its community	
		RC is channel 4 in Washington, D.C.	evision station for broadcasting even a		
	Column 3: Indicate in each	case whether the station is a network	station, an independent station, or a i		
	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M"				
	(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).				
	(for independent multicast),	"E" (for noncommercial educational),	or "E-M" (for noncommercial education	nal multicast).	
	(for independent multicast), For the meaning of these ter Column 4: Give the location	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis	or "E-M" (for noncommercial education	s licensed by the	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these ter Column 4: Give the location	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is	s licensed by the	TATION
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	TATION
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	TATION
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	
	(for independent multicast), For the meaning of these te Column 4: Give the locatior FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	or "E-M" (for noncommercial education uctions in the paper SA1-2 form. It the community to which the station is the community with which the station i	s licensed by the is identified.	

LEGAL NAME O								SYSTEM 24
	t every radio	station c) carried on a separate and disc enerally receivable by your ca					н
eceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf isignal, indicate	it is carried b monitoring, to ormation abou rm. dentify the cal State whether f the radio stat this by placing	by the sy be rece ut the C Il sign of the stati tion's sig g a chec	NI-Band FM Carriage: Under extem whenever it is received a eived at the headend, with the copyright Office regulations on f each station carried. ion is AM or FM. gnal was electronically proces ck mark in the "S/D" column.	at the system's H a system's FM ar this point, see p sed by the cable	headend, and Itenna, during Hage (v) of the Paystem as a	(2) it ca certain genera separat	n be expected, stated intervals. I instructions in the. e and discrete	Primary Transmitter: Radio
			tion (the community to which t , the community with which th					
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
N/A								
						·		
		·				·		

Accounting Perio							FURI	M SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID
	TDS Metrocom, LLC							2487
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LO	3			
1								
•	In General: In space I, ident							
Substitute	substitute basis during the a explanation of the programm	• •		•				
Carriage:	1. SPECIAL STATEMEN	-			e general met		paper ert	
Special	During the accounting per				sis, any nonne	etwork televis	ion progra	m
Statement and Program Log	broadcast by a distant sta	ition?					YES	XNO
r rogram 20g	Note: If your answer is "No	» loovo tho	roct of this pag	no blank. If your answer is	"Voc " vou m			
	log in block 2.	, leave the	rescor this pag	je blatik. Il your allswei is	res, you m	usi complete	the progra	4111
	2. LOG OF SUBSTITUTI	E PROGRA	MS					
	In General: List each subs	titute progra	im on a separa		wherever pos	ssible, if their	meaning i	s
	clear. If you need more spa				n no a no no ") th	at during the		~
	period, was broadcast by a			ision program ("substitute our cable system substitute				
	under certain FCC rules, re	egulations, o	r authorization	s. See page (v) of the gen	eral instructio	ons for further	r informatio	on.
	Do not use general categor "NBA Basketball: 76ers vs.		vies" or "baske	tball." List specific progra	n titles, for ex	ample, "I Lov	ve Lucy" or	•
			dcast live, ente	r "Yes." Otherwise enter "I	No."			
	Column 3: Give the call	sign of the s	station broadca	asting the substitute progra	am.			
	Column 4: Give the broat the case of Mexican or Car			ne community to which the			FCC or, in	
				tem carried the substitute		,	vith the mo	onth
	first. Example: for May 7 gi							
	Column 6: State the tim to the nearest five minutes.			gram was carried by your				ely
	stated as "6:00–6:30 p.m."	. слатріє. а	a program cam	ed by a system nom 0.01.	15 p.m. to 0.2	20.00 p.m. sr		
				was substituted for progra				
	Ito delete under ECC rules	and regulativ						
		•		iring the accounting period				ram
	was substituted for program effect on October 19, 1976	nming that y		0				Iram
	was substituted for program	nming that y		0	FCC rules a	and regulatio	ns in	Iram
	was substituted for prograr effect on October 19, 1976	nming that y	our system wa	is permitted to delete unde	FCC rules a	and regulatio	ns in	ram
	was substituted for program effect on October 19, 1976	nming that y		is permitted to delete unde	FCC rules a	and regulatio	UTE RRED	
	was substituted for prograr effect on October 19, 1976	nming that y	our system wa	is permitted to delete unde	WHE CARRI	and regulatio	UTE RRED	7. REASON F
	was substituted for program effect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON F
	was substituted for programe ffect on October 19, 1976	nming that y SUBSTITUT 2. LIVE?	E PROGRAM	is permitted to delete unde	WHE CARRI 5. MONTH	and regulatio N SUBSTIT AGE OCCU 6. TIN	UTE RRED MES	7. REASON FO

Accounting Period:	2021/01	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SI	STEM ID#
	TDS Metrocom, LLC		24871
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmers (as identified in space E) during the accounting period. For a further explanation of how to compute this 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.	nission service amount, se	,864.95
	COPYRIGHT ROYALTY FEE		· · · · ·
L 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 \$ Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(See page (vi) of the general instructions located in the paper SA1-2 form for more information. 	\$263,80(
	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 t accounting period is \$52.00	nis six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	1. Base amount under statutory formula		
	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)	<u> </u>	
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
			0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8		
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID #		
	<u>Important:</u> Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2021/01			FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWN TDS Metrocom, LL	ER OF CABLE SYSTEM: . C		SYSTEM ID# 24871
M Channels	to its subscribers, and 1. Enter the total num	d (2) the cable system's to	channels on which the cable system carried television broadc tal number of activated channels during the accounting period the cable	
	on which the cable	nber of activated channels system carried television b services		152
N Individual to Be Contacted		CONTACTED IF FURTHE t this statement of account	R INFORMATION IS NEEDED (Identify an individual to whon .)	m
for Further Information	Name St	ephanie Weber		Telephone (608) 664-4721
	(Nu Ma	5 Junction Rd mber, street, rural route, apartme adison, WI 53593 y, town, state, zip)	ent, or suite number)	
	Email	Finance@tdstelecon	n.com Fax (optional)	
O Certification	I, the undersigned, h (Owner oth (Agent of c in line 1 X (Officer or in line 1 I have examined the	ereby certify that (Check or her than corporation or pa by mer other than corporat of space B and that the ow r partner) I am an officer (if of space B. statement of account and h id correct to the best of my I	st be certified and signed in accordance with Copyright Office ne, <i>but only one</i> , of the boxes.) rtnership) I am the owner of the cable system as identified in lir ion or partnership) I am the duly authorized agent of the owner mer is not a corporation or partnership; or a corporation) or a partner (if a partnership) of the legal entity id hereby declare under penalty of law that all statements of fact co knowledge, information, and belief, and are made in good faith.	ne 1 of space B; or r of the cable system as identified lentified as owner of the cable system
			X /s/ Sharon V. Tisdale Enter an electronic signature on the line above to certify this statem Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	nent.
		Typed or printed i	name: Sharon V. Tisdale	
			Assistant Treasurer	
		Date:	August 23, 2	2021
Privacy Act Notice	: Section 111 of title 17 of	the United States Code auth	orizes the Copyright Office to collect the personally identifying inforr	mation (PII) requested on this

form in order to process your statement of account. PII is any personal 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: 2021/01	FORM SA1-2E. PAGE 8
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
Metrocom, LLC	2487
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross
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.	Receipts Exclusion
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
	_
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
	·
xdays	
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 in space L. (page 6) block 1. line 2. or block 2 line 8. or block 3 line 6 \$	
in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	·
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner	
Address	
Address	

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.