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

STATEMI	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
for Seconda	ary Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov
Cable Syste	ems (Short Form)		\$	For additional information, contact the U.S. Copyright
-	ictions are located	2/23/2023		Office Licensing Division at: Tel: (202) 707-8150
in the first tab	of this workbook	2,20,2020	ALLOCATION NUMBER	
	I			
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY	'YY/(Period))	
		7		
	2022/02	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		T		
	20222	Barcode Data Filing Period (optional	- see instructions)	
Accounting Period				
	Instructions:			
В	Give the full legal name of the owner of th the subsidiary, not that of the parent corp		liary of another corporation, give the full corp	orate title of
Owner	List any other name or names under whic	h the owner conducts the business of th	e cable system.	
	-		ne last day of the accounting period should su	bmit a single
	statement of account and royalty fee pays			63572
	Check here if this is the system's first filin	g. If not, enter the system's ID number a	assigned by the Licensing Division.	
	LEGAL NAME OF OWNER/MAILING	G ADDRESS OF CABLE SYSTEM		
	Riverside Telecom, 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 r	number)		
	Madison, WI 53717			
С	INSTRUCTIONS: In line 1, give any busin			
System	names already appear in space B. In line	2, give the mailing address of the	e system, if different from the address	given in space B.
System	1 TDS Telecom, Inc.			
	MAILING ADDRESS OF CABLE SYSTEM	1:		
	2 (Number, street, rural route, apartment, or suite r	number)		
	(City, town, state, zip code)			
	(ony, town, outle, zip oode)			

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Riverside Telecom, LLC	63572
D	Instructions: List each separate community served by the cable system. A "com separate and distinct community or municipal entity (including unincorporated unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list v community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mo	communities within unincorporated areas and including single, discrete will serve as a form of system identification hereafter known as the "first
Area Served	city.	
	CITY OR TOWN	STATE
First	Johnson Creek	WI
Community		
d Rows as Necessary		
a nows as necessary		

	LEGAL NAME OF OWNER OF C							FORM SA1	TEM I
Name								313	6357
	Riverside Telecom, LLC	•							
Е	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmissi	space E should	cover a	all categories of	secondar				
Secondary	about other services (including						those exis	ting on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						hla svetan	broken	
scribers and	down by categories of secondar	•							
Rates	each category by counting the n			•		•			
	separately for the particular service								
	Rate: Give the standard rate of unit in which it is generally billed	-						-	
	category, but do not include disc	· ·		,	ny stanua		s wiu iir a		
	Block 1: In the left-hand block				ries of sec	condary transmis	sion serv	ce that cable	
	systems most commonly provid								
	that applies to your system. Not categories, that person or entity			-		-			
	subscriber who pays extra for ca						•		
	first set" and would be counted of	once again und	er "Ser	vice to addition	al set(s)."				
	Block 2: If your cable system	•							
	printed in block 1 (for example, the second								
	sufficient.	and rates, in the	e nym-i	IATIU DIOCK. A U		e-word description		Service is	
	BL	OCK 1					BLOCI	٢2	
		NO. OF		DATE	CAT			NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIBE	-85	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT
	Service to first set		218	\$25/mo					
	Service to additional set(s)		210	<i>\$25/110</i>					+
	• FM radio (if separate rate)								+
	Motel, hotel								+
	Commercial								+
	Converter								1
	Residential		218	\$6/Mo.					1
	Non-residential								1
		[1
	SERVICES OTHER THAN SEC								
F	In General: Space F calls for ra not covered in space E, that is,	•	,		•				
•	service for a single fee. There a					,	,		
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the u		usually	/ billed. If any ra	ates are ch	narged on a vari	able per-p	rogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard ra		he cabl	e system for e	ch of the	applicable servi	ces listed		
Rates	Block 2: List any services that							t were not	
	listed in block 1 and for which a				shed. List	these other service	vices in th	e form of a	
	brief (two- or three-word) descrip	otion and includ	le the ra	ate for each.			1		
		BLO						BLOCK 2	
	CATEGORY OF SERVICE			GORY OF SER		RATE	CATEG	ORY OF SERVICE	RAT
	Continuing Services:			ation: Non-res	idential				
	• Pay cable	\$8.00-\$15.00		otel, hotel					
	Pay cable—add'l channel			mmercial		\$0 - \$50.00			
	Fire protection			y cable					
	•Burglar protection			y cable-add'l ch	lannel				+
	Installation: Residential	\$0. \$50.00		e protection					
	First set	\$0-\$50.00		rglar protection					+
	 Additional set(s) FM radio (if separate rate) 	\$0-\$50.00		services: connect		\$0_\$25.00			+
						\$0-\$25.00			+
	Converter			sconnect		19 99 20 96			
	• Converter		• Ou	tlet relocation	222	19.98-39.96			

	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:		SYSTEM
Name	Riverside Telecom, I	LC		63
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ransmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.610 substitute program basis, a Substitute Basis Station basis under specific FCC f • Do <i>not</i> list the station here station was carried <i>only</i> or • List the station here, and basis. For further informati Column 1: List each station multicast stream associate "WETA-2" as the same on Column 2: Give the cham of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location	also in space I, if the station was carried on concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pr ed with a station according to its over-the-	(1) stations carried only on a part-tile carriage of certain network progratice) (2) and (4))]; and (2) certain states and (2) certain st	ime basis under ams [sections ations carried on a bstitute program Log)—if the o on some other tions. PN, etc. Identify each ort multistream the air in its community a noncommercial bendent), "I-M" ional multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WISN	12.1	N	Milwaukee, WI
	WISN-DT2	12.2	N-M	Milwaukee, WI
ows as Necessary	WDJT	58.1	N	Milwaukee, WI
	WBME-CD	58.2	I	Milwaukee, WI
	WITI	6.1	Ν	Milwaukee, WI
	WITI-DT2	6.2	N-M	Milwaukee, WI
	WTMJ	4.1	Ν	Milwaukee, WI
	WTMJ-DT2	4.2	N-M	Milwaukee, WI
	WTMJ-DT3	4.3	N-M	Milwaukee, WI
	WTMJ-DT4	4.4	N-M	Milwaukee, WI
	WTMJ-DT5	4.5	N-M	Milwaukee, WI
	WMLW	49.1	Ι	Racine, WI
	WMLW-DT2	49.2	I-M	Racine, WI
	WMLW-DT3	49.3	I-M	Racine, WI
	WMLW-DT4	49.4	I-M	Racine, WI
	WVTV	18.1	Ι	Milwaukee, WI
	WVTV-DT2	18.2	I-M	Milwaukee, WI
	WVTV-DT3	18.3	I-M	Milwaukee, WI
	WVTV-DT4	18.4	I-M	Milwaukee, WI
	WYTU	63.1	Ι	Milwaukee, WI
	WYTU-DT2	63.2	I-M	Milwaukee, WI
	WPXE	55.1	Ι	Kenosha, WI
	WMVS	10.1	E	Milwaukee, WI
	1			

News	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM
Name	Riverside Telecom, L	LC		635
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations 76.59(d)(2) and (4), 76.61(d substitute program basis, a Substitute Basis Stations basis under specific FCC rules	entify every television station (including tra m during the accounting period, <i>except</i> (in effect on June 24, 1981, permitting the e)(2) and (4), or 76.63 (referring to 76.61(is explained in the next paragraph. S: With respect to any distant stations car ules, regulations, or authorizations:	 stations carried only on a part- carriage of certain network progr (e)(2) and (4))]; and (2) certain statistical ried by your cable system on a sur- 	time basis under rams [sections ations carried on a ubstitute program
	station was carried <i>only</i> on • List the station here, and a basis. For further information Column 1: List each station multicast stream associated "WETA-2" as the same on Column 2: Give the chann of license. For example, W	also in space I, if the station was carried to on concerning substitute basis stations, so n's call sign. <i>Do not</i> report origination pro d with a station according to its over-the-a	both on a substitute basis and als ee page (v) of the general instruc ogram services such as HBO, ES air designation. For example, rep	o on some other ttions. PN, etc. Identify each port multistream
	educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location	n case whether the station is a network sta ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list the idian stations, if any, give the name of the	or network multicast), "I" (for indep "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statior	pendent), "I-M" tional multicast). n is licensed by the
	educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location	ering the letter "N" (for network), "N-M" (fo , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th	or network multicast), "I" (for indep "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statior	pendent), "I-M" tional multicast). n is licensed by the
	educational station, by enter (for independent multicast) For the meaning of these te Column 4: Give the location FCC. For Mexican or Cana	ering the letter "N" (for network), "N-M" (fo , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th idian stations, if any, give the name of the	or network multicast), "I" (for indep "E-M" (for noncommercial educations in the paper SA1-2 form. The community to which the station community with which the station	pendent), "I-M" tional multicast). n is licensed by the n is identified.
	educational station, by enter (for independent multicast) For the meaning of these te Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN	ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	or network multicast), "I" (for indep "E-M" (for noncommercial educa- tions in the paper SA1-2 form. ne community to which the station community with which the station 3. TYPE OF STATION	bendent), "I-M" tional multicast). In is licensed by the In is identified. 4. LOCATION OF STATION
	educational station, by enter (for independent multicast) For the meaning of these ter Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WMVT	ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th idian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 36.1	or network multicast), "I" (for indep "E-M" (for noncommercial educa- tions in the paper SA1-2 form. The community to which the station community with which the station 3. TYPE OF STATION E	bendent), "I-M" tional multicast). In is licensed by the In is identified. 4. LOCATION OF STATION Milwaukee, WI
	educational station, by enter (for independent multicast) For the meaning of these te Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WMVT WMVT-DT3	ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list the idian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 36.1 36.2	or network multicast), "I" (for indep "E-M" (for noncommercial educa- tions in the paper SA1-2 form. ne community to which the station community with which the station 3. TYPE OF STATION E E-M	bendent), "I-M" tional multicast). In is licensed by the In is identified. 4. LOCATION OF STATION Milwaukee, WI Milwaukee, WI
	educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WMVT WMVT-DT3 WVCY	ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th idian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 36.1 36.2 30.1	or network multicast), "I" (for indep "E-M" (for noncommercial educa- tions in the paper SA1-2 form. ne community to which the station community with which the station 3. TYPE OF STATION E E-M	bendent), "I-M" tional multicast). h is licensed by the n is identified. 4. LOCATION OF STATION Milwaukee, WI Milwaukee, WI Milwaukee, WI
	educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WMVT WMVT-DT3 WVCY	ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th idian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 36.1 36.2 30.1	or network multicast), "I" (for indep "E-M" (for noncommercial educa- tions in the paper SA1-2 form. ne community to which the station community with which the station 3. TYPE OF STATION E E-M	bendent), "I-M" tional multicast). h is licensed by the n is identified. 4. LOCATION OF STATION Milwaukee, WI Milwaukee, WI Milwaukee, WI
	educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WMVT WMVT-DT3 WVCY	ering the letter "N" (for network), "N-M" (for , "E" (for noncommercial educational), or erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th idian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 36.1 36.2 30.1	or network multicast), "I" (for indep "E-M" (for noncommercial educa- tions in the paper SA1-2 form. The community to which the station community with which the station 3. TYPE OF STATION E E-M	bendent), "I-M" tional multicast). h is licensed by the n is identified. 4. LOCATION OF STATION Milwaukee, WI Milwaukee, WI Milwaukee, WI

LEGAL NAME OF Riverside Te			YSTEM:					SYSTEM 63
	every radio s	tation ca	rried on a separate and discre nerally receivable by your cable				ied on an	н
receivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf signal, indicate t Column 4: G	it is carried by monitoring, to prmation about m. lentify the call tate whether t the radio stati this by placing vive the statior	y the sys be recein t the Co sign of e he static ion's sign a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the sy pyright Office regulations on th each station carried. on is AM or FM. nal was electronically processes a mark in the "S/D" column. on (the community to which the the community with which the s	the system's hea ystem's FM anter is point, see pag ed by the cable sy e station is licens	idend, and (2) nna, during ce e (v) of the ge vstem as a sep ed by the FCC	it can b rtain sta neral ins parate a	e expected, ted intervals. structions in the. nd discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
N/A	01 1 101	5,0			01 1 101	5,5		

Name Riverside Telecom, LLC 633572 I SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonetwork 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 explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 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 tile of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substitute for the rogramming of another station under certain FCC rules. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the full sign of the station broadcasting the substitute program. Use numerals, with the month first. Example: for May 7 give '57." Column 3: Give the conth and day when your system carried the substitute program.	Accounting Perio							FOR	M SA1-2E. PAGE 5.
Image: Control of the contend of the control of the control of the control of t		LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
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 explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. Special statement and Program Log *Derivative basis during period, did your cable system carry, on a substitute basis, any nonnetwork television program. broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 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 carried to risk program. Use numerals. With the information. Do not use general categories like "movies" or "basketball." Cit stepscific program titles, for example, "I Love Lucy" or "NBA Basketball." Fore vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the till sign of the station broadcasting the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 3: Give the month and day when your system carried by substitute program. Lise the till resore and regulations in effect during the acco	Name	Riverside Telecom, LL	С						63572
Substitute Carriage: Special Statement and Program Log I. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE Substitute basis, any nonnetwork television program broadcast by a distant station? Will be accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? YES No Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. I. 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." There was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station is 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 to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is licensed by the rest of the state of \$7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program was substitut	I	In General: In space I, identi	ify every nor	nnetwork televis	<i>ion program,</i> broadcast by a				
Special Statement and Program Log • During the accounting period, (id your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 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." 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. Column 4: Give the month and day when your system carried the substitute program. Column 4: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: Site the times when the substitute program was carried by a system for 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period, enter the letter "P" if the listed program was substituted for programming that your system was permitted to									
Statement and Program Log • During the accounting period, aid your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Image: State St	-	1. SPECIAL STATEMENT	CONCER	NING SUBSTI	TUTE CARRIAGE				
Program Log broadcast by a distant station? YES X NO Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 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 1: Give the call sign of the station broadcasting the substitute program. 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. Column 1: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: Sitale the imme when the substitute program was carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for		 During the accounting per 	iod, did you	r cable system	carry, on a substitute bas	is, any nonne	etwork tele	vision progra	<u>n</u>
log in block 2. 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: Terr sys. 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. Column 4: Give the other station is 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). Column 6: State the times when the substitute program was carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for october 19, 1976. 1. TITLE OF PROGRAM 2.		broadcast by a distant stat	tion?					YES	X NO
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. Column 4: Give the call sign of the station broadcasting the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 5: Give the month and day when your system carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permi		Note: If your answer is "No	", leave the	rest of this pag	je blank. If your answer is	"Yes," you m	ust comple	ete the progra	m
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 "NBAB Basketball: Tõers 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. Column 5: Give the broadcast 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). Column 6: State the times when the substitute program was carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for The state regram was subst									
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. Column 4: Give the broadcast 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "577." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "R" if the listed program was permitted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for the Stated program was substituted for programming tha				-	4. K		::		_
Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. UBSTITUTE PROGRAM WHEN SUBSTITUTE CARRIAGE OCCURRED 7. REASON FOR DELETION 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S LOCATION 6. TIMES AND DAY FROM — TO		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	ice, please of every no distant stat gulations, o ies like "mo	add additional i nnetwork telev ion and that yo r authorizations	rows to the tables. ision program ("substitute ur cable system substitute s. See page (v) of the gen	program") th d for the prog eral instructio	at, during f gramming ons for furtl	the accounting of another sta her informatio	g ation n.
first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect on October 19, 1976. SUBSTITUTE PROGRAM WHEN SUBSTITUTE CARRIAGE OCCURRED 7. REASON FOR DELETION 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S CALL SIGN 4. STATION'S LOCATION 5. MONTH 6. TIMES AND DAY FROM — TO		Column 2: If the program Column 3: Give the call Column 4: Give the broat the case of Mexican or Can	n was broad sign of the s adcast station adian station	station broadca on's location (th ons, if any, the	nsting the substitute progra ne community to which the community with which the	m. station is lice station is ide	ntified).		
Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. WHEN SUBSTITUTE PROGRAM 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S CALL SIGN 4. STATION'S LOCATION 5. MONTH 6. TIMES		first. Example: for May 7 giv Column 6: State the time to the nearest five minutes.	ve "5/7." es when the	e substitute pro	gram was carried by your	cable system	. List the t	imes accurate	
WHEN SUBSTITUTE SUBSTITUTE PROGRAM WHEN SUBSTITUTE 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S Yes or No CALL SIGN 4. STATION'S LOCATION Model FROM To		Column 7: Enter the lett to delete under FCC rules a was substituted for program	and regulation in the second regulation in the second second second second second second second second second s	ons in effect du	iring the accounting period	; enter the le	tter "P" if t	he listed prog	
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES Yes or No CALL SIGN 4. STATION'S LOCATION AND DAY FROM TO		s	UBSTITUT	E PROGRAM					
NA Image: second se		1. TITLE OF PROGRAM			4. STATION'S LOCATION				DELETION
		N/A						_	
			+						
Image: second			+	+					
			<u> </u>						
Image: section of the section of th			+						
Image: second			+						
Image: sector of the sector			+						
			+						
Image: second			+						
Image: state in the state			+						
Image: state stat			+						
Image: state									
			 						
			_						
			_						
			_						
			<u></u>						
			L						
								_	
								_	

Accounting Period:	2022/02	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Riverside Telecom, LLC	SI	STEM ID# 63572
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Entral 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 mount, see	,985.13
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 \$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. 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 the 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	nis six-month	52.00 0.00
	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 \$137,1 1. Base amount under statutory formula \$263,800.00 2. Enter amount of gross receipts from space K	00)	52.00
	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 less than \$527, 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	600)	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	0.00	
	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)	52.00 15.00 \$	67.00
	TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 EFT Trace # or TRANSACTION ID # Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo	of Copyrights.	01.00

Accounting Period:	2022/02	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Riverside Telecom, LLC	SYSTEM ID# 63572
M 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	28 159
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	Name Mitchell Maier Telephone	(608) 886-8210
	Address 525 Junction Rd (Number, street, rural route, apartment, or suite number) Madison, WI 53593 (City, town, state, zip) Email Finance@tdstelecom.com Fax (optional	
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as own in line 1 of space B. 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)] 	ystem as identified
	Typed or printed name: Sharon V. Tisdale Title: Assistant Treasurer (Title of official position held in corporation or partnership) Doto: Expression 17, 2023	
	Date: February 17, 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 it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

ounting Period: 2022/02	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
erside Telecom, LLC	6357
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? X NO	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below. \$ Name Name Mailing Address Mailing Address	
II INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	0
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	<u>v</u>
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
	Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	Interest Assessmer
Line 1 Enter the amount of late payment or underpayment	Interest Assessmer
Line 1 Enter the amount of late payment or underpayment	Interest Assessmer
Line 1 Enter the amount of late payment or underpayment	Interest Assessmer
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	Interest Assessmer

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.