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

SA1-2E Short Form

	·		Return completed workbook
STATEMENT OF ACCOUNT	FOR COPYRIGHT	by email to:	
for Secondary Transmissions by	DATE RECEIVED	AMOUNT	
Cable Systems (Short Form)			coplicsoa@copyright.gov
General instructions are located	08/19/22	\$	For additional information, contact the U.S. Copyright Office Licensing Division at:
in the first tab of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150

A	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20221 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
		TDS Metrocom, LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		525 Junction Road (Number, street, rural route, apartment, or suite number)
		(City, town, state, zp)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these as 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: TDS Telecom, Inc.
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)
L		

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

Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM				
Name	TDS Metrocom, LLC	633				
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.					
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mo identified city.					
Serveu						
	CITY OR TOWN	STATE				
First	Sauk City	WI				
Community	Witwen					
d Rows as Necessary						

	LEGAL NAME OF OWNER OF C						FORM SA1					
Name	TDS Metrocom, LLC		·				010	637				
Е	SECONDARY TRANSMISSION In General: The information in s				transmission	service of	the cable					
-	system, that is, the retransmission	•	-	•								
Secondary	-			• • •								
Transmission		about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be). Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken										
Service: Sub- scribers and	down by categories of secondar	•										
Rates	each category by counting the n											
	separately for the particular serv	vice at the rate	indicated-not the nu	mber of sets	receiving serv	/ice).	0					
	Rate: Give the standard rate of	-	• •				-					
	unit in which it is generally billed category, but do not include disc				a rate variation	is within a	particular rate					
	Block 1: In the left-hand block				ndary transmis	ssion servi	ce that cable					
	systems most commonly provide						0,					
	that applies to your system. Not		-		-							
	categories, that person or entity subscriber who pays extra for ca			••		•						
	first set" and would be counted of											
	Block 2: If your cable system	-	•									
	printed in block 1 (for example, t					,						
	with the number of subscribers a sufficient.	and rates, in th	e right-hand block. A	two- or three	-wora descrip	lion of the	Service IS					
		OCK 1				BLOCK	٢2					
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		CATE	GORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT				
	Residential:	COBCONIE		0,112			COBCOLUBEIRO	1011				
	Service to first set		890 \$25/mo									
	 Service to additional set(s) 											
	• FM radio (if separate rate)											
	Motel, hotel											
	Commercial		54 \$64/mo									
	Converter											
	Residential		890 \$6/Mo.									
	Non-residential											
	SERVICES OTHER THAN SEC			FS			•					
-	In General: Space F calls for ra				your cable sys	stem's ser	vices that were					
F	not covered in space E, that is, t				,	,						
Services	service for a single fee. There as furnished at cost or (2) services		,	0		0.	/					
Other Than												
Secondary	amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.											
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.											
Rates	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											
	brief (two- or three-word) descri											
		BLO		BLOCK 2								
	CATEGORY OF SERVICE	RATE	CATEGORY OF SE	RVICE	RATE	CATEG	ORY OF SERVICE	RAT				
	Continuing Services:		Installation: Non-re									
	• Pay cable	\$8.00-\$15.00	• Motel, hotel									
	 Pay cable—add'l channel 		Commercial		\$0 - \$50.00							
	Fire protection		 Pay cable 									
	 Burglar protection 		 Pay cable-add'l of 	hannel								
	Installation: Residential		 Fire protection 									
	• First set	\$0-\$50.00	 Burglar protection 	n l								
	 Additional set(s) 	\$0-\$50.00	Other services:									
			 Reconnect 		\$0-\$25.00							
	• FM radio (if separate rate)				ΨΟ-ΨΔΟ.ΟΟ							
	 FM radio (if separate rate) Converter 		Disconnect									
					19.98-39.96							

NI	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:		SYSTE					
Name	TDS Metrocom, LLC								
	PRIMARY TRANSMITTERS: TELEVISION								
G Primary ansmitters:	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61	dentify every television station (including t tem during the accounting period, <i>except</i> s in effect on June 24, 1981, permitting the 1(e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph.	(1) stations carried only on a part ne carriage of certain network prog	t-time basis under grams [sections					
Television	Substitute Basis Station basis under specific FCC	ns: With respect to any distant stations can rules, regulations, or authorizations: ere in space G—but do list it in space I (th							
	• List the station here, and basis. For further informat Column 1: List each station	d also in space I, if the station was carried tion concerning substitute basis stations, s ion's call sign. <i>Do not</i> report origination pr ted with a station according to its over-the-	see page (v) of the general instruction of the general instruction of the general instruction of the second s	ctions. SPN, etc. Identify each					
	Column 2: Give the chann of license. For example, V Column 3: Indicate in eac	nnel number the FCC assigned to the telev WRC is channel 4 in Washington, D.C. ch case whether the station is a network s	station, an independent station, or	r a noncommercial					
	(for independent multicast For the meaning of these Column 4: Give the locati	thering the letter "N" (for network), "N-M" (for t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- tion of each station. For U.S. stations, list f hadian stations, if any, give the name of th	or "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the statio	ational multicast). on is licensed by the					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION					
	WKOW	27.1	Ν	Madison, WI					
	WKOW-DT2	27.2	N-M	Madison, WI					
Rows as Necessary	WKOW-DT3	27.3	N-M	Madison, WI					
	WKOW-DT4	27.4	N-M	Madison, WI					
	WKOW-DT5	27.5	N-M	Madison, WI					
	WISC	3.1	Ν	Madison, WI					
	WISC-DT2	3.2	N-M	Madison, WI					
	WISC-DT3	3.3	N-M	Madison, WI					
	WMSN	47.1	Ν	Madison, WI					
	WMSN-DT2	47.2	N-M	Madison, WI					
	WMSN-DT3	47.3	N-M	Madison, WI					
	WMSN-DT4	47.4	N-M	Madison, WI					
				Madiaan 10/1					
	WMTV	15.1	N	Madison, WI					
	WMTV WMTV-DT2	15.1	<u> </u>	Madison, WI					
	WMTV-DT2	15.2	N-M	Madison, WI					
	WMTV-DT2 WMTV-DT3	15.2 15.3	N-M N-M	Madison, WI Madison, WI					
	WMTV-DT2 WMTV-DT3 WMTV-DT4	15.2 15.3 15.4	N-M N-M N-M	Madison, WI Madison, WI Madison, WI Madison, WI					
	WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5	15.2 15.3 15.4 15.5	N-M N-M N-M N-M N-M	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI					
	WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT6 WHA	15.2 15.3 15.4 15.5 15.6 21.1	N-M N-M N-M N-M E	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI					
	WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT6 WHA WHA-DT2	15.2 15.3 15.4 15.5 15.6 21.1 21.2	N-M N-M N-M N-M E E-M	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI					
	WMTV-DT2 WMTV-DT3 WMTV-DT4 WMTV-DT5 WMTV-DT6 WHA	15.2 15.3 15.4 15.5 15.6 21.1	N-M N-M N-M N-M E	Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI Madison, WI					

ounting Period:	. 2022/01			FORM	M SA1-2E. PAG		
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:			SYSTEM I		
-	TDS Metrocom, LLC				637		
	PRIMARY TRANSMITTERS:	TELEVISION					
G			g translator stations and low power tele	,			
G			ot (1) stations carried only on a part-tir				
Primary	•		the carriage of certain network program 61(e)(2) and (4))]; and (2) certain stati	-			
ransmitters:	substitute program basis, as	s explained in the next paragraph.					
Television		: With respect to any distant stations on les, regulations, or authorizations:	carried by your cable system on a sub	stitute program			
			the Special Statement and Program L	og)—if the			
	station was carried only on						
		•	ed both on a substitute basis and also s, see page (v) of the general instruction				
			program services such as HBO, ESPI				
		6	e-air designation. For example, repor	t multistream			
	"WETA-2" as the same on the channel of the channel		evision station for broadcasting over t	he air in its community			
		•	5	,			
	of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial						
	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).						
	(for independent multicast),		or "E-M" (for noncommercial educatio				
	(for independent multicast), For the meaning of these te Column 4: Give the location	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis	or "E-M" (for noncommercial educatio	nal multicast). s licensed by the			
	(for independent multicast), For the meaning of these te Column 4: Give the location	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is	nal multicast). s licensed by the	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.	ATION		
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.			
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.			
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.			
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.			
	(for independent multicast), For the meaning of these te Column 4: Give the location FCC. For Mexican or Canac	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of	or "E-M" (for noncommercial educatio ructions in the paper SA1-2 form. If the community to which the station is the community with which the station i	nal multicast). s licensed by the is identified.			

EGAL NAME O			STOTEWI.					SYSTEM II 637
	t every radio s	station c) arried on a separate and disc enerally receivable by your ca					Н
ecceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: C	it is carried b monitoring, to ormation abou rm. dentify the cal state whether the radio stat this by placing Give the statio	y the sy be rece ut the C Il sign of the stati tion's sig g a cheo n's locat	II-Band FM Carriage: Under stem whenever it is received eived at the headend, with the opyright Office regulations or each station carried. ion is AM or FM. gnal was electronically process ck mark in the "S/D" column. tion (the community to which , the community with which the	at the system e system's FM h this point, se ssed by the ca the station is l	's headend, and antenna, durin e page (v) of th ble system as a icensed by the	d (2) it ca g certain e genera a separat	n be expected, stated intervals. I instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIG	N AM or FM	S/D	LOCATION OF STATION	
		3/0	LOOATION OF STATION	UALL SIG		5/0		
1/A								
						-†		
				·				
					-1	1		
						-+	·	
		·		·				

	LEGAL NAME OF OWNER OF							01/072111
Name	LEGAL NAME OF OWNER OF TDS Metrocom, LLC	- CABLE SYST	IEM:					SYSTEM ID 6379
	SUBSTITUTE CARRIAG				6			
Т	In General: In space I, iden substitute basis during the s	tify every nor	nnetwork televis	ion program, broadcast by	/ a <i>distant</i> stat			
Substitute	explanation of the programmer	ning that mus	st be included in	this log, see page (v) of the	ne general inst	ructions in th	ne paper SA	A1-2 form.
Carriage: Special	e: 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE							
Statement and			ir cable system	carry, on a substitute ba	sis, any nonne	etwork telev		
Program Log	broadcast by a distant sta	ation?				L	YES	× NO
	Note: If your answer is "No	o", leave the	rest of this pag	je blank. If your answer is	s "Yes," you m	ust complet	e the progr	am
	log in block 2. 2. LOG OF SUBSTITUT		MS					
	In General: List each subs clear. If you need more sp	stitute progra ace, please a of every no	am on a separa add additional i nnetwork telev	rows to the tables. ision program ("substitute	program") th	at, during th	e accountii	ng
	under certain FCC rules, ru Do not use general catego "NBA Basketball: 76ers vs Column 2: If the progra	ries like "mo . Bulls."	vies" or "baske		m titles, for ex			
	Column 3: Give the call Column 4: Give the bro the case of Mexican or Ca	l sign of the s adcast static nadian static	station broadca on's location (th ons, if any, the	nsting the substitute progr ne community to which the	am. e station is lice e station is ide	ntified).		
	first. Example: for May 7 g Column 6: State the tim to the nearest five minutes	ive "5/7." nes when the . Example: a	e substitute pro	gram was carried by your	· cable system	n. List the tir	nes accura	
	stated as "6:00–6:30 p.m." Column 7: Enter the let	ter "R" if the	listed program	was substituted for progr	amming that	your system	was <i>requ</i>	ired
	was substituted for program effect on October 19, 1976	mming that y		iring the accounting perio	d; enter the le			
	was substituted for program effect on October 19, 1976	mming that y S.		rring the accounting perio is permitted to delete und	d; enter the le er FCC rules		ons in	gram 7. REASON FO
	was substituted for program effect on October 19, 1976	mming that y S.	our system wa	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules	and regulati	ons in	gram
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
	was substituted for program effect on October 19, 1976 	SUBSTITUT	E PROGRAM	rring the accounting perio is permitted to delete und	d; enter the le er FCC rules WHE CARR 5. MONTH	and regulati	TUTE URRED IMES	gram 7. REASON F
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Accounting Period:	2022/01 FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM II TDS Metrocom, LLC 6375
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total c all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se 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.
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 \$263,80(• Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(See page (vi) of the general instructions located in the paper SA1-2 form for more information.
	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 this six-month accounting period is \$52.00
	Line 1. Royalty fee for accounting period
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)
	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 \$ 252,632.83
	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
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8 \$ 1,207.33
	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
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6
	FILING FEE AND TOTAL REMITTANCE DUE
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$ 1,207.33
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 1,227.33
	EFT Trace # or TRANSACTION ID #
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.

Accounting Period:	2022/01		FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF	FOWNER OF CABLE SYSTEM: DM, LLC	SYSTEM ID# 63798
M Channels	 to its subscribe 1. Enter the to system carrie 2. Enter the to on which the 	ers, and (2) the cable system's total nur tal number of channels on which the ca	ast stations 154
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INF t about this statement of account.)	ORMATION IS NEEDED (Identify an individual to whom
for Further Information	Name	Mitchell Maier	Telephone (608) 886-8210
	Address	525 Junction Rd (Number, street, rural route, apartment, or s	suite number)
		Madison, WI 53593 (City, town, state, zip)	
	Email	Finance@tdstelecom.com	Fax (optional)
O Certification	I, the undersig (Ow (Age i X (Off i i I have examinare true, compilation	gned, hereby certify that (Check one, <i>but</i> ner other than corporation or partners ent of owner other than corporation or n line 1 of space B and that the owner is ficer or partner) I am an officer (if a corp n line 1 of space B. ned the statement of account and hereby	(hip) I am the owner of the cable system as identified in line 1 of space B; or partnership) I am the duly authorized agent of the owner of the cable system as identified
			/s/ Sharon V. Tisdale n electronic signature on the line above to certify this statement. ignature using an "/s/ signature" (e.g., /s/ John Smith)
		Typed or printed name:	Sharon V. Tisdale
			stant Treasurer ition held in corporation or partnership)

Privacy Act Notice: Section 111 of title 17 of the United States Code autonizates the Copyright Unice 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.

counting Period: 2022/01	FORM SA1-2E. PAGE 8
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
DS Metrocom, LLC	6379
 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 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? 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
Line 3 Multiply line 2 by the number of days late and enter the sum here	_
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	_
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.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	
ID number First community served	

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