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

STATEMENT OF ACCOUNT	FOR COPYRIGHT	OFFICE USE ONLY	by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instructions are located in the first tab of this workbook	7/11/22	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY)	YY/(Period))	

		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
• <i>"</i>		Barcode Data Filing Period (optional - see instructions)
Accounting Period		
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		Cunningham Communications, Inc.
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		PO Box 108, 220 W. Main St. (Number, street, rural route, apartment, or suite number)
		Glen Elder, KS 67446-9795 (City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these is already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1	IDENTIFICATION OF CABLE SYSTEM:
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)

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

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name	Cunningham Communications, Inc.	330
D	Instructions: List each separate community served by the cable system. A "community "a separate and distinct community or municipal entity (including unincorporated com discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list 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 hor	munities within unincorporated areas and including single will serve as a form of system identification hereafter kno
Area Served	identified city.	
First	CITY OR TOWN Belleville	STATE KS
Community	Denevine	N
Add Rows as Necessary		

	1							FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					SYS	TEM ID
	Cunningham Communi	cations, Inc							3301
-	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCR	BERS AND RATE	ES				
E	In General: The information in s	•		-					
Secondary.	system, that is, the retransmission								
Secondary Transmission	about other services (including p last day of the accounting period	• • •			-		lilose exis		
Service: Sub-	Number of Subscribers: Both	•				,	ble system	ı, broken	
scribers and	down by categories of secondar			0 / 1					
Rates	each category by counting the n separately for the particular serv			0,0		•		charged	
	Rate: Give the standard rate of					•	,	be 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							0,	
	categories, that person or entity			-		-			
	subscriber who pays extra for ca	able service to	addition	al sets would be ir	ncluded	in the count u	nder "Servi	ce to the	
	first set" and would be counted o					aamilaa that an	. different i	incurs the seco	
	Block 2: If your cable system printed in block 1 (for example, t	Ű		•					
	with the number of subscribers a								
	sufficient.		-						
	BLC	OCK 1	:				BLOCK	C2 NO. OF	1
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	GORY OF SE	RVICE	SUBSCRIBERS	RATE
	Residential:								
	 Service to first set 		357	54.50					
	 Service to additional set(s) 								
	 FM radio (if separate rate) 								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC		NSMIS	SIONS: RATES					
F	In General: Space F calls for ra	•	,	•		• •			
•	not covered in space E, that is, t service for a single fee. There ar					,	,		
Services	furnished at cost or (2) services	•		•			0 (,	
Other Than	amount of the charge and the ur	nit in which it is	usually	billed. If any rates	s are ch	arged on a var	iable per-p	rogram basis,	
Secondary	enter only the letters "PP" in the		ho och	a avatam far agab	of the c	anliachla con <i>i</i>	and listed		
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that							were not	
	listed in block 1 and for which a	• •			-	-	-		
	brief (two- or three-word) descrip	ption and inclu	de the ra	ate for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEC	GORY OF SERVIC	Έ	RATE	CATEG	DRY OF SERVICE	RATE
	Continuing Services:		Installa	ation: Non-reside	ntial				
	• Pay cable	10.25-51.75	• Mo	tel, hotel				led Basic	####
	 Pay cable—add'l channel 			nmercial			Digital		14.9
	Fire protection		-	/ cable			HD Plu		4.9
	•Burglar protection		-	/ cable-add'l chanr	nel		Out of	Market Tier	11.4
	Installation: Residential			e protection					
	• First set			glar protection					
			Other	services:					[
	Additional set(s)		-	+					I
	• FM radio (if separate rate)			connect		25.00			
			• Dis	connect					
	• FM radio (if separate rate)		• Dis • Out			25.00 25.00 25.00			

		CADIE OVOTEM.		SYSTEM
Name	LEGAL NAME OF OWNER O			330 330
	PRIMARY TRANSMITTERS:			
G Primary ansmitters:	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a	lentify every television station (including t em during the accounting period, <i>except</i> in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph.	(1) stations carried only on a part e carriage of certain network prog I(e)(2) and (4))]; and (2) certain st	t-time basis under grams [sections tations carried on a
elevision	basis under specific FCC r • Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further informati	s: With respect to any distant stations calules, regulations, or authorizations: re in space G—but do list it in space I (then a substitute basis. also in space I, if the station was carried on concerning substitute basis stations, son's call sign. Do not report origination pro- tion station pro- tion station pro- tion station pro- tion station pro- tion station pro- tion station pro- station pro- station station pro- station station pro- station station pro- station station pro- station station station pro- station station station pro- station station station station pro- station station	e Special Statement and Progran both on a substitute basis and al see page (v) of the general instruc	n Log)—if the Iso on some other ctions.
	multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, V	ed with a station according to its over-the- the form. hel number the FCC assigned to the telev VRC is channel 4 in Washington, D.C.	air designation. For example, re	port multistream er the air in its community
	educational station, by ent (for independent multicast) For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	h case whether the station is a network s ering the letter "N" (for network), "N-M" (f), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list i adian stations, if any, give the name of th	or network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the statio e community with which the statio	ependent), "I-M" ational multicast). on is licensed by the on is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KSNB	4	Ν	Superior, NE
	KSNC	2	Ν	Great Bend, KS
	KSNT	22	N	Topeka, KS
ows as Necessary				
ows as Necessary	KFXL	4	Ν	Superior, NE
ows as Necessary		4 33	N N	
ows as Necessary	KFXL			Superior, NE
ows as Necessary	KFXL KSCW	33	N	Superior, NE Wichita, KS
ows as Necessary	KFXL KSCW KAKE	33 10	N N	Superior, NE Wichita, KS Wichita, KS
ows as Necessary	KFXL KSCW KAKE KBSH	33 10 7	N N N	Superior, NE Wichita, KS Wichita, KS Hays, KS
ows as Necessary	KFXL KSCW KAKE KBSH WIBW	33 10 7 13	N N N N	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS
ows as Necessary	KFXL KSCW KAKE KBSH WIBW KOOD	33 10 7 13 9	N N N E	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS Bunker Hill, KS
ows as Necessary	KFXL KSCW KAKE KBSH WIBW KOOD KGIN	33 10 7 13 9 10	N N N E N	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS Bunker Hill, KS Lincoln, NE
ows as Necessary	KFXL KSCW KAKE KBSH WIBW KOOD KGIN KHGI	33 10 7 13 9 10 13	N N N N E N N	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS Bunker Hill, KS Lincoln, NE Kearney, NE
ows as Necessary	KFXL KSCW KAKE KBSH WIBW KOOD KGIN KHGI KAAS	33 10 7 13 9 10 10 13 18	N N N N E N N N N	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS Bunker Hill, KS Lincoln, NE Kearney, NE Salina, KS
ows as Necessary	KFXL KSCW KAKE KBSH WIBW KOOD KGIN KHGI KAAS KSHB	33 10 7 13 9 10 10 13 18 41	N N N N E N N N N N	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS Bunker Hill, KS Lincoln, NE Kearney, NE Salina, KS Kansas City, MO
ows as Necessary	KFXL KSCW KAKE KBSH WIBW KOOD KGIN KHGI KAAS KSHB KMTW	33 10 7 13 9 10 13 10 13 18 41 35	N N N E N N N N N N N	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS Bunker Hill, KS Lincoln, NE Kearney, NE Salina, KS Kansas City, MO Wichita, KS
ows as Necessary	KFXL KSCW KAKE KBSH WIBW KOOD KGIN KHGI KAAS KSHB KMTW KTMJ	33 10 7 13 9 10 13 18 41 35 43	N N N N E N N N N N N N N	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS Bunker Hill, KS Lincoln, NE Kearney, NE Salina, KS Kansas City, MO Wichita, KS Topeka, KS
ows as Necessary	KFXL KSCW KAKE KBSH WIBW KOOD KGIN KHGI KAAS KSHB KMTW KTMJ KTKA	33 10 7 13 9 10 13 10 13 18 41 35 43 49	N N N N N E N N N N N N N N N N N N N N	Superior, NE Wichita, KS Wichita, KS Hays, KS Topeka, KS Bunker Hill, KS Lincoln, NE Kearney, NE Salina, KS Kansas City, MO Wichita, KS Topeka, KS Topeka, KS

eceivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Transmit	LEGAL NAME OF								SYSTEM I 330
 Transmit Transmit<	n General: List	every radio s	tation ca						н
CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION Image: Sign Sign Sign Sign Sign Sign Sign Sign	eceivable if (1) in the basis of r for detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate i Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Co sign of e he static ion's sign g a check n's locatio	tem whenever it is received a ved at the headend, with the s pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process < mark in the "S/D" column. on (the community to which th	t the system's he system's FM ante his point, see pay ed by the cable s e station is licens	adend, and (2 nna, during c ge (v) of the g ystem as a se sed by the FC	ertain st ertain st eneral ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
Image: Another interpretation of the interpretation of th									
Image: section of the section of th									
Image: Section of the section of th									
Image: section of the section of th									
Image: section of the section of th									
Ander An									
Image: section of the section of th									
Image: section of the section of th									
Image: second									
Image: series of the series									
Anderse </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
Image: series of the series									
Image: Second									
Index									
Image: A star in the star									
Image: Second									
Image: series of the series									
Image: Second									
Image: Second									

Accounting Perio	od: 2022/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	Cunningham Commu	nications,	Inc.					33018
	SUBSTITUTE CARRIAG							
I	In General: In space I, ident substitute basis during the a	accounting p	eriod, under sp	pecific present and former F	CC rules, reg	ulations, or	authorizatio	ons. For a further
Substitute	explanation of the programn				the general ins	structions in	the paper S	SA1-2 form.
Carriage: Special	1. SPECIAL STATEMEN	-						
Statement and	 During the accounting per 	riod, did you	ur cable syster	m carry, on a substitute ba	asis, any nonr	etwork tele	evision prog	gram
Program Log	broadcast by a distant sta	ation?					YES	NO
	Note: If your answer is "No	o", leave the	rest of this pa	age blank. If your answer i	s "Yes," you r	nust compl	ete the pro	gram
	log in block 2.							
	2. LOG OF SUBSTITUT			ata lina. Llas abbraviation	a whorever p	angible if th	ooir moonin	a io
	In General: List each subs clear. If you need more spa				s wherever po			iy is
				vision program ("substitute	e program") tl	nat, during	the accoun	ting
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general catego "NBA Basketball: 76ers vs.		DVIES OF DASK	etball. List specific progra		stample, i	Love Lucy	01
	Column 2: If the program	m was broa		er "Yes." Otherwise enter				
				casting the substitute prog the community to which th				in
	the case of Mexican or Car		`	5		,	ine FCC or,	, in
				stem carried the substitute			s, with the i	month
	first. Example: for May 7 gi							
	Column 6: State the tim to the nearest five minutes			ogram was carried by you				
	stated as "6:00–6:30 p.m."		a program can	ned by a system norm 0.0	1. 15 p.m. to o	.20.30 p.m		
		ter "R" if the	listed prograr	n was substituted for prog	ramming that	your syste	m was <i>requ</i>	uired
	to delete under FCC rules		ons in effect d	luring the accounting perio	od; enter the I			rogram
								•
			your system w	vas permitted to delete uno	der FCC rules	and regula	ations in	-
	was substituted for prograr effect on October 19, 1976		your system w		der FCC rules	and regula	ations in	1
	effect on October 19, 1976	i.	your system w	ras permitted to delete und	WHE	N SUBSTI	TUTE	7. REASON FOR
	effect on October 19, 1976	UBSTITUT		ras permitted to delete und	WHE	N SUBSTI AGE OCC 6. T	TUTE	
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI. 5. MONTH	N SUBSTI AGE OCC 6. T	TUTE URRED IMES	7. REASON FOR

Accounting Period:	2022/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
	Cunningham Communications, Inc.		33018
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ission service amount, see	1,416.00 ss receipts)
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 less than or equal to \$2 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	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 you must pay for accounting period is \$52.00	this six-mon	
	Line 1. Royalty fee for accounting period	\$	52.00
			0.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2		52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	1. Base amount under statutory formula \$ 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	<u> </u>	
	5. Enter the amount from line 3	<u> </u>	
	6. Subtract line 5 from line 4	<u> </u>	
	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 \$263,800 (but less than \$527)	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	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!

Accounting Period:	2022/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Cunningham Communications, Inc.	SYSTEM ID# 33018
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	47
	system carried television broadcast stations	17
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	85
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 Brent Cunningham Telephone	785-545-3215
	Address PO Box 108, 220 W. Main St.	
	(Number, street, rural route, apartment, or suite number) Glen Elder, KS 67446	
	(City, town, state, zip)	
	Email brent@ctctelephony.tv Fax (optional) 785-545-3277	,
	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
O Certification	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	X (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space E	3; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s in line 1 of space B and that the owner is not a corporation or partnership; or	ystem as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as own in line 1 of space B.	ner of the cable system
	 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)] 	
	X /s/ Brent Cunningham	
	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: Brent Cunningham	
	Title: GM/VP (Title of official position held in corporation or partnership)	
	Date: 7-11-22	

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.

ounting Period: 2022/1	FORM SA1-2E. PAG
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
nningham Communications, Inc.	330
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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basis service of providing secondary transmissions of primary broadcast transmitters, the system shall not include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 115	ic Special Statemen 9." Concerning Gross
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.	Receipts Exclusio
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmiss made by satellite carriers to satellite dish owners?	sions
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 underpayr For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 for	
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	m. Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 for Line 1 Enter the amount of late payment or underpayment	m. Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 for	m. Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 for Line 1 Enter the amount of late payment or underpayment	m. Q
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For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 for Line 1 Enter the amount of late payment or underpayment Line 2 Multiply line 1 by the interest rate* and enter the sum here	m. Q Interest Assessme days ge) please
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 for Line 1 Enter the amount of late payment or underpayment	m. Q Interest Assessme days ge) please

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