This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

## SA1-2E Short Form

Return completed workbook by email to:

## coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

| Α                    | ACCO      | OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))  |
|----------------------|-----------|--|
|                      |           | 2021/1       Period 1 = January 1 - June 30       Period 2 = July 1 - December 31         Barcode Data Filing Period (optional - see instructions)   |
| Accounting<br>Period |           |  |
| В                    |           | Instructions:<br>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<br>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  |
|                      |           | MCC Illinois, LLC (Charleston, IL)   |
|                      |           | BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)   |
|                      |           |  |
|                      |           | MAILING ADDRESS OF OWNER OF CABLE SYSTEM   |
|                      |           | ONE MEDIACOM WAY (Number, street, rural route, apartment, or suite number)   |
|                      |           | MEDIACOM PARK, NY 10918<br>(City, town, state, zjp)  |
|                      |           |  |
| С                    |           | <b>UCTIONS:</b> 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:  |
|                      | 2         | MAILING ADDRESS OF CABLE SYSTEM:   |
|                      | 2         | (Number, street, rural route, apartment, or sulte number)  |
|                      |           | (City, town, state, zip code)  |
|                      |           |  |
| Briveou Act Notice   | . Saction | 111 of tills 17 of the United States Code authorizes the Convicts Office to called the personality identifying information (DII) requested on this   |

FOR COPYRIGHT OFFICE USE ONLY

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

08/30/21

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

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

| Name                | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#  |
|---------------------|---|---|
| Name                | MCC Illinois, LLC (Charleston, IL)  | 7729  |
| D                   | Instructions: List each separate community served by the cable system. A "communi<br>separate and distinct community or municipal entity (including unincorporated com-<br>unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will se<br>community." Please use it as the first community on all future filings. | nunities within unincorporated areas and including single, discrete<br>rve as a form of system identification hereafter known as the "first |
| Area<br>Served      | Note: Entities and properties such as hotels, apartments, condominiums, or mobile h city.   | ome parks should be reported in parentheses below the identified  |
| Corroa              |   |   |
|                     |   | STATE   |
| First<br>Community  | CHARLESTON<br>ASHMORE   |   |
| community           | COLES COUNTY  |   |
|                     | KANSAS VILLAGE  |   |
| d Rows as Necessary | WESTFIELD   |   |
|                     | WESTFIELD   | IL  |
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|                               | LEGAL NAME OF OWNER OF CA   | ABLE SYSTEM:          |   |   |             |                  |              | SYS                   | TEM ID |
|-------------------------------|---|-----------------------|---|---|-------------|------------------|--------------|-----------------------|--------|
| Name                          | MCC Illinois, LLC (Char   |                       |   |   |             |                  |              |                       | 772    |
|                               | SECONDARY TRANSMISSION  |                       | IRECRI  |   | TER         |                  |              |                       |        |
| E                             | In General: The information in s  |                       |   |   |             | ry transmission  | service of   | the cable             |        |
|                               | system, that is, the retransmission   | on of television      | and ra  | dio broadcasts  | by your sy  | ystem to subscr  | ibers. Give  | e information         |        |
| Secondary                     | about other services (including p   | , , ,                 | ,   |   | ,           |                  | those exis   | ting on the           |        |
| Transmission<br>Service: Sub- | last day of the accounting period<br>Number of Subscribers: Both  | •                     |   |   |             | ,                | hla system   | broken                |        |
| scribers and                  | down by categories of secondary   | •                     |   |   |             |                  | -            |                       |        |
| Rates                         | each category by counting the n   | •                     |   | •   |             | •                |              |                       |        |
|                               | separately for the particular serv  |                       |   |   |             |                  |              |                       |        |
|                               | <b>Rate:</b> Give the standard rate of unit in which it is generally billed   | -                     | -   |   |             |                  |              | -                     |        |
|                               | category, but do not include disc   | · · ·                 |   | ,   | iny stanua  |                  | s within a   | particular rate       |        |
|                               | Block 1: In the left-hand block   |                       |   |   | ries of sec | condary transmi  | ssion servi  | ce that cable         |        |
|                               | systems most commonly provide   |                       |   |   |             |                  |              | 0,                    |        |
|                               | that applies to your system. Not  |                       |   | -   |             | -                |              |                       |        |
|                               | categories, that person or entity subscriber who pays extra for ca  |                       |   |   |             |                  |              |                       |        |
|                               | first set" and would be counted of  |                       |   |   |             |                  |              |                       |        |
|                               | Block 2: If your cable system   |                       |   |   |             | service that are | e different  | from those            |        |
|                               | printed in block 1 (for example, t  |                       |   |   |             | ,                | <i>,</i> ,   | , 0                   |        |
|                               | with the number of subscribers a sufficient.  | and rates, in the     | e right-l                                       | hand block. A t   | NO- or thre | e-word descript  | ion of the s | service is            |        |
|                               |   | DCK 1                 |   |   |             |                  | BLOC         | <2                    |        |
|                               | CATEGORY OF SERVICE   | NO. OF<br>SUBSCRIBI   |   | RATE  | САТІ        | EGORY OF SE      | RVICE        | NO. OF<br>SUBSCRIBERS | RATE   |
|                               | Residential:  | COBCOLUDE             |   | TUTE  | 0,111       |                  | (THOL        | COBCOLUBEILO          | 10112  |
|                               | Service to first set  |                       | 1,310   | 29.99-74.49   |             |                  |              |                       |        |
|                               | Service to additional set(s)  |                       | -,  |   |             |                  |              |                       |        |
|                               | • FM radio (if separate rate)   |                       |   |   |             |                  |              |                       |        |
|                               | Motel, hotel  |                       |   |   |             |                  |              |                       |        |
|                               | Commercial  |                       | 1   | 29.99-74.49   |             |                  |              |                       |        |
|                               | Converter   |                       |   |   |             |                  |              |                       |        |
|                               | Residential   |                       |   |   |             |                  |              |                       |        |
|                               | Non-residential   |                       |   |   |             |                  |              |                       |        |
|                               |   |                       |   |   |             |                  |              |                       |        |
|                               | SERVICES OTHER THAN SEC   | ONDARY TRA            | NSMIS   | SIONS: RATES  | S           |                  |              |                       |        |
| F                             | In General: Space F calls for rat   | (                     | ,   |   | •           | ,                |              |                       |        |
| •                             | not covered in space E, that is, t<br>service for a single fee. There a   |                       |   |   |             |                  |              |                       |        |
| Services                      | furnished at cost or (2) services   |                       |   |   |             |                  |              |                       |        |
| Other Than                    | amount of the charge and the ur   | nit in which it is    | usually   | / billed. If any ra   | ates are ch | narged on a var  | able per-p   | rogram basis,         |        |
| Secondary                     | enter only the letters "PP" in the  |                       |   |   |             |                  |              |                       |        |
| Fransmissions:<br>Rates       | Block 1: Give the standard rat<br>Block 2: List any services that   | • •                   |   |   |             | ••               |              | t were not            |        |
| Nates                         | listed in block 1 and for which a   | • •                   |   |   | -           | -                | -            |                       |        |
|                               | brief (two- or three-word) descrip  |                       |   |   |             |                  |              |                       |        |
|                               |   | BLO                   | CK 1  |   |             |                  |              | BLOCK 2               |        |
|                               | CATEGORY OF SERVICE   | RATE                  |   | GORY OF SER   | VICE        | RATE             | CATEG        | ORY OF SERVICE        | RATE   |
|                               | Continuing Services:  |                       | Install   | ation: Non-res  | idential    |                  |              |                       |        |
|                               | • Pay cable   | PP                    | • Mo  | otel, hotel   |             |                  | Family       | Cable                 | 86.9   |
|                               | Pay cable—add'l channel   | PP                    | ۰Co   | mmercial  |             |                  |              |                       |        |
|                               |   |                       | • Pa  | y cable   |             |                  |              |                       |        |
|                               | • Fire protection   |                       |   |   |             |                  |              |                       |        |
|                               |   |                       | • Pa  | y cable-add'l ch  | nannel      |                  |              |                       |        |
|                               | Fire protection   |                       |   | y cable-add'l ch<br>e protection                                | nannel      |                  |              |                       |        |
|                               | Fire protection     Burglar protection  | 109.99                | • Fire  |   |             |                  |              |                       |        |
|                               | Fire protection     Burglar protection Installation: Residential  | 109.99<br>15.00-49.00 | • Fire<br>• Bu                                  | e protection  |             |                  |              |                       |        |
|                               | Fire protection     Burglar protection Installation: Residential     First set  |                       | • Fire<br>• Bu<br>Other                         | e protection<br>rglar protection                                |             | 49.00            |              |                       |        |
|                               | <ul> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> </ul>                                      |                       | • Fire<br>• Bu<br><b>Other</b><br>• Re          | e protection<br>rglar protection<br><b>services:</b>            |             | 49.00            |              |                       |        |
|                               | <ul> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul> | 15.00-49.00           | • Fire<br>• Bu<br><b>Other</b><br>• Re<br>• Dis | e protection<br>rglar protection<br><b>services:</b><br>connect |             | 49.00            |              |                       |        |

| Namo                       | LEGAL NAME OF OWNER OF O  | CABLE SYSTEM:  |   | SYSTEM  |
|----------------------------|---|--|---|---|
| Name                       | MCC Illinois, LLC (Cha  | rleston, I <u>L)</u>   |   | 7   |
|                            | PRIMARY TRANSMITTERS:   | · ·  |   |   |
| G                          |   | tify every television station (including tr  |   |   |
| G                          |   | during the accounting period, <i>except</i> (<br>effect on June 24, 1981, permitting the   |   |   |
| Primary                    | 76.59(d)(2) and (4), 76.61(e)(  | (2) and (4), or 76.63 (referring to 76.61  |   |   |
| ransmitters:<br>Television |   | explained in the next paragraph.<br>With respect to any distant stations can   | rried by your cable system on a sub   | ostitute program  |
|                            | basis under specific FCC rule   | es, regulations, or authorizations:<br>in space G—but do list it in space I (the   |   |   |
|                            | station was carried only on a   | a substitute basis.  |   |   |
|                            |   | so in space I, if the station was carried<br>n concerning substitute basis stations, s   |   |   |
|                            | Column 1: List each station's   | s call sign. Do not report origination pr  | ogram services such as HBO, ESP   | N, etc. Identify each   |
|                            | "WETA-2" as the same on the   |  |   |   |
|                            |   | number the FCC assigned to the telev<br>RC is channel 4 in Washington, D.C.  | vision station for broadcasting over t  | the air in its community  |
|                            | Column 3: Indicate in each c  | case whether the station is a network s  | •   |   |
|                            |   | ng the letter "N" (for network), "N-M" (for<br>'E" (for noncommercial educational), or   |   |   |
|                            | For the meaning of these term   | ms, see page (iv) of the general instruction of each station. For U.S. stations, list t  | ctions in the paper SA1-2 form.   | ,   |
|                            |   | ian stations, if any, give the name of the   | •   | -   |
|                            |   |  |   |   |
|                            | 1. CALL SIGN  | 2. B'CAST CHANNEL NUMBER   | 3. TYPE OF STATION  | 4. LOCATION OF STATION  |
|                            | WAND/WAND(HD) NBC   | 17   | N   | Decatur, IL   |
|                            | WAND-DT2 Cozi TV  | 17.2   | I-M   | Decatur, IL   |
| Rows as Necessary          | WAWV/WAWV(HD) ABC   | 39   | N   | TERRE HAUTE, IN   |
| ows as Necessary           |   | i i  |   | •   |
|                            | WAWV-DT Grit  | 39.2   | I-M   | TERRE HAUTE, IN   |
|                            | WAWV-DT Grit<br>WAWV-DT3 Bounce TV  | 39.2<br>39.3   | I-M<br>I-M  | TERRE HAUTE, IN<br>TERRE HAUTE, IN  |
|                            |   |  |   |   |
|                            | WAWV-DT3 Bounce TV  | 39.3   |   | TERRE HAUTE, IN   |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW  | 39.3<br>22   | I-M<br>I  | TERRE HAUTE, IN<br>Decatur, IL  |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL   | 39.3<br>22<br>22.2   | I-M<br>I<br>I-M   | TERRE HAUTE, IN<br>Decatur, IL<br>Decatur, IL   |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium   | 39.3<br>22<br>22.2<br>22.3   | I-M<br>I<br>I-M   | TERRE HAUTE, IN<br>Decatur, IL<br>Decatur, IL<br>Decatur, IL  |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX  | 39.3<br>22<br>22.2<br>22.3<br>26   | I-M<br>I<br>I-M<br>I-M<br>I   | TERRE HAUTE, IN<br>Decatur, IL<br>Decatur, IL<br>Decatur, IL<br>Urbana, IL  |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV  | 39.3<br>22<br>22.2<br>22.3<br>26<br>26.2   | I-M<br>I<br>I-M<br>I-M<br>I<br>I-M  | TERRE HAUTE, IN<br>Decatur, IL<br>Decatur, IL<br>Decatur, IL<br>Urbana, IL<br>Urbana, IL  |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV   | 39.3<br>22<br>22.2<br>22.3<br>26<br>26.2<br>26.3   | I-M<br>I<br>I-M<br>I-M<br>I<br>I<br>I-M<br>I-M  | TERRE HAUTE, IN<br>Decatur, IL<br>Decatur, IL<br>Urbana, IL<br>Urbana, IL<br>Urbana, IL<br>Champaign, IL  |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/WCIA(HD) CBS  | 39.3<br>22<br>22.2<br>22.3<br>26<br>26.2<br>26.3<br>48   | I-M<br>I<br>I-M<br>I-M<br>I<br>I-M<br>I-M<br>I-M<br>N   | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL   |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/WCIA(HD) CBS<br>WCIA-DT3 Bounce TV  | 39.3         22         22.2         22.3         26         26.2         26.3         48         48.3   | I-M<br>I<br>I-M<br>I-M<br>I<br>I-M<br>I-M<br>N<br>I-M   | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Champaign, IL   |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/WCIA(HD) CBS<br>WCIA-DT3 Bounce TV<br>WCIA-DT4 Grit<br>WCIX-DT/WCIX (HD) My Ne  | 39.3<br>22<br>22.2<br>22.3<br>26<br>26.2<br>26.3<br>48<br>48<br>48.3<br>48.4   | I-M<br>I<br>I-M<br>I-M<br>I<br>I-M<br>I-M<br>N<br>I-M   | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Springfield, IL  |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/WCIA(HD) CBS<br>WCIA-DT3 Bounce TV<br>WCIA-DT4 Grit<br>WCIX-DT/WCIX (HD) My Na  | 39.3         22         22.2         22.3         26         26.2         26.3         48         48.4         49         49.3   | I-M<br>I<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-  | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Springfield, IL         Springfield, IL   |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/WCIA(HD) CBS<br>WCIA-DT3 Bounce TV<br>WCIA-DT4 Grit<br>WCIX-DT4 Grit<br>WCIX-DT3 Escape<br>WCIX-DT4 Laff  | 39.3         22         22.2         22.3         26         26.2         26.3         48         48.3         48.4         49         49.3         49.4   | I-M<br>I<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I<br>I<br>I<br>I  | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Champaign, IL         Springfield, IL         Springfield, IL  |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/WCIA(HD) CBS<br>WCIA-DT3 Bounce TV<br>WCIA-DT4 Grit<br>WCIX-DT/WCIX (HD) My Ne<br>WCIX-DT4 Laff<br>WEIU/WEIU(HD) PBS  | 39.3         22         22.2         22.3         26         26.2         26.3         48         48.4         49         49.3         49.4         50   | I-M<br>I<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-  | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Springfield, IL         Springfield, IL         Charleston, IL   |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/WCIA(HD) CBS<br>WCIA-DT3 Bounce TV<br>WCIA-DT4 Grit<br>WCIX-DT4 Grit<br>WCIX-DT3 Escape<br>WCIX-DT4 Laff<br>WEIU/WEIU(HD) PBS<br>WEIU-DT2 PBS MHZ World   | 39.3         22         22.2         22.3         26         26.2         26.3         48         48.3         48.4         49         49.3         49.4         50         50.2                         | I-M<br>I<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I<br>I<br>I-M<br>I<br>I<br>I-M<br>I<br>I-M<br>I<br>I-M<br>I<br>I-M<br>I<br>I<br>I-M | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Springfield, IL         Springfield, IL         Charleston, IL   |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/DT3 Bounce TV<br>WCIA-DT3 Bounce TV<br>WCIA-DT4 Grit<br>WCIX-DT7WCIX (HD) My Ne<br>WCIX-DT4 Laff<br>WEIU/WEIU(HD) PBS<br>WEIU-DT2 PBS MHZ World<br>WICD/WICD(HD) ABC  | 39.3         22         22.2         22.2         22.3         26         26.2         26.3         48         48.4         49         49.3         49.4         50         50.2         41              | I-M<br>I<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-  | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Springfield, IL         Springfield, IL         Charleston, IL         Charleston, IL         Charpaign, IL  |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/WCIA(HD) CBS<br>WCIA-DT3 Bounce TV<br>WCIA-DT4 Grit<br>WCIX-DT7WCIX (HD) My Na<br>WCIX-DT3 Escape<br>WCIX-DT4 Laff<br>WEIU/WEIU(HD) PBS<br>WEIU/WEIU(HD) PBS<br>WEIU-DT2 PBS MHZ World<br>WICD/WICD(HD) ABC<br>WICD-DT2 Comet | 39.3         22         22.2         22.2         22.3         26         26.2         26.3         48         48.4         49         49.3         49.4         50         50.2         41         41.2 | I-M<br>I<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-  | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Springfield, IL         Springfield, IL         Charleston, IL         Champaign, IL         Charleston, IL         Champaign, IL         Charleston, IL         Champaign, IL |
|                            | WAWV-DT3 Bounce TV<br>WBUI/WBUI(HD) CW<br>WBUI-DT2 DABL<br>WBUI-DT3 Stadium<br>WCCU/WCCU(HD) FOX<br>WCCU-DT2 Me TV<br>WCCU-DT3 Antenna TV<br>WCIA/DT3 Bounce TV<br>WCIA-DT3 Bounce TV<br>WCIA-DT4 Grit<br>WCIX-DT7WCIX (HD) My Ne<br>WCIX-DT4 Laff<br>WEIU/WEIU(HD) PBS<br>WEIU-DT2 PBS MHZ World<br>WICD/WICD(HD) ABC  | 39.3         22         22.2         22.2         22.3         26         26.2         26.3         48         48.4         49         49.3         49.4         50         50.2         41              | I-M<br>I<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-  | TERRE HAUTE, IN         Decatur, IL         Decatur, IL         Urbana, IL         Urbana, IL         Urbana, IL         Champaign, IL         Champaign, IL         Springfield, IL         Springfield, IL         Charleston, IL         Charleston, IL         Charpaign, IL  |

|   | LEGAL NAME OF OWNER OF  | CABLE SYSTEM:  |  | SYSTEM I   |
|---|---|--|--|--|
| Name  | MCC Illinois, LLC (Cha  | arleston, IL)  |  | 772  |
|   | PRIMARY TRANSMITTERS:   | TELEVISION   |  |  |
| G<br>Primary<br>Transmitters:<br>Television | In General: In space G, iden<br>carried by your cable system<br>FCC rules and regulations in<br>76.59(d)(2) and (4), 76.61(e)<br>substitute program basis, as<br>Substitute Basis Stations:<br>basis under specific FCC rule<br>• Do not list the station here<br>station was carried only on a<br>• List the station here, and als<br>basis. For further information<br>Column 1: List each station'<br>multicast stream associated of<br>"WETA-2" as the same on th<br>Column 2: Give the channel<br>of license. For example, WR<br>Column 3: Indicate in each of | tify every television station (including tr<br>during the accounting period, <i>except</i> (<br>effect on June 24, 1981, permitting the<br>(2) and (4), or 76.63 (referring to 76.61<br>explained in the next paragraph.<br>With respect to any distant stations ca-<br>es, regulations, or authorizations:<br>in space G—but do list it in space I (the<br>substitute basis.<br>so in space I, if the station was carried<br>o concerning substitute basis stations, s<br>s call sign. <i>Do not</i> report origination pr<br>with a station according to its over-the- | (1) stations carried only on a part-ti<br>e carriage of certain network progra<br>(e)(2) and (4))]; and (2) certain sta<br>rried by your cable system on a sub<br>e Special Statement and Program I<br>both on a substitute basis and also<br>see page (v) of the general instruct<br>ogram services such as HBO, ESF<br>air designation. For example, repo-<br>rision station for broadcasting over<br>tation, an independent station, or a | me basis under<br>ams [sections<br>tions carried on a<br>bostitute program<br>Log)—if the<br>o on some other<br>ions.<br>PN, etc. Identify each<br>ort multistream<br>the air in its community<br>noncommercial  |
|   | (for independent multicast), "  | E" (for noncommercial educational), or   |  |  |
|   | (for independent multicast), "<br>For the meaning of these ten<br><b>Column 4:</b> Give the location<br>FCC. For Mexican or Canadi  | ms, see page (iv) of the general instruct<br>of each station. For U.S. stations, list the<br>an stations, if any, give the name of the   | tions in the paper SA1-2 form.<br>the community to which the station<br>e community with which the station   | onal multicast).<br>is licensed by the<br>is identified.   |
|   | (for independent multicast), "<br>For the meaning of these tern<br><b>Column 4:</b> Give the location<br>FCC. For Mexican or Canadi<br><b>1. CALL SIGN</b>  | ms, see page (iv) of the general instruct<br>of each station. For U.S. stations, list it<br>an stations, if any, give the name of the<br><b>2. B'CAST CHANNEL NUMBER</b>   | tions in the paper SA1-2 form.<br>the community to which the station<br>e community with which the station<br>3. TYPE OF STATION   | onal multicast).<br>is licensed by the<br>is identified.<br>4. LOCATION OF STATION   |
|   | (for independent multicast), "<br>For the meaning of these tern<br><b>Column 4:</b> Give the location<br>FCC. For Mexican or Canadi<br><b>1. CALL SIGN</b><br>WILL-DT2 PBS World  | ms, see page (iv) of the general instruct<br>of each station. For U.S. stations, list f<br>an stations, if any, give the name of the<br>2. B'CAST CHANNEL NUMBER<br>9.2  | tions in the paper SA1-2 form.<br>the community to which the station<br>e community with which the station<br>3. TYPE OF STATION<br>E-M  | onal multicast).<br>is licensed by the<br>is identified.<br>4. LOCATION OF STATION<br>Urbana, IL   |
|   | (for independent multicast), "<br>For the meaning of these ten<br>Column 4: Give the location<br>FCC. For Mexican or Canadi<br>1. CALL SIGN<br>WILL-DT2 PBS World<br>WILL-DT3 PBS Create  | ms, see page (iv) of the general instruct<br>of each station. For U.S. stations, list it<br>an stations, if any, give the name of the<br>2. B'CAST CHANNEL NUMBER<br>9.2<br>9.3  | tions in the paper SA1-2 form.<br>the community to which the station<br>e community with which the station<br>3. TYPE OF STATION<br>E-M<br>E-M   | onal multicast).<br>is licensed by the<br>is identified.<br>4. LOCATION OF STATION<br>Urbana, IL<br>Urbana, IL   |
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|   | (for independent multicast), "<br>For the meaning of these tern<br><b>Column 4:</b> Give the location<br>FCC. For Mexican or Canadi<br><b>1. CALL SIGN</b><br>WILL-DT2 PBS World<br>WILL-DT3 PBS Create<br>WTHI/WTHI(HD) CBS<br>WTHI-DT2/WTHI-DT2(HD) (<br>WTHI-DT3/WTHI-DT3(HD) (<br>WTWO/WTWO(HD) NBC   | ms, see page (iv) of the general instruct<br>of each station. For U.S. stations, list it<br>an stations, if any, give the name of the<br><b>2. B'CAST CHANNEL NUMBER</b><br>9.2<br>9.3<br>10<br>10.2   | tions in the paper SA1-2 form.<br>the community to which the station<br>e community with which the station<br>3. TYPE OF STATION<br>E-M<br>E-M<br>I-M<br>I-M<br>N  | onal multicast).<br>is licensed by the<br>is identified.<br>4. LOCATION OF STATION<br>Urbana, IL<br>Urbana, IL<br>Terre Haute, IN<br>Terre Haute, IN   |
|   | (for independent multicast), "<br>For the meaning of these tern<br><b>Column 4:</b> Give the location<br>FCC. For Mexican or Canadi<br><b>1. CALL SIGN</b><br>WILL-DT2 PBS World<br>WILL-DT3 PBS Create<br>WTHI/WTHI(HD) CBS<br>WTHI-DT2/WTHI-DT2(HD) I<br>WTHI-DT3/WTHI-DT3(HD) (  | ms, see page (iv) of the general instruct<br>of each station. For U.S. stations, list it<br>an stations, if any, give the name of the<br>2. B'CAST CHANNEL NUMBER<br>9.2<br>9.3<br>10<br>10.2<br>10.3  | tions in the paper SA1-2 form.<br>the community to which the station<br>community with which the station<br>3. TYPE OF STATION<br>E-M<br>E-M<br>N<br>I-M<br>I-M  | onal multicast).<br>is licensed by the<br>is identified.<br>4. LOCATION OF STATION<br>Urbana, IL<br>Urbana, IL<br>Terre Haute, IN<br>Terre Haute, IN<br>Terre Haute, IN  |
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|   | (for independent multicast), "<br>For the meaning of these tern<br><b>Column 4:</b> Give the location<br>FCC. For Mexican or Canadi<br><b>1. CALL SIGN</b><br>WILL-DT2 PBS World<br>WILL-DT3 PBS Create<br>WTHI/WTHI(HD) CBS<br>WTHI-DT2/WTHI-DT2(HD) (<br>WTHI-DT3/WTHI-DT3(HD) (<br>WTWO/WTWO(HD) NBC<br>WTWO-DT2 Laff  | ms, see page (iv) of the general instruct<br>of each station. For U.S. stations, list it<br>an stations, if any, give the name of the<br>9.2<br>9.3<br>10<br>10.2<br>10.3<br>36<br>36.2  | tions in the paper SA1-2 form.<br>the community to which the station<br>e community with which the station<br>3. TYPE OF STATION<br>E-M<br>E-M<br>I-M<br>I-M<br>I-M  | onal multicast).<br>is licensed by the<br>is identified.<br>4. LOCATION OF STATION<br>Urbana, IL<br>Urbana, IL<br>Urbana, IL<br>Terre Haute, IN<br>Terre Haute, IN<br>Terre Haute, IN<br>Terre Haute, IN<br>Terre Haute, IN<br>Terre Haute, IN   |
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|   | (for independent multicast), "<br>For the meaning of these tern<br>Column 4: Give the location<br>FCC. For Mexican or Canadi<br>1. CALL SIGN<br>WILL-DT2 PBS World<br>WILL-DT2 PBS World<br>WILL-DT3 PBS Create<br>WTHI/WTHI(HD) CBS<br>WTHI-DT2/WTHI-DT2(HD)<br>WTHI-DT3/WTHI-DT2(HD)<br>WTWO/WTWO(HD) NBC<br>WTWO-DT3 Escape<br>WTWO-DT3 Escape   | ms, see page (iv) of the general instruct<br>of each station. For U.S. stations, list it<br>an stations, if any, give the name of the<br>9.2<br>9.3<br>10<br>10.2<br>10.3<br>36<br>36.2<br>36.3<br>36.4  | tions in the paper SA1-2 form.<br>the community to which the station<br>e community with which the station<br>3. TYPE OF STATION<br>E-M<br>E-M<br>E-M<br>I-M<br>I-M<br>I-M<br>I-M<br>I-M   | onal multicast).<br>is licensed by the<br>is identified.<br>4. LOCATION OF STATION<br>Urbana, IL<br>Urbana, IL<br>Urbana, IL<br>Terre Haute, IN<br>Terre Haute, IN |
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| t every radio s  | tation ca  |  |   |   |   |  | Н  |
| it is carried by<br>monitoring, to<br>prmation abour<br>m.<br>lentify the call | y the sys<br>be recei<br>It the Co<br>sign of e  | tem whenever it is received at<br>ved at the headend, with the s<br>pyright Office regulations on t<br>each station carried.   | t the system's hea<br>system's FM ante  | adend, and (2)<br>nna, during ce  | ) it can b<br>ertain sta  | e expected,<br>ated intervals.   | Primary<br>Transmitters<br>Radio   |
| this by placing<br>ive the station   | g a checl<br>n's locati  | < mark in the "S/D" column.<br>on (the community to which th   | e station is licens   | ed by the FC  |   |  |  |
| AM or FM   | S/D  | LOCATION OF STATION  | CALL SIGN   | AM or FM  | S/D   | LOCATION OF STATION  |  |
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|  | , LLC (Cha<br>NSMITTERS:<br>t every radio s<br>whose signals<br>ctions Concer<br>it is carried by<br>monitoring, to<br>ormation about<br>m.<br>lentify the call<br>tate whether t<br>the radio stat<br>this by placing<br>ive the stations | , LLC (Charleston<br>NSMITTERS: RADIO<br>t every radio station ca<br>whose signals were gen<br>stions Concerning All<br>it is carried by the sys<br>monitoring, to be recei-<br>formation about the Co<br>rm.<br>lentify the call sign of et<br>tate whether the station<br>the radio station's sign<br>this by placing a check<br>ive the station's location<br>adian stations, if any, | t every radio station carried on a separate and discre-<br>whose signals were generally receivable by your cab<br>stions Concerning All-Band FM Carriage: Under C<br>it is carried by the system whenever it is received at<br>monitoring, to be received at the headend, with the so-<br>formation about the Copyright Office regulations on t<br>m.<br>lentify the call sign of each station carried.<br>tate whether the station is AM or FM.<br>the radio station's signal was electronically process<br>this by placing a check mark in the "S/D" column.<br>sive the station's location (the community to which the<br>leadian stations, if any, the community with which the | NSMITTERS: RADIO<br>t every radio station carried on a separate and discrete basis and list<br>whose signals were generally receivable by your cable system during in<br>stions Concerning All-Band FM Carriage: Under Copyright Office re-<br>it is carried by the system whenever it is received at the system's hear<br>monitoring, to be received at the headend, with the system's FM ante<br>ormation about the Copyright Office regulations on this point, see pag-<br>rm.<br>lentify the call sign of each station carried.<br>tate whether the station is AM or FM.<br>the radio station's signal was electronically processed by the cable sy<br>this by placing a check mark in the "S/D" column.<br>sive the station's location (the community to which the station is licens<br>adian stations, if any, the community with which the station is identified | NSMITTERS: RADIO<br>te very radio station carried on a separate and discrete basis and list those FM stations signals were generally receivable by your cable system during the accounting<br>stions Concerning All-Band FM Carriage: Under Copyright Office regulations, an<br>it is carried by the system whenever it is received at the system's headend, and (2<br>monitoring, to be received at the headend, with the system's FM antenna, during ce<br>formation about the Copyright Office regulations on this point, see page (v) of the germ.<br>lentify the call sign of each station carried.<br>tate whether the station is AM or FM.<br>the radio station's signal was electronically processed by the cable system as a se<br>this by placing a check mark in the "S/D" column.<br>Give the station's location (the community to which the station is licensed by the FCC<br>adian stations, if any, the community with which the station is identified). | NSMITTERS: RADIO<br>te very radio station carried on a separate and discrete basis and list those FM stations carry<br>whose signals were generally receivable by your cable system during the accounting period<br>stions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM sign<br>it is carried by the system whenever it is received at the system's headend, and (2) it can be<br>monitoring, to be received at the headend, with the system's FM antenna, during certain statormation about the Copyright Office regulations on this point, see page (v) of the general in<br>rm.<br>lentify the call sign of each station carried.<br>tate whether the station is AM or FM.<br>the radio station's signal was electronically processed by the cable system as a separate at<br>this by placing a check mark in the "S/D" column.<br>ive the station's location (the community to which the station is licensed by the FCC or, in t<br>adian stations, if any, the community with which the station is identified). | A LLC (Charleston, IL)  NSMITTERS: RADIO  t every radio station carried on a separate and discrete basis and list those FM stations carried on an whose signals were generally receivable by your cable system during the accounting period.  ctions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals.  formation about the Copyright Office regulations on this point, see page (v) of the general instructions in the.  m. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a separate and discrete this by placing a check mark in the "S/D" column.  ive the station's location (the community to which the station is licensed by the FCC or, in the case of radian stations, if any, the community with which the station is identified). |

| Accounting Perio     | d: 2021/1  |  |   |   |  |   | FOR  | RM SA1-2E. PAGE 5               |
|----------------------|--|--|---|---|--|---|--|---------------------------------|
| Name                 | LEGAL NAME OF OWNER OF O   |  |   |   |  |   |  | SYSTEM ID#                      |
|                      | MCC Illinois, LLC (Cha   | rleston, I   | L)  |   |  |   |  | 7729                            |
| Substitute           | SUBSTITUTE CARRIAGE<br>In General: In space I, identif<br>substitute basis during the ac<br>explanation of the programmi   | fy every non<br>counting pe  | network televis<br>riod, under spe  | <i>ion program,</i> broadcast by cific present and former FC  | a <i>distant</i> static<br>C rules, regula   | ations, or a  | uthorizations.   | For a further                   |
| Carriage:<br>Special | 1. SPECIAL STATEMENT   | CONCER   | NING SUBST  | TUTE CARRIAGE   | -  |   |  |                                 |
| Statement and        | <ul> <li>During the accounting peri<br/>broadcast by a distant stat</li> </ul>   | -  | r cable system  | carry, on a substitute bas  | is, any nonne  |   |  | NO                              |
| Program Log          | Note: If your answer is "No"   |  | root of this nos  | io blank. If your anower in   | "Voo" vou mu   | uat aamala  | YES  |                                 |
|                      | log in block 2.  | , leave the  | rest of this pay  | e blank. If your answer is  | res, you mu  | ist comple  | te the progra  | 111                             |
|                      | clear. If you need more space<br>Column 1: Give the title of<br>period, was broadcast by a<br>under certain FCC rules, reg<br>Do not use general categori<br>"NBA Basketball: 76ers vs. I<br>Column 2: If the program<br>Column 3: Give the call s<br>Column 4: Give the broad<br>the case of Mexican or Cana<br>Column 5: Give the mon<br>first. Example: for May 7 giv<br>Column 6: State the time<br>to the nearest five minutes.<br>stated as "6:00–6:30 p.m."<br>Column 7: Enter the letter<br>to delete under FCC rules a<br>was substituted for program | of every noi<br>distant stati<br>gulations, o<br>es like "mo<br>Bulls."<br>n was broad<br>sign of the s<br>dcast static<br>adian statio<br>th and day<br>e "5/7."<br>s when the<br>Example: a<br>er "R" if the<br>nd regulatic | nnetwork televi<br>ion and that yo<br>r authorizations<br>vies" or "baske<br>dcast live, enter<br>station broadca<br>on's location (th<br>ns, if any, the o<br>when your syst<br>substitute pro<br>program carri-<br>listed program<br>ons in effect du | sion program ("substitute<br>ur cable system substitute<br>s. See page (v) of the gen<br>tball." List specific program<br>"Yes." Otherwise enter "I<br>sting the substitute progra<br>the community to which the<br>community with which the<br>tem carried the substitute<br>gram was carried by your<br>ed by a system from 6:01:<br>was substituted for progra<br>ring the accounting period | d for the prog<br>eral instruction<br>n titles, for ex<br>No."<br>station is lice<br>station is lice<br>program. Use<br>cable system.<br>15 p.m. to 6:2<br>amming that y<br>l; enter the let | ramming of<br>ns for furth<br>ample, "I L<br>nsed by th<br>httified).<br>h numerals<br>List the ti<br>8:30 p.m.<br>rour systen<br>ter "P" if th | of another sta<br>ner informatio<br>Love Lucy" or<br>the FCC or, in<br>the with the mo-<br>mes accurate<br>should be<br>in was <i>require</i><br>ne listed progr | ition<br>n.<br>nth<br>ely<br>ed |
|                      | effect on October 19, 1976.  | UBSTITUT   | E PROGRAM   |   | WHEN SUBSTITUTE<br>CARRIAGE OCCURRED 7. REAS   |   |  | 7. REASON FOR                   |
|                      | 1. TITLE OF PROGRAM  | 2. LIVE?<br>Yes or No  | 3. STATION'S<br>CALL SIGN   | 4. STATION'S LOCATION   | 5. MONTH<br>AND DAY  | 6.<br>FROM  | TIMES<br>— TO  | DELETION                        |
|                      |  |  |   |   |  |   |  |                                 |
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| Accounting Period:                 | 2021/1   |                             |                                   | FORM                                 | SA1-2E. PAGE 6.              |
|------------------------------------|--|-----------------------------|-----------------------------------|--------------------------------------|------------------------------|
| Name                               | LEGAL NAME OF OWNER OF CABLE SYSTEM:   |                             |                                   | :                                    | SYSTEM ID#                   |
| Naille                             | MCC Illinois, LLC (Charleston, IL)   |                             |                                   |                                      | 7729                         |
| K<br>Gross Receipts                | GROSS RECEIPTS<br>Instructions: The figure you give in this space determines the form you file ar<br>all amounts (gross receipts) paid to your cable system by subscribers for the s<br>(as identified in space E) during the accounting period. For a further explanation<br>page (vii) of the general instructions located in the paper SA1-2 form.<br>Gross receipts from subscribers for secondary transmission service(s)<br>during the accounting period.  | ystem's see<br>on of how to | condary transmi<br>compute this a | ssion service<br>mount, see<br>\$ 3! | 90,065.45<br>pross receipts) |
|                                    |  |                             |                                   |                                      |                              |
| L<br>Copyright<br>Royalty Fee      | <ul> <li>COPYRIGHT ROYALTY FEE</li> <li>Instructions: To compute the royalty fee you owe:</li> <li>Complete block 1, block 2, or block 3.</li> <li>Use block 1 if the amount of gross receipts in space K is \$137,100 or less</li> <li>Use block 2 if the amount of gross receipts in space K is more than \$137,100</li> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800</li> <li>See page (vi) of the general instructions located in the paper SA1-2 form for more in</li> </ul> | but less tha                | n \$527,600                       | 63,800                               |                              |
|                                    | BLOCK 1: GROSS RECEIPTS OF \$13  | 7,100 OR L                  | ESS                               |                                      |                              |
|                                    | Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00   | fee that you                | ı must pay for thi                | s six-month                          |                              |
|                                    | 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 LE   | 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   |                             |                                   |                                      |                              |
|                                    | 3. Subtract line 2 from line 1   |                             |                                   |                                      |                              |
|                                    | 4. Enter the amount of gross receipts from space K   |                             |                                   |                                      |                              |
|                                    | 5. Enter the amount from line 3  |                             |                                   |                                      |                              |
|                                    | 6. Subtract line 5 from line 4   |                             |                                   |                                      |                              |
|                                    | 7. Multiply line 6 by .005 (enter figure here)   |                             |                                   |                                      |                              |
|                                    | 8. Interest charge. Enter the amount from line 4, space Q, page 8  |                             |                                   |                                      | 0.00                         |
|                                    | 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7  | and 8                       |                                   |                                      |                              |
|                                    | BLOCK 3: GROSS RECEIPTS OF MORE THAN \$26  | 3,800 (but I                | ess than \$527,                   | 600)                                 |                              |
|                                    | 1. Enter the amount of gross receipts from space K   | \$                          | 390,065.45                        |                                      |                              |
|                                    |  | \$                          | 263,800.00                        |                                      |                              |
|                                    |  | \$                          | 126,265.45                        |                                      |                              |
|                                    | 4. Multiply line 3 by .01  |                             | \$                                | 1,262.65                             |                              |
|                                    | 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  |                             |                                   |                                      | 2,581.65                     |
|                                    |  | , o, and 0                  |                                   | Ψ                                    | 2,001.00                     |
|                                    | FILING FEE AND TOTAL REMITTANCE DU   | IE                          |                                   |                                      |                              |
| Filing Fee and<br>Total Remittance | 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)  |                             | \$                                | 2,581.65                             |                              |
| Due                                | 2. Filing Fee (See the instructions for more information on filing fee calculations) .   |                             | \$                                | 20.00                                |                              |
|                                    | 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3   |                             |                                   | \$                                   | 2,601.65                     |
|                                    | Important: Your remittance must be in the form of an electronic pay<br>See page i of the general instructions in the paper SA1   |                             |                                   |                                      | jhts!                        |

| Accounting Period:                 | 2021/1              |   |  | FORM SA1-2E. PAGE 7.   |
|------------------------------------|---------------------|---|--|------------------------|
| Name                               |                     | DWNER OF CABLE SYSTEM:<br>LC (Charleston, IL)                     |  | SYSTEM ID#<br>7729     |
| M<br>Channels                      | to its subscriber   | rs, and (2) the cable system's t                                  | of channels on which the cable system carried television broadcast stations total number of activated channels during the accounting period.         |                        |
|                                    |                     | al number of channels on whic<br>ed television broadcast stations | h the cable<br>5   | 51                     |
|                                    | ,                   |   |  |                        |
|                                    |                     | al number of activated channel<br>cable system carried television |  |                        |
|                                    |                     | -   |  | 61                     |
| N<br>Individual to<br>Be Contacted |                     | D BE CONTACTED IF FURTH<br>about this statement of accou          | IER INFORMATION IS NEEDED (Identify an individual to whom nt.)   |                        |
| for Further                        | Name                | Kenneth J. Kohrs  | Telephone  | 845-443-2762           |
| Information                        |                     |   |  |                        |
|                                    | Address             | One Mediacom Way<br>(Number, street, rural route, apartm          | nent, or suite number)   |                        |
|                                    |                     | Mediacom Park, NY   |  |                        |
|                                    |                     | (City, town, state, zip)  |  |                        |
|                                    | Email               | Copyrights@me   | diacomcc.com Fax (optional   |                        |
|                                    |                     | (This statement of account mu                                     | ist be certified and signed in accordance with Copyright Office regulations)   |                        |
| ο                                  |                     |   |  |                        |
| Certification                      | • I, the undersigne | ed, hereby certify that (Check or                                 | e, <i>but only one</i> , of the boxes.)  |                        |
|                                    | (Owne               | r other than corporation or pa                                    | artnership) I am the owner of the cable system as identified in line 1 of space B  | ; or                   |
|                                    | X (Agent            | t of owner other than corpora                                     | tion or partnership) I am the duly authorized agent of the owner of the cable sy   | /stem as identified    |
|                                    |                     |   | e owner is not a corporation or partnership; or  |                        |
|                                    | (Offic              | <b>er or partner)</b> I am an officer (i<br>in line 1 of space B. | f a corporation) or a partner (if a partnership) of the legal entity identified as own   | er of the cable system |
|                                    |                     | te, and correct to the best of my                                 | ereby declare under penalty of law that all statements of fact contained herein<br>/ knowledge, information, and belief, and are made in good faith. |                        |
|                                    |                     |   | X /s/ Kenneth J. Kohrs   |                        |
|                                    |                     |   | Enter an electronic signature on the line above to certify this statement.<br>Enter signature using an "/s/ signature" (e.g., /s/ John Smith)        |                        |
|                                    |                     | Typed or printed  | name: Kenneth J. Kohrs   |                        |
|                                    |                     | Title:<br>(Tit  | Vice President, Financial Reporting<br>le of official position held in corporation or partnership)   |                        |
|                                    |                     | Date:   | 8/3/2021   |                        |

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.

| Dunting Period: 2021/1  | FORM SA1-2E. PAGE 8  |
|---|--|
| AL NAME OF OWNER OF CABLE SYSTEM:   | SYSTEM ID  |
| C Illinois, LLC (Charleston, IL)  | 7729   |
| <ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:         <ul> <li>"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."</li> </ul> </li> <li>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.</li> <li>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?</li> <li>X NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below</li></ul> | P<br>Special Statement<br>Concerning Gross<br>Receipts Exclusion |
| Name     Name       Mailing Address     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.   |  |
| For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment   | Interest Assessment  |
| Line 1 Enter the amount of late payment or underpayment   |  |
| Line 1 Enter the amount of late payment or underpayment   |  |
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| Line 1 Enter the amount of late payment or underpayment   |  |

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