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

General instructions are located in the first tab of this workbook 08/29/2022 Image: Contract the Office Lice ALLOCATION NUMBER A ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period)) Image: Contract the C	nal information, U.S. Copyright nsing Division at:
Cable Systems (Short Form) General instructions are located in the first tab of this workbook 08/29/2022 \$ For addition ontext the ALLOCATION NUMBER A ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period)) 2022/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31 B Barcode Data Filing Period (optional - see instructions) Accounting Period Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. 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 check here if this is the system's first filling. If not, enter the system's 1D number assigned by the Licensing Division. 271 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Mediacom Wisconsin LLC	nal information, U.S. Copyright nsing Division at:
In the first tab of this workbook ALLOCATION NUMBER Tel: (202) 7 A ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period)) 2022/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31 B Barcode Data Filing Period (optional - see instructions) Accounting Barcode Data Filing Period (optional - see instructions) B Cive the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. 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. 271 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Mediacom Wisconsin LLC	
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Mediacom Wisconsin LLC	.21
Mediacom Wisconsin LLC	
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 (City, town, state, zip)	
C INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unle names 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:	
Mediacom Wisconsin LLC	
MAILING ADDRESS OF CABLE SYSTEM:	
2 (Number street rural route anatment or suite number)	
(Number, street, rural route, apartment, or suite number) MEDIACOM PARK, NY 10918	
(City, town, state, zip code)	
Drivany Act Nation: Socian 111 of title 17 of the United States Code authorizes the Convright Office to collect the personally identifying information /PII) requested on this	

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.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAC
Name		
	Mediacom Wisconsin LLC	27'
	Instructions: List each separate community served by the cable system. A "communit	
D	"a separate and distinct community or municipal entity (including unincorporated cor	
	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis	t will serve as a form of system identification hereafter kn
	as the "first community." Please use it as the first community on all future filings.	
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	ome parks should be reported in parentheses below the
Area	identified city.	
Served		
	CITY OR TOWN	STATE
First	Boscobel City	WI
Community	Essman & Able	WI
	Clayton	IA
	Elkader	WI
Add Rows as Necessary		
	Lansing	WI
	Marquette	WI
	McGregor	A
	Waukon	WI
	Garnavillo	IA
	Grant City	WI
	Guttenberg	WI
	Harper's Ferry	WI
	Waukon Junction	wi

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM							2E. PAGE
Name	Mediacom Wisconsin L								2712
	SECONDARY TRANSMISSION				ATE9				
E	In General: The information in s					ry transmission	service of t	he cable	
	system, that is, the retransmission					•			
Secondary	about other services (including p						those exist	ing on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						ble system	broken	
scribers and	down by categories of secondary	•							
Rates	each category by counting the n							charged	
	separately for the particular serv Rate: Give the standard rate c					•	,	to and the	
	unit in which it is generally billed								
	category, but do not include disc								
	Block 1: In the left-hand block			-					
	systems most commonly provide								
	that applies to your system. Not categories, that person or entity			-		-			
	subscriber who pays extra for ca						•		
	first set" and would be counted o	0			· · ·				
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, t with the number of subscribers a								
	sufficient.	,							
	BLC	DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEI		NO. OF SUBSCRIBERS	RAT
	Residential:	SUBSCRIB	EKS	NATE	CAT	EGORT OF SEI	VICE	SUBSCRIBERS	NA II
	Service to first set		1,348	29.99-61.54					
	Service to additional set(s)		.,	_0.00 0.004					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		1	29.99-61.54					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC		NSMI						
_	In General: Space F calls for rat					all your cable sy	stem's serv	rices that were	
F	not covered in space E, that is, t	hose services	that are	e not offered in	combinati	on with any sec	ondary tran	smission	
0	service for a single fee. There ar		,		0		0()		
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		acaanj	Silled. It dify it				ogram baolo,	
ransmissions:	Block 1: Give the standard rat								
Rates	Block 2: List any services that listed in block 1 and for which a	• •			-	-			
	brief (two- or three-word) descrip		,				vices in the		
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RATE
	Continuing Services:		Install	ation: Non-res	idential				
	• Pay cable	PP	• Mo	tel, hotel			Family	Cable	####
	• Pay cable—add'l channel	PP	۰Co	mmercial					
	Fire protection		•Pa	y cable					
	•Burglar protection		•Pa	y cable-add'l cł	nannel				
	Installation: Residential		• Fire	e protection					
	• First set	109.99	• Bu	rglar protection					
	 Additional set(s) 	15.00-49.00		services:					
	 FM radio (if separate rate) 			connect		49.00			
	Converter	10.50		sconnect					
	1		• Ou	tlet relocation		15.00-49.00			
			-	ive to new addr		13.00-43.00			

Namo	LEGAL NAME OF OWNER OF CAB	LE SYSTEM:		SYSTEM
Name	Mediacom Wisconsin LLC	;		27
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary	carried by your cable system duri FCC rules and regulations in effe 76.59(d)(2) and (4), 76.61(e)(2) a	ing the accounting period, <i>except</i> (1) ect on June 24, 1981, permitting the ca and (4), or 76.63 (referring to 76.61(e)	slator stations and low power television stations carried only on a part-time ba arriage of certain network programs [s (2) and (4))]; and (2) certain stations of	asis under ections
ransmitters: Television	substitute program basis, as expl Substitute Basis Stations: With basis under specific FCC rules, re	n respect to any distant stations carrie	d by your cable system on a substitute	e program
	• Do not list the station here in sp station was carried only on a sub	pace G—but do list it in space I (the S ostitute basis.	pecial Statement and Program Log)–	
	basis. For further information con Column 1: List each station's cal multicast stream associated with	ncerning substitute basis stations, see Il sign. <i>Do not</i> report origination progr a station according to its over-the-air	th on a substitute basis and also on so page (v) of the general instructions. ram services such as HBO, ESPN, etc designation. For example, report mul	c. Identify each
	of license. For example, WRC is	nber the FCC assigned to the televisions the televisions channel 4 in Washington, D.C.	on station for broadcasting over the ai	-
	educational station, by entering th (for independent multicast), "E" (f	he letter "N" (for network), "N-M" (for r	network multicast), "I" (for independen -M" (for noncommercial educational m	t), "I-M"
	Column 4: Give the location of e	each station. For U.S. stations, list the	community to which the station is lice ommunity with which the station is ide	5
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KCRG/KCRG(HD) ABC	9	Ν	Cedar Rapids, IA
	KCRG-DT2/KCRG-DT2 MyNet HD	9.2	I-M	Cedar Rapids, IA
Rows as Necessary	KCRG/KCRG-DT3 (HD) CW	9.3	I-M	Cedar Rapids, IA
	KFXA-DT1 DABL	27.1	I-M	Cedar Rapids, IA
	KFXA-DT2 Charge!	27.2	I-M	Cedar Rapids, IA
	KFXA-DT3 TBD	27.3	I-M	Cedar Rapids, IA
			I	
	KFXA-DT4 Stadium	27.4	I-M	Cedar Rapids, IA
	KFXA-DT4 Stadium KFXA-DT5 Comet	27.4 27.5	I-M I-M	
				Cedar Rapids, IA
	KFXA-DT5 Comet	27.5	I-M	Cedar Rapids, IA Cedar Rapids, IA
	KFXA-DT5 Comet KFXB CTN	27.5 43	I-M	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS	27.5 43 51	I-M I N	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX	27.5 43 51 51.2	I-M I I-M	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV	27.5 43 51 51.2 51.3	I-M I N I-M I-M	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS	27.5 43 51 51.2 51.3 12	I-M I N I-M I-M E	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT2 PBS KIDS (HD)	27.5 43 51 51.2 51.3 12 12.2	I-M I N I-M E E E-M	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT2 PBS KIDS (HD) KIIN-DT3 PBS World KIIN-DT4 PBS Create	27.5 43 51 51.2 51.3 12 12.2 12.3	I-M I N I-M E E E-M E-M	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT2 PBS KIDS (HD) KIIN-DT3 PBS World KIIN-DT4 PBS Create KPXR/KPXR (HD) ION	27.5 43 51 51.2 51.3 12 12.2 12.3 12.4 47	I-M I N I-M E E E-M E-M E-M I	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT2 PBS KIDS (HD) KIIN-DT3 PBS World KIIN-DT4 PBS Create KPXR/KPXR (HD) ION KPXR-DT2 Grit	27.5 43 51 51.2 51.3 12 12.2 12.3 12.4 47 47.2	I-M I N I-M I-M E-M E-M E-M I I I I-M	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Cedar Rapids, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT2 PBS KIDS (HD) KIIN-DT3 PBS World KIIN-DT4 PBS Create KPXR/KPXR (HD) ION KPXR-DT2 Grit KPXR-DT3 Bounce	27.5 43 51 51.2 51.3 12 12.2 12.3 12.4 47 47.2 47.3	I-M I N I-M I-M E E E-M E-M E-M I I I I I I I I I I I I I I I I I	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Cedar Rapids, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT3 PBS KIDS (HD) KIIN-DT3 PBS World KIIN-DT4 PBS Create KPXR/KPXR (HD) ION KPXR-DT2 Grit KPXR-DT3 Bounce KPXR-DT4 Laff	27.5 43 51 51.2 51.3 12 12.2 12.3 12.4 47 47.2 47.3 47.4	I-M I N I-M I-M E-M E-M E-M I I I I I I M	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA CEDAR RAPIDS, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT2 PBS KIDS (HD) KIIN-DT4 PBS Create KPXR/KPXR (HD) ION KPXR-DT2 Grit KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy	27.5 43 51 51.2 51.3 12 12.2 12.3 12.4 47 47.2 47.3 47.4 47.5	I-M I N I-M I-M E E E-M E-M I I I I I I I I I I I I I I I I I I I	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT3 PBS KIDS (HD) KIIN-DT3 PBS World KIIN-DT3 PBS World KIIN-DT4 PBS Create KPXR/KPXR (HD) ION KPXR-DT3 Bounce KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy KPXR-DT7 Newsy	27.5 43 51 51.2 51.3 12 12.2 12.3 12.4 47 47.2 47.3 47.4 47.5 47.7	I-M I N I-M I-M E-M E-M E-M I I I I I I I I I I I I I I I I I I I	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Iowa City, IA Cedar Rapids, IA
	KFXA-DT5 Comet KFXB CTN KGAN/KGAN(HD) CBS KGAN-DT2/KGAN DT2 HD FOX KGAN-DT3 getTV KIIN/KIIN(HD) PBS KIIN-DT2 PBS KIDS (HD) KIIN-DT4 PBS Create KPXR/KPXR (HD) ION KPXR-DT2 Grit KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy	27.5 43 51 51.2 51.3 12 12.2 12.3 12.4 47 47.2 47.3 47.4 47.5	I-M I N I-M I-M E E E-M E-M I I I I I I I I I I I I I I I I I I I	Cedar Rapids, IA Cedar Rapids, IA DUBUQUE, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA Cedar Rapids, IA Cedar Rapids, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA

Name	LEGAL NAME OF OWNER OF CABI			SYSTEM
	Mediacom Wisconsin LLC			27
G Primary ransmitters: Television	PRIMARY TRANSMITTERS: In General: In space G, identify e carried by your cable system durin FCC rules and regulations in effect 76.59(d)(2) and (4), 76.61(e)(2) a substitute program basis, as expla Substitute Basis Stations: With basis under specific FCC rules, re • Do <i>not</i> list the station here in sp station was carried <i>only</i> on a sub • List the station here, and also in basis. For further information con- Column 1: List each station's call multicast stream associated with a "WETA-2" as the same on the for Column 2: Give the channel num of license. For example, WRC is Column 3: Indicate in each case educational station, by entering th (for independent multicast), "E" (fe For the meaning of these terms, s	TELEVISION every television station (including tran ing the accounting period, <i>except</i> (1) ect on June 24, 1981, permitting the ca and (4), or 76.63 (referring to 76.61(e) lained in the next paragraph. In respect to any distant stations carrier egulations, or authorizations: pace G—but do list it in space I (the S postitute basis. In space I, if the station was carried bo incerning substitute basis stations, see II sign. <i>Do not</i> report origination progr a station according to its over-the-air rm. Inber the FCC assigned to the television is channel 4 in Washington, D.C. whether the station is a network stati he letter "N" (for network), "N-M" (for r for noncommercial educational), or "E see page (iv) of the general instruction	ram services such as HBO, ESPN, etc designation. For example, report mult on station for broadcasting over the air ion, an independent station, or a nonco network multicast), "I" (for independent E-M" (for noncommercial educational m	asis under ections carried on a e program -if the come other c. Identify each tistream r in its community commercial t), "I-M" nulticast).
	FCC. For Mexican or Canadian st		community with which the station is ider	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KWKB-DT4 Laff	25.4	I-M	Iowa City, IA
	KWKB-DT5 theGrio	25.5	I-M	Iowa City, IA
	KWKB-DT6 Quest	25.6	I-M	Iowa City, IA
	KWWL/KWWL(HD) NBC	7	N	Waterloo, IA
	KWWL-DT2 H&I	7.2	I-M	Waterloo, IA
	KWWL-DT3 MeTV	7.3	I-M	Waterloo, IA
	KWWL-DT4 Court TV	7.4	I-M	Waterloo, IA
	KWWL-DT5 True Crime Network	7.5	I-M	Waterloo, IA
	KYIN/KYIN(HD) PBS	18	E	Mason City, IA
	KYIN-DT2 KIDS (HD)	18.2	E-M	Mason City, IA
	KYIN-DT3 World	18.3	E-M	Mason City, IA
	KYIN-DT4 Create	18.4	E-M	Mason City, IA
	WHA (PBS)	20	E	MADISON, WI
	WHA-DT2 (PBS) TWC	20.2	E-M	MADISON, WI
	WHA-DT3 CREATE	20.3	E-M	MADISON, WI
	WHA-DT4 PBS KIDS	20.4	E-M	MADISON, WI
	WHLA/WHLA(HD) (PBS)	30	E	La Crosse, WI
	WIFS ION	57	1	Janesville, WI
	WISC/WISC(HD) CBS	50	N	Madison, WI
	WKBT (CBS)	8	N	La Crosse, WI
	WKOW/WKOW(HD) ABC	25	N	Madison, WI
	WKOW-DT2 This TV	25.2	I-M	Madison, WI
	WKOW-DT3 Decades HD	25.3	I-M	Madison, WI
	WROW-DIS Decades IID		1	

	LEGAL NAME OF OWNER OF CAB	E SYSTEM.		SYSTEM
Name				271
	Mediacom Wisconsin LLC	TELEVISION		
		every television station (including transl	later stations and low nower talevis	ion stations)
G		ing the accounting period, <i>except</i> (1) st	•	,
	5	ect on June 24, 1981, permitting the car		
Primary ransmitters:	76.59(d)(2) and (4), 76.61(e)(2) a substitute program basis, as expl	and (4), or 76.63 (referring to 76.61(e)(2 lained in the next paragraph.	2) and (4))]; and (2) certain stations	carried on a
Television	Substitute Basis Stations: With	n respect to any distant stations carried	by your cable system on a substitu	ite program
	 basis under specific FCC rules, re Do not list the station here in specific for there in specific for the	egulations, or authorizations: pace G—but do list it in space I (the Spe	ecial Statement and Program Log)-	—if the
	station was carried <i>only</i> on a sub			
	-	n space I, if the station was carried both ncerning substitute basis stations, see p		
		Il sign. <i>Do not</i> report origination progra		
		a station according to its over-the-air d	esignation. For example, report m	ultistream
	"WETA-2" as the same on the for Column 2: Give the channel num	rm. nber the FCC assigned to the television	n station for broadcasting over the a	air in its community
	of license. For example, WRC is	s channel 4 in Washington, D.C.	C C	
		e whether the station is a network statior he letter "N" (for network), "N-M" (for ne		
		for noncommercial educational), or "E-N		
	(for independent multicast), "E" (f For the meaning of these terms,	for noncommercial educational), or "E-N see page (iv) of the general instructions	M" (for noncommercial educational s in the paper SA1-2 form.	multicast).
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e	for noncommercial educational), or "E-N	M" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic	multicast). ensed by the
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co	M" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic	multicast). ensed by the
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co	M" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic	multicast). ensed by the
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co	M" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic	multicast). ensed by the
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co stations, if any, give the name of the cor	VI" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id	multicast). ensed by the lentified.
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s 1. CALL SIGN	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co stations, if any, give the name of the cor 2. B'CAST CHANNEL NUMBER	VI" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id	multicast). ensed by the lentified. 4. LOCATION OF STATION
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s 1. CALL SIGN WMSN (FOX)/WMSN (HD)	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co stations, if any, give the name of the cor 2. B'CAST CHANNEL NUMBER 49	V" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id 3. TYPE OF STATION	multicast). ensed by the lentified. 4. LOCATION OF STATION Madison, WI
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s 1. CALL SIGN WMSN (FOX)/WMSN (HD) WMSN-DT2 COMET	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co stations, if any, give the name of the cor 2. B'CAST CHANNEL NUMBER 49 49.2	V" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id 3. TYPE OF STATION I I-M	Multicast). ensed by the lentified. 4. LOCATION OF STATION Madison, WI Madison, WI
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s 1. CALL SIGN WMSN (FOX)/WMSN (HD) WMSN-DT2 COMET WMSN-DT3 Charge!	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co stations, if any, give the name of the cor 2. B'CAST CHANNEL NUMBER 49 49.2 49.3	V" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id 3. TYPE OF STATION I I-M I-M	Multicast). ensed by the lentified. 4. LOCATION OF STATION Madison, WI Madison, WI
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s 1. CALL SIGN WMSN (FOX)/WMSN (HD) WMSN-DT2 COMET WMSN-DT3 Charge! WMSN-DT4 TBD	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the ca stations, if any, give the name of the cor 2. B'CAST CHANNEL NUMBER 49 49.2 49.3 49.4	V" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id 3. TYPE OF STATION I I-M I-M I-M	Multicast). ensed by the lentified. 4. LOCATION OF STATION Madison, WI Madison, WI Madison, WI
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s 1. CALL SIGN WMSN (FOX)/WMSN (HD) WMSN-DT2 COMET WMSN-DT3 Charge! WMSN-DT4 TBD WMTV/WMTV(HD) (NBC)	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co stations, if any, give the name of the cor 2. B'CAST CHANNEL NUMBER 49 49.2 49.3 49.4 19	V" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id 3. TYPE OF STATION I I-M I-M I-M N	Multicast). ensed by the lentified. 4. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s 1. CALL SIGN WMSN (FOX)/WMSN (HD) WMSN-DT2 COMET WMSN-DT3 Charge! WMSN-DT3 Charge! WMSN-DT4 TBD WMTV/WMTV(HD) (NBC) WMTV-DT2 CW(HD)	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co stations, if any, give the name of the cor 2. B'CAST CHANNEL NUMBER 49 49.2 49.3 49.4 19 19.2	V" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id 3. TYPE OF STATION I I I-M I-M I-M I-M I-M	Multicast). ensed by the lentified. 4. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI
	(for independent multicast), "E" (f For the meaning of these terms, s Column 4: Give the location of e FCC. For Mexican or Canadian s 1. CALL SIGN WMSN (FOX)/WMSN (HD) WMSN-DT2 COMET WMSN-DT3 Charge! WMSN-DT4 TBD WMTV/WMTV(HD) (NBC) WMTV-DT2 CW(HD) WMTV-DT3 Antenna TV	for noncommercial educational), or "E-N see page (iv) of the general instructions each station. For U.S. stations, list the co stations, if any, give the name of the cor 2. B'CAST CHANNEL NUMBER 49 49.2 49.3 49.4 19 19.2 19.3	V" (for noncommercial educational s in the paper SA1-2 form. ommunity to which the station is lic mmunity with which the station is id 3. TYPE OF STATION I I-M I-M I-M I-M I-M I-M	multicast). ensed by the lentified. 4. LOCATION OF STATION Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI

EGAL NAME OF								SYSTEM I 271
	t every radio s	tation ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) in the basis of a for detailed info aper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation abou rm. lentify the call tate whether t the radio stati this by placing tive the station	y the sys be recei t the Co sign of e he statio ion's sign g a check n's locatio	I-Band FM Carriage: Under (tem whenever it is received a ved at the headend, with the pyright Office regulations on each station carried. on is AM or FM. nal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	at the system's h system's FM and this point, see p sed by the cable he station is licer	eadend, and (2 tenna, during c age (v) of the g system as a se nsed by the FC	2) it can ertain st eneral ii eparate a	be expected, ated intervals. hstructions 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	
OALL OIGH		3,0		UALL SIGN		3,0		
						<u> </u>		
						 		
						 		
						 		
						 		
						 		

Accounting Perio	od: 2022/1						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	Mediacom Wisconsin	LLC						27121
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	ENT AND PROGRAM LC)G			
	In General: In space I, ident	tify every no	nnetwork telev	<i>ision program,</i> broadcast by	y a <i>distant</i> stat	tion, that you	r cable sys	tem carried on a
	substitute basis during the a							
Substitute	explanation of the programm	ning that mu	st be included	in this log, see page (v) of t	the general ins	structions in t	he paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMEN	T CONCEP	RNING SUBS	TITUTE CARRIAGE				
Special Statement and	 During the accounting pe 	riod, did you	ur cable syste	m carry, on a substitute ba	asis, any nonr	etwork telev	vision prog	ram
Program Log	broadcast by a distant sta	ation?					YES	× NO
i i ografit Eog	-				<i></i>			
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you r	nust comple	te the proc	gram
	log in block 2.							
	2. LOG OF SUBSTITUT							
	In General: List each subs				s wherever po	ossible, if the	eir meaning	g is
	clear. If you need more spa			i rows to the tables. vision program ("substitute	o program") th	oot during th		ina
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general catego							
	"NBA Basketball: 76ers vs.							
				er "Yes." Otherwise enter				
				casting the substitute prog the community to which th		concod by th	e ECC or	in
	the case of Mexican or Cal		、	5		,		
				stem carried the substitute			, with the n	nonth
	first. Example: for May 7 gi	ive "5/7."						
				ogram was carried by you				ately
	to the nearest five minutes		a program car	ried by a system from 6:0	1:15 p.m. to 6	:28:30 p.m.	should be	
	stated as "6:00–6:30 p.m."		listed program	n was substituted for prog	ramming that	vour eveten	was requ	uired
	to delete under FCC rules							
	was substituted for program							-
		mming that						-
	was substituted for program	mming that			der FCC rules	and regulat	ions in	-
	was substituted for prograr effect on October 19, 1976	mming that y b.	your system w	ras permitted to delete und	der FCC rules	and regulat	ions in UTE	
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w	ras permitted to delete und	der FCC rules WHE	and regulat	ions in UTE RRED	7. REASON FOR DELETION
	was substituted for prograr effect on October 19, 1976	mming that y b.	your system w	ras permitted to delete und	der FCC rules	and regulat	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR
	was substituted for program effect on October 19, 1976 S	UBSTITUT	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI	and regulat N SUBSTIT AGE OCCU 6. TIM	UTE RRED MES	7. REASON FOR

Accounting Period:	2022/1			FORM	6. SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:			5	SYSTEM ID#
Hame	Mediacom Wisconsin LLC				27121
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the all amounts (gross receipts) paid to your cable system by subscribers for the syst (as identified in space E) during the accounting period. For a further explanation of 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	tem's sec of how to	condary transmi compute this a	ssion service mount, see \$52	
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but See page (vi) of the general instructions located in the paper SA1-2 form for more info	t less that prmation.	n \$527,600	63,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,10				
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fe accounting period is \$52.00	ee that yo	ou must pay for t	his six-mon	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines	s 1 and 2			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS	(but mo	re than \$137,1	00)	
	1. Base amount under statutory formula	6	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 an	nd 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,80	00 (but le	ess than \$527,	600)	
	1. Enter the amount of gross receipts from space K	5	522,504.73		
	2. Base amount under statutory formula	;	263,800.00		
	3. Subtract line 2 from line 1	;	258,704.73		
	4. Multiply line 3 by .01	· · · · · · · · · <u>·</u>	\$	2,587.05	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	· · · · · · · · · <u>·</u>	\$	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	·····	\$	3,906.05
	FILING FEE AND TOTAL REMITTANCE DUE				
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	3,906.05	
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			\$	3,926.05
	Important: Your remittance must be in the form of an electronic payme See page i of the general instructions in the paper SA1-2 t		-		ghts!

Accounting Period:	2022/1	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Mediacom Wisconsin LLC	SYSTEM ID# 27121
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	75
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	Address One Mediacom Way	45-443-2762
	(Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip)	
	Email Copyrights@mediacomcc.com Fax (optional)	
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership) or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained 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)]	stem as identified
	Title: Vice President, Financial Reporting (Title of official position held in corporation or partnership)	
	Date: 8/5/2022	

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 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 fing, a determination that would be made by a court of law.

	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
liacom Wisconsin LLC	2712
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
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?	
YES. Enter the total here and list the satellite carrier(s) below.	
Name Name Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
x	
I ine 7 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	
x x days Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 x	·
x days 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	·
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