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
STATEME	NT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	by email to:
for Secondar	y Transmissions by	DATE RECEIVED	AMOUNT	- configeo allos roy
	ns (Short Form) tions are located f this workbook	3/1/23	\$ ALLOCATION NUMBER	coplicsoa@loc.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED	Period 1 = January 1 - June 30	<b>YYYY/(Period))</b> Period 2 = July 1 - December 31	
Accounting Period		Barcode Data Filing Period (optiona	I - see instructions)	
В	Instructions: Give the full legal name of the owner of title of the subsidiary, not that of the pa		sidiary of another corporation, give the full o	corporate
Owner	List any other name or names under wh	nich the owner conducts the business of	the cable system.	
	If there were different owners during th single statement of account and royalty		n the last day of the accounting period should nting period.	d submit a
	Check here if this is the system's first fil	ing. If not, enter the system's ID numbe	r assigned by the Licensing Division.	1716
	LEGAL NAME OF OWNER/MAILI	NG ADDRESS OF CABLE SYSTEM	Λ	
	MCC Missouri, LLC (Hermann, MC	))		
	BUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFEREN	T)	
	MAILING ADDRESS OF OWNER O	OF CABLE SYSTEM		

 2
 (Number, street, rural route, apartment, or suite number)

 (City, town, state, zip code)

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

INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these

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

ONE MEDIACOM WAY

City, town, state, zip)

MEDIACOM PARK, NY 10918

IDENTIFICATION OF CABLE SYSTEM:

MAILING ADDRESS OF CABLE SYSTEM:

С

System

1

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II					
Humo	MCC Missouri, LLC (Hermann, MO)	171					
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FG "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereaft 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 mobile home parks should be reported in parentheses below the identified city.						
	CITY OR TOWN	STATE					
First Community	Hermann	MO					
dd Rows as Necessary							

	LEGAL NAME OF OWNER OF C							FORM SA1	TEM ID
Name	MCC Missouri, LLC (Hermann, MO)								171
	MCC MISSOURI, LLC (He	rmann, wo	)						
Е	SECONDARY TRANSMISSION								
E	In General: The information in s	-		-		•			
Secondary	system, that is, the retransmission about other services (including p								
Transmission	last day of the accounting period	l (June 30 or D	ecembe	er 31, as the ca	se may be	e).		-	
Service: Sub-	Number of Subscribers: Both	•					•		
scribers and Rates	down by categories of secondar each category by counting the n	•		•		•			
	separately for the particular serv	ice at the rate	indicate	d-not the nun	nber of set	ts receiving serving	vice).	C C	
	Rate: Give the standard rate c	-	-	•				-	
	unit in which it is generally billed category, but do not include disc				ny standa	rd rate variation	is within a	particular rate	
	Block 1: In the left-hand block				ries of sec	ondary transmi	ssion servi	ce that cable	
	systems most commonly provide								
	that applies to your system. Not categories, that person or entity			-		-			
	subscriber who pays extra for ca								
	first set" and would be counted of							<b>.</b>	
	<b>Block 2:</b> If your cable system printed in block 1 (for example, t	•							
	with the number of subscribers a					•	,.		
	sufficient.				n				
	BLC	DCK 1 NO. OF	. 1				BLOCK	K 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT
	Residential:								
	<ul> <li>Service to first set</li> </ul>		115	97.00					
	<ul> <li>Service to additional set(s)</li> </ul>								
	• FM radio (if separate rate)								
	Motel, hotel		_	07.00					
	Commercial Converter		0	97.00					
	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 service for a single fee. There ar					,	,		
Services	furnished at cost or (2) services	•			0		0 (	,	
Other Than	amount of the charge and the ur		usually	billed. If any ra	ates are ch	narged on a var	iable per-p	rogram basis,	
Secondary Fransmissions:	enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.								
Rates	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. 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) description and include the rate for each.								
	brief (two- or three-word) descrip	otion and inclue	de the ra	ate for each.			1		
		BLO			105	DATE	0.175.0	BLOCK 2	<b>D</b> 4 <b>T</b>
	CATEGORY OF SERVICE Continuing Services:	RATE		ORY OF SER		RATE	CATEGO	ORY OF SERVICE	RAT
	Pay cable	PP		el, hotel	aonna		Family	τν	###
	• Pay cable—add'l channel	PP	• Cor	nmercial					
	Fire protection		• Pay	cable					
	•Burglar protection		• Pay	cable-add'l ch	annel				
	Installation: Residential			protection					
	• First set	49.99		glar protection					
	• Additional set(s)	15.00-49.00		ervices:					
	• FM radio (if separate rate)			connect		49.00			
	• Converter			connect let relocation		15.00-49.00			
			_	let relocation /e to new addr	255	15.00-49.00			
				o to now audi					

ounting Period: 2	2022/2			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF			SYSTEM ID# 1716
	MCC Missouri, LLC (H	•		1/10
G Primary ransmitters: Television	In General: In space G, ide carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as <b>Substitute Basis Stations:</b> 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 <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on the <b>Column 2:</b> Give the channel of license. For example, With <b>Column 3:</b> Indicate in each educational station, by enter (for independent multicast), For the meaning of these te <b>Column 4:</b> Give the location	ntify every television station (including in during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting t ()(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. With respect to any distant stations of les, regulations, or authorizations: a in space G—but do list it in space I (if a substitute basis. also in space I, if the station was carrie in concerning substitute basis stations 's call sign. <i>Do not</i> report origination with a station according to its over-th he form. a number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis	translator stations and low power tele t (1) stations carried only on a part-tin he carriage of certain network program S1(e)(2) and (4))]; and (2) certain static arried by your cable system on a subst he Special Statement and Program Lo d both on a substitute basis and also , see page (v) of the general instruction program services such as HBO, ESPN e-air designation. For example, repor evision station for broadcasting over th station, an independent station, or a r (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 he community with which the station i	ne basis under ns [sections ons carried on a stitute program og)—if the on some other ns. N, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KDNL/KDNL(HD) ABC	31	N 	St. Louis, MO
	KETC/KETC(HD) PBS	39	E	St. Louis, MO
Rows as Necessary	KETC-DT4 PBS Create	39.4	E-M	St. Louis, MO
	KMIZ ABC	17	N	Columbia, MO
	KMIZ-DT2 (MeTv)	17.2	I-M	Columbia, MO
	KMOV/KMOV(HD)CBS	24	N	St. Louis, MO
	КОМИ ИВС	8	N	Columbia, MO
	KPLR CW	26	I	St. Louis, MO
	KRCG CBS	12	N	Jefferson City, MO
	KSDK/KSDK(HD) NBC	35	N	St. Louis, MO
	KTIV(HD) NBC	41	N	Sioux City, IA
	KTVI(FOX)	2	I	St. Louis, MO

MCC Missou	OWNER OF C							SYSTEM I 17
	every radio s	tation ca	rried on a separate and discr nerally receivable by your cab					н
eceivable if (1) in the basis of r for detailed info paper SA1-2 for Column 1: Id Column 2: St Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the station	y the sys be received to the Co sign of e he station on's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s pyright Office regulations on t each station carried. In is AM or FM. hal was electronically process c 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 this point, see par ed by the cable s re station is licens	adend, and (2 nna, during c ge (v) of the g ystem as a se sed by the FC	2) it can l ertain st eneral ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
·····								

Accounting Perio	od: 2022/2						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	MCC Missouri, LLC (H	lermann, I	MO)					1716
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LC	DG			
	In General: In space I, ident	tify every nor	nnetwork televi	<i>ision program,</i> broadcast by	y a <i>distant</i> sta	tion, that y	our cable sys	stem carried on a
	substitute basis during the a							
Substitute	explanation of the programm	ning that mus	st be included	in this log, see page (v) of t	the general ins	structions i	n the paper S	SA1-2 form.
Carriage:	1. SPECIAL STATEMEN	T CONCER	RNING SUBS	TITUTE CARRIAGE				
Special	<ul> <li>During the accounting per</li> </ul>	riod, did you	ur cable syster	n carry, on a substitute ba	asis, any noni	network te	levision prog	gram
Statement and Program Log	broadcast by a distant sta	ation?	-	-	-		YES	× NO
Program Log	-							
	Note: If your answer is "No	o", leave the	rest of this pa	age blank. If your answer i	s "Yes," you i	nust comp	plete the pro	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs				s wherever p	ossible, if	their meanin	ig is
	clear. If you need more spa			l rows to the tables. vision program ("substitute	o program") t	aat during	the ecour	ting
	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 the community to which th		oppod by	the ECC or	in
	the case of Mexican or Car						THE FCC OI,	, 111
				stem carried the substitute			als, with the	month
	first. Example: for May 7 gi		······				,	
				ogram was carried by you				
	to the nearest five minutes.	. Example: a	a program car	ried by a system from 6:0	1:15 p.m. to 6	:28:30 p.n	n. should be	
	stated as "6:00–6:30 p.m."	tor "D" if the	listed program	n was substituted for prog	manana in a that			uire d
	Column 7: Enter the lett			n was substituted for prog				
	to delete under ECC rules :	and regulation	ons in effect o	luring the accounting perio	nd onter the	ATTAR "P" IT		
	to delete under FCC rules a was substituted for program							ogram
	to delete under FCC rules a was substituted for prograr effect on October 19, 1976	mming that y						ogram
	was substituted for program	mming that y						ogram
	was substituted for prograr effect on October 19, 1976	mming that y	your system w	as permitted to delete und	der FCC rules	and regu	lations in	
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	was substituted for prograr effect on October 19, 1976	UBSTITUTI	your system w	as permitted to delete und	der FCC rules	and regu	lations in	
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	ras permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	Iations in ITUTE CURRED TIMES	7. REASON FOR
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Accounting Period:	2022/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	STEM ID#
Name	MCC Missouri, LLC (Hermann, MO)		1716
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 transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form.         Gross receipts from subscribers for secondary transmission service(s) during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	ission service amount, see	<b>7,546.30</b> ss receipts)
L Copyright 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 accounting period is \$52.00	this 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		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 \$ 263,800.00	,	
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	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		
		222)	
	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		nts!

Accounting Period:	2022/2	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Missouri, LLC (Hermann, MO)	SYSTEM ID# 1716
<b>M</b> Channels	CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period.         1. Enter the total number of channels on which the cable system carried television broadcast stations         2. Enter the total number of activated channels on which the cable system carried television broadcast stations         on which the cable system carried television broadcast stations and nonbroadcast services	16 65
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Address One Mediacom Way	845-443-2762
	(Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip)	
	Email Copyrights@mediacomcc.com Fax (optional)	
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) <ul> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space I</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cables in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow in line 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]</li> <li>(I system and et a signature on the line above to certify this statement. Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)</li> <li>Typed or printed name:</li> </ul>	system as identified ner of the cable system
	Title: Vice President, Financial Reporting (Title of official position held in corporation or partnership) Date: 2/6/2023	
	Date: 2/6/2023	

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

L NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE
	SYSTEM I
C Missouri, LLC (Hermann, MO)	171
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.	Receipts Exclusion
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?	
X NO	
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.	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	_
xdays	
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	
Line 4 Multiply line 3 by 0.00274** and enter 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	_
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