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						
3/1/2023	\$ 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	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))							
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31							
Accounting		20222 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.	40117						
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
		Cogeco US (SC), LLC							
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)							
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM							
		2 Batterymarch Park, Suite 205							
		(Number, street, rural route, apartment, or suite number)							
		Quincy, MA 02169 (City, town, state, zip)							
	INSTR	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unl	ess these						
С	names	s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in sp	pace B.						
System	1	IDENTIFICATION OF CABLE SYSTEM:							
	'	Cogeco US, LLC							
		MAILING ADDRESS OF CABLE SYSTEM:							
	2	520 Pine Log Road (Number, street, rural route, apartment, or suite number)							
		Aiken, SC 29803							
	<u> </u>	(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 fling, a determination that would be made by a court of law.

Accounting Period:	2022/2	FORM SA1-2E. PAGE 1b.						
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
Name								
	Cogeco US (SC), LLC 40117							
		n. A "community" is the same as a "community unit" as defined in FCC rules: "a						
D		rporated 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	Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified							
Served	city.							
	CITY OR TOWN	STATE						
First	City of Bamberg	SC						
Community	Bamberg County (un-incorp)	SC						
•	Denmark	SC						
	Definition							
Add Rows as Necessary								

Accounting Period: 2022/2

FORM SA1-2E, PAGE 2.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Cogeco US (SC), LLC

SYSTEM ID# 40117

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information 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 down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLO	OCK 1		BLOCK 2				
	NO. OF			NO. OF			
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE		
Residential:							
 Service to first set 	359	39.99	Residential Expanded Basic	293	#####		
 Service to additional set(s) 			Digital Plus		122.97		
 FM radio (if separate rate) 							
Motel, hotel	25	39.99					
Commercial	81	39.99					
Converter			Digital Value	24	69.98		
Residential		4.99-14.99					
Non-residential							

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the 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.

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.

	BLO	CK 1			BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE		CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential				
• Pay cable	1.99-19.99	Motel, hotel		L		
 Pay cable—add'l channel 		Commercial				
 Fire protection 		• Pay cable				
 Burglar protection 		Pay cable-add'l channel				
Installation: Residential		Fire protection				
• First set	50.00	Burglar protection				
 Additional set(s) 		Other services:				
 FM radio (if separate rate) 		Reconnect	40.00			
Converter		Disconnect				
		Outlet relocation	40.00			
		Move to new address	40.00			

Accounting Period: 2022/2 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 40117

4. LOCATION OF STATION

Cogeco US (SC), LLC

1. CALL SIGN

PRIMARY TRANSMITTERS: TELEVISION



Primary Transmitters: Television In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

Column 1: List each station's call sign. *Do not* report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community 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 independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.

Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

2. B'CAST CHANNEL NUMBER

WAGT (NBC) 26.1 Ν Augusta, GA **WAGT-CW** 26.2 Ν Augusta, GA **WCES** 20.1 Ε Wrens, GA 14.1 Ε Allendale, SC **WEBA** Ε **WEBA-SCC** 14.2 Allendale, SC **WEBA WORLD** 14.3 Ε Allendale, SC WFXG (FOX) 54.1 N Augusta, GA **WFXG GRIT** 54.3 Ν Augusta, GA WFXG/Bounce 54.2 Ν Augusta, GA **WJBF ABC** Ν 6.1 Augusta, GA WJBF/MeTV 6.2 Ν Augusta, GA **WRDW MY12** 12.3 Ν Augusta, GA **WAGT-DABL** (569 MHz) Ch 30 - 254 Ν Augusta, GA WRDW CBS 12.1 N Augusta, GA **WAGT-ANT TV** Ν Augusta, GA 26.3 WJBF-ESCAPE Ν (557 MHz) ch 28 - 240 Augusta, GA

3. TYPE OF STATION

Add Rows as Necessary

Accounting Period: 2022/2	FORM SA1-2E. PAGE 4
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LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Cogeco US (SC), LLC

40117

PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

Column 1: Identify the call sign of each station carried.

Column 2: State whether the station is AM or FM.

Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
	 						
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Accounting Perio	d: 2022/2						FOR	M SA1-2E. PAGE 5.				
Nama	LEGAL NAME OF OWNER OF	CABLE SYST	EM:					SYSTEM ID#				
Name	Cogeco US (SC), LLC											
I	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further											
Substitute	explanation of the programm	ing that mus	t be included in	this log, see page (v) of the	general instru	ictions in th	e paper SA1-	2 form.				
Carriage: Special	1. SPECIAL STATEMENT			-								
Statement and	During the accounting per	iod, did you	r cable system	carry, on a substitute basi	s, any nonnet	work telev	ision progran					
Program Log	broadcast by a distant sta	tion?					YES	× NO				
	Note: If your answer is "No	", leave the	rest of this pag	e blank. If your answer is '	Yes," you mu	ist comple	te the progra	m				
	log in block 2.											
	In General: List each subs clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the prograr Column 3: Give the call	2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program.										
	the case of Mexican or Car			e community to which the			e FCC or, in					
				community with which the s em carried the substitute p			with the mor	nth				
	first. Example: for May 7 given	•	Wilch your syst	cin carried the substitute p	nogram. 030	numerais,	with the moi	101				
	Column 6: State the time	es when the		gram was carried by your o	•			ely				
	to the nearest five minutes.	Example: a	program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. :	should be					
	stated as "6:00–6:30 p.m."	or "P" if the	listed program	was substituted for progra	mming that w	our evetem	was require	d				
	to delete under FCC rules a					•	•					
	was substituted for progran											
	effect on October 19, 1976											
	S	SUBSTITUT	E PROGRAM		WHEN SUBSTITUTE CARRIAGE OCCURRED 7.			7. REASON FOR				
	TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH		TIMES	DELETION				
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	<u>— то</u>					
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LEGAL NAME OF OWNER OF CABLE SYSTEM: Cogeco US (SC), LLC			3	YSTEM II
				401
(as identified in space E) during the accounting period. For a further explana page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s)	e system's s tion of how	secondary transn to compute this	nission service amount, see	
0 01				1,851.00 oss receipts)
Use block 3 if the amount of gross receipts in space K is more than \$263,80	0 but less t	han \$527,600	263,800	
BLOCK 1: GROSS RECEIPTS OF \$1	37,100 OF	RLESS		
Instructions: As a cable system with gross receipts of \$137,100 or less, the royal accounting period is \$52.00	alty fee that y	you must pay for t	nis six-month	
Line 1. Royalty fee for accounting period				
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	l lines 1 and	12		
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR L	ESS (but r	more than \$137,	100)	
Base amount under statutory formula	\$	263,800.00	_	
2. Enter amount of gross receipts from space K	\$	151,851.00	_	
3. Subtract line 2 from line 1	\$	111,949.00	_	
4. Enter the amount of gross receipts from space K		\$	151,851.00	
5. Enter the amount from line 3		. \$	111,949.00	
6. Subtract line 5 from line 4		\$	39,902.00	
7. Multiply line 6 by .005 (enter figure here)			\$	199.51
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	s 7 and 8		\$	199.51
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$2	63,800 (bu	ut less than \$527	',600)	
Enter the amount of gross receipts from space K				
			_	
3. Subtract line 2 from line 1		,	_	
4. Multiply line 3 by .01			=	
Royalty due on the first \$263,800 of gross receipts (under statutory formula) .		\$	1,319.00	
FILING FEE AND TOTAL REMITTANCE D	DUE			
1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	199.51	
2. Filing Fee (See the instructions for more information on filing fee calculations))	\$	20.00	
3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3.			\$	219.51
Institute Vancanium and the first state of the firs				L4-1
	all amounts (gross receipts) paid to your cable system by subscribers for the as identified in space E) during the accounting period. For a further explanapage (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. COPYRIGHT ROYALTY FEE nstructions: 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 1 if the amount of gross receipts in space K is more than \$137,10. Use block 3 if the amount of gross receipts in space K is more than \$283,80 is page (vi) of the general instructions located in the paper SA1-2 form for more papers (vi) of the general instructions located in the paper SA1-2 form for more papers (vi) of the general instructions located in the paper SA1-2 form for more papers (vi) of the general instructions located in the paper SA1-2 form for more papers (vii) of the general instructions located in the paper SA1-2 form for more papers (vii) of the general instructions located in the paper SA1-2 form for more papers (vii) of the general instructions located in the paper SA1-2 form for more papers (vii) of the general instructions located in the paper SA1-2 form for more papers (vii) of the general instructions located in the paper SA1-2 form for more papers (vii) of the general instructions located in the paper SA1-2 form for more papers (vii) of the general instructions forms seceipts of \$137,100 or less. The royalty fee papers (vii) of the general instructions form space K. Line 1. Royalty fee for accounting period (from space K. Subtract line 2 from line 1. 4. Enter the amount of gross receipts from space K. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$2. 1. Enter the amount of gross receipts from space K. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$2. 1. Enter the amount of gross receipts from space Q, page 8.	all amounts (gross receipts) paid to your cable system by subscribers for the systems (as identified in space E) during the accounting period. For a further explanation of how 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. Describer of the royalty FEE SUSP block 1, block 2, or block 3. Use block 1 fithe 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 \$233,800 but less to lese page (vi) of the general instructions located in the paper SA1-2 form for more information and the secondary transmission. BLOCK 1: GROSS RECEIPTS OF \$137,100 or less, the royalty fee that 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 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but if 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 of gross receipts from space K. 5. Enter the amount of gross receipts from space K. 6. Enter the amount of gross receipts from space K. 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. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but 1. Enter the amount of gross receipts from space K. 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 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. Interest charge. Enter the amount from line 4, space Q, page 8. 7. TOTAL	all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmir (cal identified in space E) during the accounting period. For a further explanation of how to compute this in page (iii) 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. **DOPYRIGHT ROYALTY FEE** INPORTANT: You must complete a statement in space P concerning gross receipts. **DOPYRIGHT ROYALTY FEE** INPORTANT: You must complete a statement in space P concerning gross receipts. **DOPYRIGHT ROYALTY FEE** Instructions: To compute the royalty fee you owe: Complete block 1 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$1 use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$1 use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$1 use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$1 use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$1 use block 3 if the amount of gross receipts of \$137,100 or less, the royalty fee that you must pay for the page (iv) of the general instructions located in the paper \$3.1-2 form for more informating 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 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137, 1.6 but more th	all amounts (gross receipts) spall to your cable system by subscribers for the system's secondary transmissions service (as identified in space E) during the accounting period. Why of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. Why ORTANT Y FUE INTERCEDIAN TO COMPLETE BE STANDARD

Accounting Period:	2022/2				FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF C	OWNER OF CABLE SYSTEM: C), LLC			SYSTEM ID# 40117
M Channels	CHANNELS Instructions: \(\) to its subscribe 1. Enter the tot system carri 2. Enter the tot on which the and nonbroa	16 276			
N Individual to		O BE CONTACTED IF FURTH tabout this statement of account	HER INFORMATION IS NEEDED (Identify an nt.)	individual to whom	
Be Contacted for Further Information	Name	Patrick Bratton		Telephone 6	17-786-8800
	Address	2 Batterymarch Park, (Number, street, rural route, apartn Quincy, MA 02169 (City, town, state, zip)			
	Email	pbratton@breez	zeline.com	Fax (optional	
	CERTIFICATION	(This statement of account mu	ust be certified and signed in accordance with	Copyright Office regulations)	
O Certification	• I, the undersign	ed, hereby certify that (Check on	ne, but only one, of the boxes.)		
	(Own	er other than corporation or pa	artnership) I am the owner of the cable system	as identified in line 1 of space B;	or
	(Agen		tion or partnership) I am the duly authorized a e owner is not a corporation or partnership; or	gent of the owner of the cable sys	tem as identified
	X (Office	cer or partner) I am an officer (if in line 1 of space B.	f a corporation) or a partner (if a partnership) of	the legal entity identified as owner	of the cable system
	are true, comple		nereby declare under penalty of law that all state y knowledge, information, and belief, and are ma		
	ı		X /s/ Patrick Bratton		
			Enter an electronic signature on the line above to Enter signature using an "/s/ signature" (e.g., /s,		
		Typed or printed	name: Patrick Bratton		
		Title:	Chief Financial Officer le of official position held in corporation or partnership)		
		Date:		March 1, 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 fling, a determination that would be made by a court of law.

ounting Period: 2022/2	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
geco US (SC), LLC	40117
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	P Special Statement Concerning Gross Receipts Exclusion
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? X NO	
YES. Enter the total here and list the satellite carrier(s) below	_
Name Mailing Address 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. Line 1 Enter the amount of late payment or underpayment	Interest Assessment
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	
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	
Accounting period	

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.