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.

Γ

## **SA1-2E** Short Form

Return completed workbook

STATEME	INT OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	by email to:
for Seconda	ry Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov
General instru	<i>ms (Short Form)</i> ctions are located of this workbook	2/28/22	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y)	(YY/(Period))	-
	2021/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20212	Barcode Data Filing Period (optional -	see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of th title of the subsidiary, not that of the pare		diary of another corporation, give the full c	orporate
Owner	List any other name or names under whic	h the owner conducts the business of t	he cable system.	
	-		he last day of the accounting period should	submit a
	single statement of account and royalty fe	e payment covering the entire account	ting period.	1482
	Check here if this is the system's first filing	g. If not, enter the system's ID number	assigned by the Licensing Division.	1402
	LEGAL NAME OF OWNER/MAILING	G ADDRESS OF CABLE SYSTEM		
	CABLE ONE, INC.			
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT	)	
	MAILING ADDRESS OF OWNER OF 210 E. EARLL DRIVE	CABLE SYSTEM		
	(Number, street, rural route, apartment, or suite nu	umber)		
	PHOENIX, AZ 85012-2626 (City, town, state, zip)			
С	<b>INSTRUCTIONS:</b> In line 1, give any busir names already appear in space B. In line			
System	1 IDENTIFICATION OF CABLE SYSTEM: SPARKLIGHT			
	MAILING ADDRESS OF CABLE SYSTEM			
	2229 BROADWAY (Number, street, rural route, apartment, or suite nu	imber)		
	PARSONS, KS 67357 (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 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 suffciency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	CABLE ONE, INC.	1482
D	Instructions: List each separate community served by the cable system. A "com "a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that y as the "first community." Please use it as the first community on all future filing	ed communities within unincorporated areas and including single, you list will serve as a form of system identification hereafter knowr ys.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mo identified city.	bile home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	PARSONS	KS
Community		
Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM							1-2E. PAGI STEM II
Name	CABLE ONE, INC.	ADEL OTOTEM.							148
Е	SECONDARY TRANSMISSION								
-	In General: The information in s system, that is, the retransmission	•		0	•	•			
Secondary	about other services (including p								
ransmission	last day of the accounting period	· · ·						.9	
Service: Sub-	Number of Subscribers: Both	h blocks in spac	e E cal	I for the numbe	er of subsc	ribers to the cal	ole system,	broken	
scribers and	down by categories of secondary								
Rates	each category by counting the nu separately for the particular service	-						charged	
	Rate: Give the standard rate c							e and the	
	unit in which it is generally billed	-	-	•			-		
	category, but do not include disc								
	Block 1: In the left-hand block			•					
	systems most commonly provide that applies to your system. <b>Not</b>								
	categories, that person or entity			-		-			
	subscriber who pays extra for ca						•		
	first set" and would be counted o								
	Block 2: If your cable system I	-		•					
	printed in block 1 (for example, the								
	with the number of subscribers a sufficient.	ind rates, in the	right-h	and DIOCK. A tv	vo- or three	e-wora descripti	on of the s	ervice is	
		DCK 1					BLOC	٢2	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE	SUBSCRIBE	RS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RA
	Residential:								
	Service to first set		460	40.00	BULK			13	25.
	<ul> <li>Service to additional set(s)</li> </ul>					NG HOMES		37	15.
	• FM radio (if separate rate)				HOSPI	TAL		55	8.
	Motel, hotel		2	10.00					
	Commercial		31	8.00-15.00					
	Converter								
	• Residential								
	Non-residential								
		1						1	
	SERVICES OTHER THAN SEC				-		tom'a aan <i>i</i> i	and that ware	
F	In General: Space F calls for rat not covered in space E, that is, the	•	,		•				
-	service for a single fee. There ar					,	,		
Services	furnished at cost or (2) services	•			•		• • • •		
	amount of the charge and the un		usually	billed. If any ra	ites are ch	arged on a varia	able per-pro	ogram basis,	
Secondary	enter only the letters "PP" in the		o coble	system for ea	ich of the c	applicable servic	os listad		
Secondary ansmissions:	Block 1: Give the standard rat	e charged by th		•		••		were not	
Secondary		e charged by th your cable syst	tem fur	nished or offer	ed during t	the accounting p	period that		
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that	e charged by th your cable syst separate charge	tem furi e was n	nished or offer nade or establi	ed during t	the accounting p	period that		
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s	e charged by th your cable syst separate charge tion and include	tem furi e was n e the ra	nished or offer nade or establi	ed during t	the accounting p	period that	form of a	
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s	e charged by the your cable syst separate charge tion and include BLOC	tem fur e was m e the ra CK 1	nished or offer nade or establi	ed during t shed. List	the accounting p	period that vices in the		RA
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip	e charged by th your cable syst separate charge tion and include BLOC RATE	tem fur e was n e the ra CK 1 CATEC	nished or offer nade or establi ite for each.	ed during t shed. List	the accounting p these other serv	period that vices in the	form of a BLOCK 2	RAT
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE	e charged by th your cable syst separate charge tion and include BLOC RATE	tem fur e was n e the ra CK 1 CATEC Installa	nished or offer nade or establi ite for each. GORY OF SER	ed during t shed. List	the accounting p these other serv	ceriod that vices in the	form of a BLOCK 2	
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	e charged by the your cable system of the sy	tem fur e was m e the ra CK 1 CATEC Installa • Mot	nished or offer nade or establi ite for each. GORY OF SER ation: Non-res	ed during t shed. List	the accounting p these other serv	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	5.
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	e charged by the your cable syst separate charge tion and include BLOC RATE 15.00 - 17.00	tem furn e was n e the ra <u>CK 1</u> CATEC Installa • Mot • Cor	nished or offer nade or establi te for each. GORY OF SER ation: Non-res tel, hotel	ed during t shed. List	the accounting p these other server RATE	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	5.
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	e charged by the your cable syst separate charge tion and include BLOC RATE 15.00 - 17.00	tem furi e was n e the ra CK 1 CATEG Installa • Mot • Cor • Pay	nished or offer nade or establi ite for each. GORY OF SER ation: Non-res tel, hotel mmercial	ed during t shed. List t VICE sidential	the accounting p these other server RATE	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	RAT 5. 55.
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	e charged by the your cable syst separate charge tion and include BLOC RATE 15.00 - 17.00	tem furi e was n e the ra CK 1 CATEC Installa • Mot • Cor • Pay • Pay	nished or offer nade or establi ite for each. GORY OF SER ation: Non-res tel, hotel mmercial y cable	ed during t shed. List t VICE sidential	the accounting p these other server RATE	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	5.
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection	e charged by the your cable syst separate charge tion and include BLOC RATE 15.00 - 17.00	tem furi was n the ra <u>CK 1</u> <u>CATEG</u> Installa • Mot • Cor • Pay • Pay • Fire	nished or offer nade or establi te for each. GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l ch	ed during t shed. List <u>VICE</u> idential	the accounting p these other server RATE	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	5.
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	e charged by the your cable system is your cable system is separate charge better and include BLOC RATE 15.00 - 17.00 15.00-17.00 30.00-90.00	tem furn was m the ra CK 1 CATEC Installa • Mot • Cor • Pay • Pay • Fire • Bur	nished or offer- nade or establi ite for each. GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l ch protection	ed during t shed. List <u>VICE</u> idential	the accounting p these other server RATE	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	5.
ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set	e charged by the your cable system is your cable system is separate charge better and include BLOC RATE 15.00 - 17.00 15.00-17.00 30.00-90.00	tem furn was m the ra CK 1 CATEC Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s	nished or offer- nade or establi te for each. GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable / cable-add'l ch e protection glar protection	ed during t shed. List <u>VICE</u> idential	RATE	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	5.
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	e charged by the your cable system is your cable system is separate charge better and include BLOC RATE 15.00 - 17.00 15.00-17.00 30.00-90.00	tem furn e was m e the ra CK 1 CATEG Installa • Mod • Cor • Pay • Pay • Fire • Bur Other s • Red	nished or offer- nade or establi te for each. GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable / cable-add'l ch protection rglar protection services:	ed during t shed. List <u>VICE</u> idential	RATE	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	5.
Secondary ansmissions:	Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	e charged by the your cable system is your cable system is separate charge better and include BLOC RATE 15.00 - 17.00 15.00-17.00 30.00-90.00	tem furn e was m e the ra CK 1 CATEG Installa • Moi • Cor • Pay • Pay • Fire • Bur Other s • Rec • Dis	nished or offer- nade or establi ite for each. BORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l ch protection glar protection services: connect	ed during t shed. List <u>VICE</u> idential	RATE	care of the transferred that transferred that transferred the transferred term of term	form of a BLOCK 2 DRY OF SERVICE	5.

	2021/2			EVETEM ID+
Name	LEGAL NAME OF OWNER O CABLE ONE, INC.	F CABLE SYSTEM:		SYSTEM ID# 1482
	PRIMARY TRANSMITTERS:	ΤΕΙ ΕΥ/ΙSΙΩΝ		1.102
G Primary ansmitters: Television	In General: In space G, id carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station here, station was carried <i>only</i> or • List the station here, and basis. For further informati Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by entt (for independent multicast) For the meaning of these t Column 4: Give the locatio FCC. For Mexican or Cana	time basis under rams [sections ations carried on a ubstitute program Log)—if the so on some other tions. PN, etc. Identify each ort multistream the air in its community a noncommercial bendent), "I-M" ional multicast).		
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KFJX-1	13		PITTSBURG, KS
	KFTX-2	13		PITTSBURG, KS
ws as Necessary	KOAM	7	N	PITTSBURG, KS
s as necessary	KODE	23	N	JOPLIN, MO
	KSNF-1	17	N	JOPLIN, MO
	KTWU	11	E	TOPEKA, KS
	KOAM-STIMUL	7	N	PITTSBURG. KS
	KTWU-SIMUL	11	E	TOPEKA, KS
	KODE-SIMUL	23	N	JOPLIN, MO
			-	
	KFJX-SIMUL	13	I	PITTSBURG, KS
		47		
	KSNF-SIMUL	17	N	JOPLIN, MO
	KSNF-SIMUL	17	N	
	KSNF-SIMUL	17	N	
	KSNF-SIMUL	17	N	
	KSNF-SIMUL	17	N	
	KSNF-SIMUL	17	N	

CABLE ONE	E, INC.							14
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of or detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: li ignal, indicate Column 4: C	) it is carried by monitoring, to ormation abou rm. dentify the call State whether t f the radio stat this by placing Sive the station	y the sys be recein at the Co sign of e the static ion's sign g a chech n's locatio	I-Band FM Carriage: Under ( stem whenever it is received a wed at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see pa sed by the cable s ne station is licens	adend, and (2 enna, during co ge (v) of the g system as a se sed by the FC	!) it can ertain st eneral in eparate :	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
CALL SIGN		3/0	LOCATION OF STATION	CALL SIGN		3/0	LOCATION OF STATION	

Name         LEGAL NAME OF OWNER OF CABLE SYSTEM:           CABLE ONE, INC.         SUBSTITUTE CARRIAGE:           SUBSTITUTE CARRIAGE:         SPECIAL STATEMENT AND PROGRAM LOG	
	SYSTEM ID#
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG	1482
<b>In General:</b> In space I, identify <i>every nonnetwork television program,</i> broadcast by a <i>distant</i> station, that your cab <i>substitute basis</i> during the accounting period, under specific present and former FCC rules, regulations, or author explanation of the programming that must be included in this log, see page (v) of the general instructions in the page of the programming that must be included in this log.	orizations. For a further
Carriage: 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE	
Special • During the accounting period did your cable system carry on a substitute basis, any nonnetwork television	on program
Statement and	
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the	he program
log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS	
In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their me	neaning is
clear. If you need more space, please add additional rows to the tables.	-
Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the ac period, was broadcast by a distant station and that your cable system substituted for the programming of and under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further im Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love I	nother station nformation.
"NBA Basketball: 76ers vs. Bulls." <b>Column 2:</b> If the program was broadcast live, enter "Yes." Otherwise enter "No." <b>Column 3</b> : Give the call sign of the station broadcasting the substitute program.	
Column 4: Give the broadcast station's location (the community to which the station is licensed by the FC the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with	
first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times a	
to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. shou stated as "6:00–6:30 p.m."	uld be
<b>Column 7:</b> Enter the letter "R" if the listed program was substituted for programming that your system was	as required
to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the list	sted program
was substituted for programming that your system was normitted to delate under FOO rules and the substituted	
was substituted for programming that your system was permitted to delete under FCC rules and regulations	5 10
effect on October 19, 1976.	5 111
effect on October 19, 1976. WHEN SUBSTITUTE PROGRAM CARRIAGE OCCURRE	E ED 7. REASON FOR
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubble         WHEN SUBSTITUTE           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION
effect on October 19, 1976.           Bubstitute         When Substitute           SUBSTITUTE PROGRAM         CARRIAGE OCCURRE           1. TITLE OF PROGRAM         2. LIVE?         3. STATION'S         5. MONTH         6. TIMES	E ED 7. REASON FOR DELETION

Accounting Period:	2021/2		FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.		S	YSTEM ID# 1482
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the ar all amounts (gross receipts) paid to your cable system by subscribers for the system's (as identified in space E) during the accounting period. For a further explanation of how page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	secondary trans w to compute this	mission servic s amount, see	5,091.83
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less See page (vi) of the general instructions located in the paper SA1-2 form for more informati	than \$527,600	\$263,800	
	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 accounting period is \$52.00 Line 1. Royalty fee for accounting period			1
	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	d 2	<u></u>	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but n	nore than \$137,	100)	
	1. Base amount under statutory formula			
	2. Enter amount of gross receipts from space K	185,091.83		
	3. Subtract line 2 from line 1	78,708.17		
	4. Enter the amount of gross receipts from space K	. \$ 1	85,091.83	
	5. Enter the amount from line 3	. \$	78,708.17	
	6. Subtract line 5 from line 4	\$1	06,383.66	
	7. Multiply line 6 by .005 (enter figure here)		\$	531.92
	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.		\$	531.92
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (bu	t less than \$527	7,600)	
	1. Enter the amount of gross receipts from space K			
	2. Base amount under statutory formula	263,800.00		
	3. Subtract line 2 from line 1			
	4. Multiply line 3 by .01			
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	. \$	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8		0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and	6		
	FILING FEE AND TOTAL REMITTANCE DUE			
Filing Fee and		•		
Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)     2. Filing Fee (See the instructions for more information on filing fee calculations)	-	<u>531.92</u> 20.00	
		· <u> </u>		
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3		\$	551.92
	Important: Your remittance must be in the form of an electronic payment pay See page i of the general instructions in the paper SA1-2 form fo	-		ghts!

Accounting Period:	2021/2	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 1482
M Channels	CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period.         1. Enter the total number of channels on which the cable system carried television broadcast stations	11 233
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name JENAE HECK Telephone	602-364-6092
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number) PHOENIX, AZ 85012-2626 (City, town, state, zip)	
	Email JENAE.HECK@CABLEONE.BIZ Fax (optional) 602-364-601	3
O Certification	<ul> <li>CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations</li> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space I</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cables in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow in line 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]</li> <li>X /s/ Raymond Storck</li> </ul>	B; or system as identified ner of the cable system
	Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)         Typed or printed name:       RAYMOND STORCK         Title:       VICE PRESIDENT         (Title of official position held in corporation or partnership)	
	Date: February 28, 2022	

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 telephon 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 i 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 th 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

scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."       Concern Receipts         For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.       During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?       Image: Concern Receipts         Image: Mailing Address       Mame       Mailing Address         Image: Mailing Address       Name       Mailing Address         Image: Mailing Address       Name       Mailing Address         Image: Mailing Address       Name       Mailing Address         Image: Mailing Address       Mailing Address       Mailing Address         Image: Mailing Address       Mailing Address <th>SYSTEM ID# 1482 P Statement ning Gross Exclusion</th>	SYSTEM ID# 1482 P Statement ning Gross Exclusion
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS         The Satellite Home Viewer Act of 1986 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:         "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."       Special Concern Receipts         For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.       During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below.       \$         No	P Statement ning Gross
The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: Special Concern and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119.*   For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.   During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?   No   YES. Enter the total here and list the satellite carrier(s) below.   Name   Mailing Address   You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.   Line 1 Enter the amount of late payment or underpayment.   Line 2 Multiply line 1 by the interest rate* and enter the sum here	Statement
located in the paper SA1-2 form.         During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?         Image: I	Q
made by satellite carriers to satellite dish owners?     X     NO     YES. Enter the total here and list the satellite carrier(s) below	Q
YES. Enter the total here and list the satellite carrier(s) below	Q
Name       Name         Mailing Address       Mailing Address         INTEREST ASSESSMENT       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.         Line 1       Enter the amount of late payment or underpayment	Q
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.         Line 1 Enter the amount of late payment or underpayment	Q
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.         Line 1       Enter the amount of late payment or underpayment	Q
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.         Line 1       Enter the amount of late payment or underpayment	Q
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.         Line 1       Enter the amount of late payment or underpayment	Q
	Assessment
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	
(interest charge) * 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@loc.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	
ID number First community served	

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.