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
STATEMENT OF ACCOUNT	FOR COPYRIGHT	OFFICE USE ONLY	email to:
for Secondary Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.g
Cable Systems (Short Form)		ć	For additional infor
General instructions are located	09/19/2022	Ş	contact the U.S. C Office Licensing D
in the first tab of this workbook		ALLOCATION NUMBER	Tel: (202) 707-815

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
	Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting	20221 Barcode Data Filing Period (optional - see instructions)
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
	CABLE ONE, INC. d/b/a SPARKLIGHT
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM
	210 E. EARLL DRIVE Number, street, rural route, apartment, or suite number)
	PHOENIX, AZ 85012 (City, town, state, zip)
С	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless thes names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1 IDENTIFICATION OF CABLE SYSTEM:
	SPARKLIGHT MAILING ADDRESS OF CABLE SYSTEM:
	230 5TH AVENUE
	2 (Number, street, rural route, apartment, or suite number) MCCOMB, MS 39648 (City, town, state, zip code)

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT	SYSTEM ID# 8306
D Area Served	Instructions: List each separate community served by the cable system. A "con "a separate and distinct community or municipal entity (including unincorpora discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that known as the "first community." Please use it as the first community on all fur Note: Entities and properties such as hotels, apartments, condominiums, or m identified city.	mmunity" is the same as a "community unit" as defined in FCC rules: ted communities within unincorporated areas and including single, t you list will serve as a form of system identification hereafter ture filings.
	CITY OR TOWN	STATE
First Community	WAYNESBORO BUCKATUNNA CLARA	MS MS MS
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						FORM SA1	TEM ID
Name	CABLE ONE, INC. d/b/a	SPARKLIG	нт						830
_	SECONDARY TRANSMISSION	SERVICE: SI	IBSCRI	BERS AND RA	ATES				
E	In General: The information in s		-	-	-	y transmission s	ervice of th	ie cable	
	system, that is, the retransmission	on of television	and rad	io broadcasts l	by your sy	stem to subscrib	oers. Give i	nformation	
Secondary	about other services (including p						hose existi	ng on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						lo avotom	brokon	
scribers and	down by categories of secondar								
Rates	each category by counting the n								
	separately for the particular serv	ice at the rate i	ndicated	d-not the num	nber of set	s receiving serv	ice).	-	
	Rate: Give the standard rate of								
	unit in which it is generally billed category, but do not include disc				ny standai	rd rate variations	s within a p	articular rate	
	Block 1: In the left-hand block				ies of sec	ondary transmis	sion servic	e that cable	
	systems most commonly provide								
	that applies to your system. Note								
	categories, that person or entity								
	subscriber who pays extra for ca first set" and would be counted of					i în the count un	der Servic	e to the	
	Block 2: If your cable system					service that are	different fr	om those	
	printed in block 1 (for example, t								
	with the number of subscribers a	and rates, in the	e right-h	and block. A tw	vo- or thre	e-word descripti	on of the s	ervice is	
	sufficient.	OCK 1					BLOCK	· 2	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT
	Service to first set		312	\$40.00					
	Service to additional set(s)		312	\$40.00					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial			\$40.00					
	Converter			\$40.00					
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	S				
F	In General: Space F calls for rat	•	,		•	• •			
•	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	
ransmissions:	Block 1: Give the standard rat								
Rates	Block 2: List any services that listed in block 1 and for which a								
	brief (two- or three-word) descrip				SHEU. LISU			Ionn or a	
	CATEGORY OF SERVICE	BLO RATE		ORY OF SER	VICE	RATE	CATEG	BLOCK 2 DRY OF SERVICE	RATI
	Continuing Services:	TUTE		tion: Non-res		10112	O/ TEO		
	• Pay cable	\$9-\$18.00	• Mot	el, hotel			EXPNA	DED BASIC	44.0
	• Pay cable—add'l channel			nmercial			DIGITA	L FAM PAK	13.0
	Fire protection		• Pay	cable				SUPER PAK	18.0
	•Burglar protection			cable-add'l ch	annel				18.0
	Installation: Residential		,	protection				HE WORKS	27.0
	• First set	\$40.00		glar protection			HBO		18.0
	Additional set(s)			services:			CINEM	AX	13.0
	• FM radio (if separate rate)			connect		90.00			
	, , ,								
	Converter		• 1/150	connect					
	Converter			connect let relocation					
	• Converter		• Out	connect let relocation ve to new addr	855	\$45.00			

ting Period:				
Name	LEGAL NAME OF OWNER O			SYSTEM ID#
	CABLE ONE, INC. d/			8306
G Primary smitters: levision	In General: In space G, id carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, is Substitute Basis Station basis under specific FCC I • Do not list the station he station was carried only o • List the station here, and basis. For further informati Column 1: List each static multicast stream associate "WETA-2" as the same on Column 2: Give the chanr of license. For example, V Column 3: Indicate in eace educational station, by ent (for independent multicast For the meaning of these for Column 4: Give the locati	dentify every television station (including t em during the accounting period, <i>except</i> is 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. s: With respect to any distant stations ca rules, regulations, or authorizations: re in space G—but do list it in space I (then n a substitute basis. I also in space I, if the station was carried ion concerning substitute basis stations, so on's call sign. <i>Do not</i> report origination prior ed with a station according to its over-the-	(1) stations carried only on a part e carriage of certain network prog 1(e)(2) and (4))]; and (2) certain si rried by your cable system on a s e Special Statement and Program both on a substitute basis and al see page (v) of the general instru- rogram services such as HBO, ES -air designation. For example, re- vision station for broadcasting over station, an independent station, or for network multicast), "I" (for indee r "E-M" (for noncommercial educa- citons in the paper SA1-2 form. the community to which the station	t-time basis under grams [sections tations carried on a ubstitute program n Log)—if the iso on some other ctions. SPN, etc. Identify each port multistream er the air in its community r a noncommercial spendent), "I-M" titional multicast). on is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		_		
	WDAM	7	N .	LAUREL, MS
	WGBC	31	I	MERIDIAN, MS
's as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
s Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
s Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
lecessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
lecessary	WGBC WHLT WMAW WDAM-2 WHLT-2 WDAM-3 WDAM-5	31 22 28 7.2 22.2	I N E N-M I-M	MERIDIAN, MS HATTIESBURG, MS MERIDIAN, MS LAUREL, MS HATTIESBURG, MS
Vecessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
ıs Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
rs as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
s as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
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	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
ws as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
ws as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
vs as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
vs as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
s as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
ws as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS
ws as Necessary	WGBC	31	I	MERIDIAN, MS
	WHLT	22	N	HATTIESBURG, MS
	WMAW	28	E	MERIDIAN, MS
	WDAM-2	7.2	N-M	LAUREL, MS
	WHLT-2	22.2	I-M	HATTIESBURG, MS
	WDAM-3	7.3	I-M	LAUREL, MS
	WDAM-5	7.5	I-M	LAUREL, MS

EGAL NAME O									SYSTEM I
	t every radio s	station c) arried on a separate and disc enerally receivable by your ca						н
eceivable if (1) in the basis of for detailed info aper SA1-2 fo Column 1 : lo Column 2 : S Column 3 : lf	it is carried b monitoring, to prmation about rm. dentify the cal state whether the radio state	y the sy be rece ut the C I sign of the stati tion's sig	II-Band FM Carriage: Under stem whenever it is received eived at the headend, with the opyright Office regulations or each station carried. on is AM or FM. gnal was electronically proces ck mark in the "S/D" column.	at the sys e system's n this poir	stem's h s FM ant it, see pa	eadend, and tenna, during age (v) of the	(2) it ca certain genera	n be expected, stated intervals. I instructions in the.	Primary Transmitters Radio
Column 4: G	Give the station	n's locat	tion (the community to which , the community with which th				CC or, i	n the case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL	SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	od: 2022/1						FOR	M SA1-2E. PAGE 5
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	CABLE ONE, INC. d/b/	a SPARK	LIGHT					8306
	SUBSTITUTE CARRIAGE	E: SPECIA		NT AND PROGRAM LO	G			
	In General: In space I, identi	fy every nor	nnetwork televis	ion program, broadcast by	a distant stat	ion, that vo	ur cable syste	m carried on a
	substitute basis during the a	ccounting pe	eriod, under spe	cific present and former FC	C rules, regul	ations, or a	uthorizations.	For a further
Substitute	explanation of the programm	ing that mus	t be included in	this log, see page (v) of the	e general instr	uctions in t	he paper SA1	-2 form.
Carriage:	1. SPECIAL STATEMENT		NING SUBST	ITUTE CARRIAGE				
Special	 During the accounting period 	iod, did you	r cable system	carry, on a substitute bas	is, any nonne	twork telev	vision program	1 <u></u>
Statement and Program Log	broadcast by a distant stat	tion?					YES	NO
Program Log				- blands life and a second second	«N/»	4 1		-
	Note: If your answer is "No'	, leave the	rest of this pag	e blank. If your answer is	"Yes," you mu	ust comple	te the program	n
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subst clear. If you need more spa-				wherever pos	sible, if the	eir meaning is	
				sion program ("substitute	program") tha	at durina th	ne accounting	
	period, was broadcast by a							
	under certain FCC rules, re	gulations, o	r authorizations	s. See page (v) of the gen	eral instruction	ns for furth	er informatior	
	Do not use general categori		vies" or "baske	tball." List specific program	n titles, for ex	ample, "I L	ove Lucy" or	
	"NBA Basketball: 76ers vs.			"V(" Othermatics	1 - 7			
				"Yes." Otherwise enter "N sting the substitute progra				
				e community to which the		nsed by th	e FCC or in	
	the case of Mexican or Can							
				tem carried the substitute			, with the mor	nth
	first. Example: for May 7 giv							
				gram was carried by your				ly
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. s	should be	
		er "R" if the	listed program	was substituted for progra	amming that v	our system	n was <i>require</i>	d
	to delete under FCC rules a							
	was substituted for program							
	effect on October 19, 1976.							
					WHE	EN SUBST	TITUTE	
	S		E PROGRAM			IAGE OC		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. FROM	TIMES — TO	
								n
								"
					-			
					-			
					-			

Accounting Period:	2022/1	FORM SA	1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. d/b/a SPARKLIGHT	S	YSTEM ID 830
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. If all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this 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.	mission servic s amount, see	e 7,088.42
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 • 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-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	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. 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	7,600)	
	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		F OWNER OF CABLE SYSTEM: , INC. d/b/a SPARKLIGHT							SYSTEM ID# 8306
M Channels	to its subscribe1. Enter the to system carrie2. Enter the to on which the	You must give (1) the number ers, and (2) the cable system's tal number of channels on whic ed television broadcast stations tal number of activated channe cable system carried television dcast services	total num ch the cat s els n broadca	nber of act ble ast stations	ivated channels	during the a	accounting period.		8
N Individual to Be Contacted		TO BE CONTACTED IF FURT about this statement of account		ORMATIO	N IS NEEDED (Identify an i	ndividual to whom		
for Further Information	Name	JENAE HECK					Tele	ephone	602-364-6092
	Address	210 E. EARLL DRIVI (Number, street, rural route, apar PHOENIX, AZ 85012 (City, town, state, zip)	rtment, or s	suite number))				
	Email	JENAE.HECK	@CABLE	EONE.BIZ	2		Fax (optional) 602-	-364-6013	3
O Certification	I, the undersig (Own (Age i X (Off i i I have examin are true, compl	N (This statement of account n ined, hereby certify that (Check of ner other than corporation or p ent of owner other than corpor in line 1 of space B and that the ficer or partner) I am an officer of in line 1 of space B. ed the statement of account and lete, and correct to the best of my stion 1001(1986)] Typed or printe Title:	ation or p owner is n (if a corpo hereby d y knowled Enter ar Enter sig d name: VICE	nly one , of nip) I am the partnership not a corpor pration) or a declare unde dge, informa /s/ QU n electronic ignature usi	the boxes.) e owner of the ca o) I am the duly a ration or partners a partner (if a part er penalty of law ation, and belief, yynh Tran signature on the ng an "/s/ signatu	ible system a authorized ag hip; or inership) of th that all state and are mad	as identified in line 1 of ent of the owner of the he legal entity identified ments of fact contained le in good faith.	space B; cable sy d as owne	rstem as identified
		(Title of Date:	omicial posi	auon held in d	corporation or partn	ersnip)	August 26, 2022		

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the 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 telephol 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 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 t 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 lav

unting Period: 2022/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
BLE ONE, INC. d/b/a SPARKLIGHT	830
 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? NO 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	_
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
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