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 Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY

DATE RECEIVED AMOUNT
8/29/2022
\$
ALLOCATION NUMBER

Return completed workbook by email to:

coplicsoa@loc.gov

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

| Α | ACCO | DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period)) |
|----------------------|------------|--|
| | | |
| | | Period 1 = January 1 - June 30 Period 2 = July 1 - December 31 |
| | | 2022/1 Ferrou 2 – July 1 - December 31 |
| | | |
| | | 20221 Barcode Data Filing Period (optional - see instructions) |
| Accounting Period | | |
| | | Instructions: |
| В | | 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 |
| | | CCI Systems, Inc. (FKA Cable Constructors Inc) |
| | | BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT) |
| | | Astrea |
| | | MAILING ADDRESS OF OWNER OF CABLE SYSTEM |
| | | P.O. BOX 190 |
| | | (Number, street, rural route, apartment, or suite number) |
| | | Iron Mountain, MI 49801 (City, town, state, zip) |
| С | INSTR | RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these |
| C | names | s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. |
| System | 1 | IDENTIFICATION OF CABLE SYSTEM: |
| | | MAILING ADDRESS OF CABLE SYSTEM: |
| | 2 | |
| | 2 | (Number, street, rural route, apartment, or suite number) |
| | | (City, town, state, zip code) |
| | | |
| Privacy Act Notic | e: Sectior | 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this |

Privacy Act Notice: Section 111 of title 1/ of the United States Code aution/zes the Copyright Office to collect the personally identifying information (Pil) 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.

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID# |
|-----------------------|--|---|
| Name | CCI Systems, Inc. (FKA Cable Constructors Inc) | 6297 [,] |
| D | Instructions: List each separate community served by the cable system. A " "a separate and distinct community or municipal entity (including unincorp discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community t as the "first community." Please use it as the first community on all future Note: Entities and properties such as hotels, apartments, condominiums, or | orated communities within unincorporated areas and including single, hat you list will serve as a form of system identification hereafter know filings. |
| Area Served | identified city. | |
| | CITY OR TOWN | STATE |
| First | Washington | WI |
| Community | Shawano | WI |
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| Add Rows as Necessary | | |
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|---------------|---|--|---|---|------------------|-------------------|-----------------------------|--|---------------------|
| Name | LEGAL NAME OF OWNER OF C | | | | | | | 515 | TEM II 6297 |
| | CCI Systems, Inc. (FKA | Cable Con | structo | ors Inc) | | | | | 0231 |
| _ | SECONDARY TRANSMISSION | I SERVICE: SL | JBSCRII | BERS AND R | ATES | | | | |
| E | In General: The information in s | | | - | | • | | | |
| Secondary | system, that is, the retransmission about other services (including particular services) | | | | | | | | |
| Transmission | last day of the accounting period | | | | - | | | | |
| Service: Sub- | Number of Subscribers: Both | h blocks in spa | ce E call | for the numb | er of subso | cribers to the ca | | | |
| scribers and | down by categories of secondar | | | • | | • | | | |
| Rates | each category by counting the n separately for the particular serv | | | 0,0 | | • | | charged | |
| | Rate: Give the standard rate of | | | | | | | ge and the | |
| | unit in which it is generally billed | • • | , | | | rd rate variation | s within a | particular rate | |
| | category, but do not include disc | | | | | and any transmis | | | |
| | Block 1: In the left-hand block systems most commonly provide | | | - | | - | | | |
| | that applies to your system. Not | | | | | | | 0, | |
| | categories, that person or entity | should be cour | nted as a | a subscriber in | each app | licable category | . Example: | a residential | |
| | subscriber who pays extra for ca | | | | | d in the count ur | nder "Servi | ce to the | |
| | first set" and would be counted of Block 2: If your cable system | | | | | service that are | different f | rom those | |
| | printed in block 1 (for example, t | • | | | | | | | |
| | with the number of subscribers a | | | | | | , | | |
| | sufficient. | | | | r | | DI OOI | | |
| | BLC | OCK 1 NO. OF | | | | | BLOCK | NO. OF | |
| | CATEGORY OF SERVICE | SUBSCRIB | ERS | RATE | CATI | EGORY OF SEF | RVICE | SUBSCRIBERS | RAT |
| | Residential: | | | | | | | | |
| | Service to first set | | 15 | 50.00 | | ed Choice | | 42 | 75. |
| | Service to additional set(s) | | | | Premie | r Plus | | 13 | 95.0 |
| | • FM radio (if separate rate) | | | | | | | | |
| | Motel, hotel | | | | | | | | |
| | Commercial | | | | | | | | |
| | Converter | | | | | | | | |
| | Residential | | | | | | | | |
| | Non-residential | | | | | | | | |
| | SERVICES OTHER THAN SEC | ONDARY TRA | | SIONS: RATE | S | | | | |
| F | In General: Space F calls for ra | te (not subscrib | per) infor | mation with re | espect to a | Il your cable sys | stem's serv | rices that were | |
| F | not covered in space E, that is, t | | | | | , | , | | |
| Services | service for a single fee. There ar furnished at cost or (2) services | | | | | | | | |
| Other Than | amount of the charge and the ur | | | | | | | | |
| Secondary | enter only the letters "PP" in the | rate column. | - | | | - | | 0 / | |
| Secondary | Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. | | | | | | | | |
| ransmissions: | | Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a | | | | | | | |
| | Block 2: List any services that | | | | - | - | vices in the | | |
| ransmissions: | Block 2: List any services that | separate charg | je was m | ade or establ | - | - | vices in the | e lonn of a | |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a | separate chargotion and includ | je was m de the ra | ade or establ | - | - | vices in the | | |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip | separate charg otion and includ BLO0 | je was m de the ra CK 1 | nade or establ te for each. | ished. List | these other ser | | BLOCK 2 | RAT |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a | separate chargotion and includ | je was m de the ra CK 1 CATEG | ade or establ | VICE | - | | | RAT |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE | separate charg otion and includ BLO0 | e was m de the ra CK 1 CATEG Installa | nade or establ te for each. ORY OF SER | VICE | these other ser | CATEGO | BLOCK 2 | |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: | separate chargo otion and includ BLO(RATE | de was m de the ra CK 1 CATEG Installa • Mote | ade or establ te for each. ORY OF SER tion: Non-res | VICE | these other ser | CATEGO Showti | BLOCK 2 DRY OF SERVICE | RAT 14.9 12.9 |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable | separate charg otion and inclue BLO(RATE 18.95 | de was m de the ra CK 1 CATEG Installa • Mote • Com | hade or establ te for each. ORY OF SER tion: Non-res el, hotel | VICE | these other ser | CATEGO Showti Stars & | BLOCK 2 DRY OF SERVICE me & TMC | 14.9 |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel | separate charg otion and inclue BLO(RATE 18.95 | de the ra CK 1 CATEG Installa • Mote • Com • Pay | ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial | VICE idential | these other ser | CATEGO Showti Stars & | BLOCK 2 DRY OF SERVICE me & TMC Encore Tier | 14.9 12.9 |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection | separate charg otion and inclue BLO(RATE 18.95 | e was m de the ra CK 1 CATEG Installa • Mote • Com • Pay • Pay | ade or establ te for each. ORY OF SER tion: Non-res el, hotel imercial cable | VICE idential | these other ser | CATEGO Showti Stars & | BLOCK 2 DRY OF SERVICE me & TMC Encore Tier | 14.9 12.9 |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection | separate charg otion and inclue BLO(RATE 18.95 | e was n de the ra CK 1 CATEG Installa • Mote • Con • Pay • Pay • Fire | ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable | VICE idential | these other ser | CATEGO Showti Stars & | BLOCK 2 DRY OF SERVICE me & TMC Encore Tier | 14.9 12.9 |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential | separate charg otion and inclue BLO(RATE 18.95 | e was m de the ra CK 1 CATEG Installa • Moto • Com • Pay • Pay • Fire • Burg | ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l cl protection | VICE idential | these other ser | CATEGO Showti Stars & | BLOCK 2 DRY OF SERVICE me & TMC Encore Tier | 14.9 12.9 |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set | separate charg otion and inclue BLO(RATE 18.95 | e was m de the ra CK 1 CATEG Installa • Moto • Com • Pay • Pay • Fire • Burç Other s | ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l cl protection glar protection | VICE idential | these other ser | CATEGO Showti Stars & | BLOCK 2 DRY OF SERVICE me & TMC Encore Tier | 14.9 12.9 |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) | separate charg otion and inclue BLO(RATE 18.95 | e was m de the ra CK 1 CATEG Installa • Moto • Com • Pay • Pay • Fire • Burç Other s • Rec | ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l cl protection glar protection ervices: | VICE idential | these other ser | CATEGO Showti Stars & | BLOCK 2 DRY OF SERVICE me & TMC Encore Tier | 14.9 12.9 |
| ransmissions: | Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate) | separate charg otion and inclue BLO(RATE 18.95 | e was m de the ra CK 1 CATEG Installa • Moto • Com • Pay • Fire • Burg Other s • Rec • Disc | ade or estable te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l cl protection glar protection ervices: onnect | VICE idential | these other ser | CATEGO Showti Stars & | BLOCK 2 DRY OF SERVICE me & TMC Encore Tier | 14. 12. |

| counting Period: 2 | | | | FORM SA1-2E. PAGE 3 |
|---|---|---|---|--|
| Name | LEGAL NAME OF OWNER OF | | | SYSTEM ID# 62971 |
| | CCI Systems, Inc. (FK PRIMARY TRANSMITTERS: | (A Cable Constructors Inc) | | 023/1 |
| G Primary Transmitters: Television | In General: In space G, ide carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location | entify every television station (including m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations ca- lles, regulations, or authorizations: e in space G—but do list it in space I (th a substitute basis. also in space I, if the station was carrie on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the | <i>t</i> (1) stations carried only on a part-tin he carriage of certain network program 51(e)(2) and (4))]; and (2) certain stati arried by your cable system on a sub- the Special Statement and Program L ed both on a substitute basis and also , see page (v) of the general instruction program services such as HBO, ESPI e-air designation. For example, report evision station for broadcasting over the station, an independent station, or a (for network multicast), "I" (for independent or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is | me basis under ms [sections ions carried on a stitute program .og)—if the on some other ons. N, etc. Identify each rt multistream the air in its community noncommercial endent), "I-M" onal multicast). |
| | 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. LOCATION OF STATION |
| | WBAY | 8 | N | Green Bay, WI |
| | WBAY HD | 642 | Ν | Green Bay, WI |
| ows as Necessary | WFRV | 5 | Ν | Green Bay, WI |
| - | WFRV HD | 640 | N | Green Bay, WI |
| | WCWF | 10 | Ν | Green Bay, WI |
| | WCWF HD | 644 | Ν | Green Bay, WI |
| | WEUX | 11 | Ν | Green Bay, WI |
| | WEUX HD | 646 | N | Green Bay, WI |
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| EGAL NAME OF | | | e Constructors Inc) | | | | | SYSTEM I 629 |
|--|---|---|--|---|--|--|--|----------------------------------|
| | t every radio s | station ca | arried on a separate and discre nerally receivable by your cab | | | | | н |
| eceivable if (1) n the basis of a for detailed info aper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G | it is carried by monitoring, to prmation about rm. dentify the call tate whether to the radio stat this by placing sive the station | y the sys be recein at the Co l sign of o the static ion's sign g a chech n's locati | I-Band FM Carriage: Under C stem whenever it is received a ved at the headend, with the s opyright Office regulations on t 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 his point, see par ed by the cable s e station is licens | adend, and (2 nna, during co ge (v) of the g ystem as a se sed by the FC | !) it can ertain st eneral ii 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 | |
| ONLE OIOIT | | 0,0 | | O/LEE OIGIN | | 0/0 | | |
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| Accounting Perio | od: 2022/1 | | | | | FORM | VI SA1-2E. PAGE 5. | |
|-------------------------|--|---------------|-----------------|---|----------------|-----------------|--------------------|---------------|
| News | LEGAL NAME OF OWNER OF | CABLE SYS | TEM: | | | | | SYSTEM ID# |
| Name | CCI Systems, Inc. (FK | A Cable C | Constructor | s Inc) | | | | 62971 |
| | | | | | - | | | |
| | SUBSTITUTE CARRIAG | | | | | | | |
| I | In General: In space I, ident | | | | | | | |
| 0 | substitute basis during the a explanation of the programm | | | | | | | |
| Substitute Carriage: | | | | | ne general in | | ine paper o | |
| Special | 1. SPECIAL STATEMEN | - | | | | | | |
| Statement and | During the accounting per | | ur cable syster | n carry, on a substitute ba | isis, any noni | network telev | vision prog | ram |
| Program Log | broadcast by a distant sta | tion? | | | | | YES | NO |
| | Note: If your answer is "No | ", leave the | rest of this pa | ige blank. If your answer i | s "Yes," you i | must comple | te the proc | gram |
| | log in block 2. | , | • | 0 , | | | | • |
| | 2. LOG OF SUBSTITUTE | E PROGRA | MS | | | | | |
| | In General: List each subs | | | ate line. Use abbreviation | s wherever p | ossible, if the | eir meaning | g is |
| | clear. If you need more spa | | | | | | | - |
| | | | | vision program ("substitute | | | | |
| | period, was broadcast by a under certain FCC rules, re | | | | | | | |
| | Do not use general categor | | | | | | | |
| | "NBA Basketball: 76ers vs. | | | | | , | , | |
| | | | | er "Yes." Otherwise enter | | | | |
| | | | | asting the substitute prog | | | 500 | |
| | the case of Mexican or Car | | | the community to which the community with which the | | | he FCC or, | In |
| | | | | stem carried the substitute | | | , with the n | nonth |
| | first. Example: for May 7 gi | | , , | | 1 0 | | , | |
| | | | | ogram was carried by you | | | | ately |
| | to the nearest five minutes. stated as "6:00–6:30 p.m." | . Example: a | a program car | ried by a system from 6:01 | 1:15 p.m. to 6 | 5:28:30 p.m. | should be | |
| | | er "R" if the | listed program | n was substituted for prog | ramming that | t vour svster | n was <i>requ</i> | iired |
| | to delete under FCC rules a | | | | | | | |
| | was substituted for program | | your system w | as permitted to delete und | ler FCC rules | s and regulat | tions in | - |
| | effect on October 19, 1976 | | | | | | | |
| | | | | | W/HE | N SUBSTIT | | |
| | S | UBSTITUT | E PROGRAM | 1 | | AGE OCCL | | 7. REASON FOR |
| | 1. TITLE OF PROGRAM | T | 3. STATION'S | | 5. MONTH | 6. TI | | DELETION |
| | | Yes or No | CALL SIGN | 4. STATION'S LOCATION | AND DAY | FROM - | – то | |
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| Accounting Period: | 2022/1 | FORM SA | 1-2E. PAGE 6. |
|------------------------------------|--|-----------------------------|----------------------------|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: CCI Systems, Inc. (FKA Cable Constructors Inc) | S | YSTEM ID# 62971 |
| K Gross Receipts | GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmit (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. | ssion service mount, see | 4,851.00 Hiss receipts) |
| 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 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 t accounting period is \$52.00 | his six-mon | |
| | Line 1. Royalty fee for accounting period | \$ | 52.00 |
| | Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 | . <u> </u> | 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 | | |
| | 1. Base amount under statutory formula | | |
| | 2. Enter amount of gross receipts from space K | | |
| | 3. Subtract line 2 from line 1 | | |
| | 4. Enter the amount of gross receipts from space K | | |
| | 5. Enter the amount from line 3 | | |
| | 6. Subtract line 5 from line 4 | | |
| | 7. Multiply line 6 by .005 (enter figure here) | | |
| | 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 | | |
| | 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 | | hts! |

| Accounting Period: | 2022/1 | | | | | FORM SA1-2E. PAGE 7. |
|------------------------------------|--|--|---|---|--|---|
| Name | LEGAL NAME OF OWNER OF CCI Systems, Inc. (FKA | | ors Inc) | | | SYSTEM ID# 62971 |
| M Channels | to its subscribers, and (2) t 1. Enter the total number o | he cable system's tota of channels on which the broadcast stations of activated channels on carried television br | the cable | t stations | | ns 4 |
| N Individual to Be Contacted | we can contact about this s | statement of account.) | | RMATION IS NEEDED (Identify an ind | | |
| for Further Information | Name Kelly | | | | Teleph | one 906-776-2662 |
| | Iron M | ant St. street, rural route, apartme ountain, MI 498(, state, zip) kelly.tuttle@ccisy | 01 | | Fax (optional) 906-828 | -3789 |
| | | initia di anti anti anti anti anti anti anti ant | | | | |
| O Certification | I, the undersigned, hereby (Owner other the other in line 1 of sp X (Officer or parture in line 1 of sp I have examined the stater | certify that (Check one an corporation or par rother than corporati ace B and that the own ner) I am an officer (if a ace B. ment of account and he cect to the best of my k 886)] | rtnershij ion or pa mer is no a corpora ereby de mowledg | tified and signed in accordance with Cr <i>ly one</i> , of the boxes.) p) I am the owner of the cable system a artnership) I am the duly authorized agr ot a corporation or partnership; or ation) or a partner (if a partnership) of the eclare under penalty of law that all stater ge, information, and belief, and are made /s/ Jacob Mulaikal electronic signature on the line above to con ature using an "/s/ signature" (e.g., /s/ Jo | is identified in line 1 of sp ent of the owner of the ca ne legal entity identified a ments of fact contained h e in good faith. | ace B; or able system as identified s owner of the cable system |
| | | | CFO | Jacob Mulaikal | 8/24/22 | |

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

| 21 Systems, Inc. (FKA Cable Constructors Inc) 629 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 following sectnes. Image: Comparison of privation 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.° Image: Comparison of the paper SA1-2 form. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions Image: Comparison of the satellite carrier(s) below. Image: Comparison of the cable system satellite carrier(s) below. Image: Co | ounting Period: 2022/1 | FORM SA1-2E. PAGE |
|---|---|--|
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellise Home Viewer Act of 1988 amended Tile 17, section 111(g/(1)A), of the Copyright Act by adding the following secondary transmission of primary broadcast transmitters, the system stall not include sub- scribbes and anounds collected from subscribbes and the gross ancunts paid to the cable system for the basic bocated in the paper SA1-2 form. The original filte carriers to satellite diah owners? No No No No No No No No No N | AL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM I |
| The Statellike Home Viewer Act of 1988 amended Tife 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: The determining the total number of subscribers and the gross amounts paid to the cable system for the basic subscribers and amounts collected from subscribers and the gross amounts paid to the cable system for the basic subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 113.* For more information on when to exclude these amounts, see the note on page (wii) of the general instructions located in the paper SA1-2 form. Unring 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. Name Maing Address Name Name Name Name Name Name Name Nam | Systems, Inc. (FKA Cable Constructors Inc) | 6297 |
| Mailing Address 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. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments where complete the sum here complete therest complete | The Satellite Home Viewer Act of 1988 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." 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 | P Special Statement Concerning Gross Receipts Exclusion |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted for the copyright office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Image: Complete the original filing. Image: | | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments are submitted for the copyright office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Image: Complete the original filing. Image: | | |
| Line 1 Enter the amount of late payment of underpayment. x | You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. | Q |
| x | Line 1 Enter the amount of late payment or underpayment | Interest Assessmen |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | V | |
| in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 | | |
| 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 | x days Line 3 Multiply line 2 by the number of days late and enter the sum here | |
| 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. | 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 \$ | |
| 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 | Line 3 Multiply line 2 by the number of days late and enter the sum here - 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 | |
| Address ID number First community served | 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 | |
| Address ID number First community served | x | |
| First community served | x | |
| First community served | x | |
| | Line 3 Multiply line 2 by the number of days late and enter the sum here | |
| | x | |

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