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				
08/29/2023	\$ 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	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
	Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
	20231 Barcode Data Filing Period (optional - see instructions)
Accounting Period	
В	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner	List any other name or names under which the owner conducts the business of the cable system.
	If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
	Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
	Cogeco US (Penn), 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, ural route, apartment, or suite number)
	Quincy, MA 02169 (City, town, state, zip)
С	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
C	names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1 IDENTIFICATION OF CABLE SYSTEM: 1 Cogeco US, LLC
	MAILING ADDRESS OF CABLE SYSTEM:
	107 1/2 B Pleasant Ave.
	(Number, street, rural route, apartment, or suite number) Kingwood, WV 26537
	(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 sufficiency of the fling, a determination that would be made by a court of law.

	LEGAL NAME OF COMPER OF CARLE OVICE.	FORM SA1-2E. F					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTE					
	Cogeco US (Penn), LLC						
	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rule						
D	"a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single						
U	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					
	as the "first community." Please use it as the first community on all future filings.						
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the						
Area	identified city.						
Served	identified city.						
	CITY OR TOWN	STATE					
First	Town Of Tunnelton	WV					
Community	Town Of Albright	WV					
	City Of Kingwood	WV					
	Town Of Terra Alta	W					
Add Rows as Necessary							
	County Of Preston	w					
	Town Of Masontown	wv					
	Town Of Newburg	WV					
	Town Of Reedsville	WV					
	County Of Monongalia Uninc Area Of Masontown	WV					
	County Of Monorigana Office Area Of Masontown						
	County Of Monongalia	<mark></mark>					

Accounting Period: 2023/1
FORM SA1-2E, PAGE 2

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 14054

Cogeco US (Penn), LLC

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	DCK 1		BLOCK	(2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
Service to first set	1309	39.99	Res Expanded	1,126	\$ 69.99
 Service to additional set(s) 			Digital Value	57	\$ 69.98
 FM radio (if separate rate) 			Digital Plus	-	\$122.97
Motel, hotel		39.99			
Commercial	53	39.99			
Converter					
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.

	BLOCK 2				
CATEGORY OF SERVICE	CATEGORY OF SERVICE	RATE			
Continuing Services: Installation: Non-residential					
• Pay cable	1.99 - 19.99	Motel, hotel			
 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) 	40.00	Other services:			
• FM radio (if separate rate)		Reconnect	40.00		
Converter		Disconnect			
		Outlet relocation	40.00		
	Move to new address				

Accounting Period: 2023/1 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

PRIMARY TRANSMITTERS: TELEVISION

SYSTEM ID# 14054

Cogeco US (Penn), LLC

G

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.

Add Rows as Necessary

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KDKA	2	N	PITTSBURGH, PA
WDTV	5	N	WESTON, WV
WNPB	8	E	MORGANTOWN, WV
WPGH	10	N	PITTSBURGH, PA
WPNT	9	<u>l</u>	PITTSBURGH, PA
WPXI	11	N	PITTSBURGH, PA
WTAE	4	N	PITTSBURGH, PA
WVFX	16	N	CLARKSBURGH, WV
WINP	12	<u>l</u>	PITTSBURGH, PA
WQED	15	E	PITTSBURGH, PA

Accounting Period: 2023/1 FORM SA	-2E. PAGE 4
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LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Cogeco US (Penn), LLC

14054

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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	od: 2023/1 LEGAL NAME OF OWNER OF	CABLE SYS	STEM:				1 01	SYSTEM ID:			
Name	Cogeco US (Penn), LL		· · - · · ·					14054			
ı		_	-	ENT AND PROGRAM LO	_	tion, that y	our cable sy	stem carried on a			
Substitute	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.										
Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE										
Special	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program										
atement and rogram Log	broadcast by a distant sta		X								
	-				YES						
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer is	s "Yes," you r	nust com	olete the pro	gram			
	log in block 2.										
	2. LOG OF SUBSTITUT			rate line. Use abbreviations	whorever n	occiblo if	thoir moonir	ag ic			
	clear. If you need more spa				wherever po	ossibic, ii	uicii ilicailii	ig is			
	Column 1: Give the title period, was broadcast by a under certain FCC rules, ro Do not use general catego	e of every no a distant sta egulations, o ries like "mo	onnetwork tele tion and that y or authorizatio	evision program ("substitute your cable system substitut yns. See page (v) of the ger ketball." List specific progra	ed for the pro neral instructi	ogrammin ions for fu	g of another rther inform	station ation.			
	"NBA Basketball: 76ers vs		dcast live ent	ter "Yes." Otherwise enter "	'No "						
			•	casting the substitute progr							
	Column 4: Give the bro	adcast stati	on's location (the community to which the	e station is lic		the FCC or	, in			
	the case of Mexican or Ca										
	first. Example: for May 7 g	,	when your sy	stem carried the substitute	program. Us	se numera	als, with the	month			
			e substitute pr	rogram was carried by your	cable syster	n. List the	times accu	rately			
	to the nearest five minutes	. Example:		ried by a system from 6:01							
	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									
	was substituted for prograf	mming that	your system w					logialli			
	effect on October 19, 1976	•	your system w					logiam			
	. •	•	your system w		er FCC rules	and regu	lations in	Togram			
	effect on October 19, 1976	S		as permitted to delete und	er FCC rules	and regu	lations in				
	effect on October 19, 1976	S. SUBSTITUT	YOUR SYSTEM W TE PROGRAM 3. STATION'S	as permitted to delete und	er FCC rules	and regu N SUBST AGE OCO	lations in				
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	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	vas permitted to delete und	WHE CARRI 5. MONTH	N SUBSTAGE OCC	ITUTE CURRED TIMES	7. REASON FC			
	effect on October 19, 1976	UBSTITUT	E PROGRAM 3. STATION'S	vas permitted to delete und	WHE CARRI 5. MONTH	N SUBSTAGE OCC	ITUTE CURRED TIMES	7. REASON FC			
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	2023/1	FORM S	SA1-2E. PAGE							
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Cogeco US (Penn), LLC	•	SYSTEM II 1405							
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pall amounts (gross receipts) paid to your cable system by subscribers for the system's secondary (as identified in space E) during the accounting period. For a further explanation of how to compupage (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.	transmission service te this amount, see								
	IMPORTANT: You must complete a statement in space P concerning gross receipts.		ross receipts)							
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equ • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,65 epage (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 accounting period is \$52.00	pay for this six-mon								
	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 lines 1 and 2									
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than	\$137,100)								
	1. Base amount under statutory formula	00.00								
	2. Enter amount of gross receipts from space K									
	3. Subtract line 2 from line 1									
	4. Enter the amount of gross receipts from space K									
	5. Enter the amount from line 3									
	6. Subtract line 5 from line 4									
	7. Multiply line 6 by .005 (enter figure here)									
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00							
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8									
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than	ı \$527,600)								
	1. Enter the amount of gross receipts from space K	35.00								
	2. Base amount under statutory formula	00.00								
	3. Subtract line 2 from line 1	35.00								
	4. Multiply line 3 by .01	1,323.35								
	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	····· <u>\$</u>	2,642.35							
	FILING FEE AND TOTAL REMITTANCE DUE									
Filing Fee and otal Remittance	Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	2,642.35								
Due	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	\$	2,662.35							
	Important: Your remittance must be in the form of an electronic payment payable to the See page i of the general instructions in the paper SA1-2 form for more in		ghts!							

Accounting Period:	2023/1					FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OV Cogeco US (Per	NNER OF CABLE SYSTEM:				SYSTEM ID# 14054
M Channels	to its subscribers, 1. Enter the total r system carried to 2. Enter the total r on which the cab	and (2) the cable system's to	tal number of the cable	which the cable system carried te activated channels during the ac	counting period.	255
N Individual to Be Contacted		BE CONTACTED IF FURTHI		TION IS NEEDED (Identify an inc	dividual to whom	
for Further Information	Name	Patrick Bratton			Telephon	e 617-786-8800
		2 Batterymarch Park, (Number, street, rural route, apartm		ber)		
		Quincy, MA 02169 (City, town, state, zip) pbratton@breez	eline com		Fay (ontional)	
	Liliali	pbratton@breez	emie.com		Tax (optional)	
0	CERTIFICATION (1	This statement of account mu	st be certified	and signed in accordance with C	Copyright Office regulations)
Certification	• I, the undersigned	d, hereby certify that (Check or	ne, <i>but only one</i>	e, of the boxes.)		
	(Owner	other than corporation or pa	artnership) I aı	m the owner of the cable system a	as identified in line 1 of spac	e B; or
		of owner other than corpora ne 1 of space B and that the o		rship) I am the duly authorized ag orporation or partnership; or	ent of the owner of the cabl	e system as identified
	in lin	ne 1 of space B.	, ,) or a partner (if a partnership) of tl		·
		and correct to the best of my		under penalty of law that all state formation, and belief, and are mad		ein
			X /s/	Patrick Bratton		_
				onic signature on the line above to e using an "/s/ signature" (e.g., /s/ J		
		Typed or printed	name: Pa	trick Bratton		
		Title: (Title of off		ancial Officer I in corporation or partnership)		
		Date:			August 29, 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.

counting Period: 2023/1	FORM SA1-2E. PAGE 8.
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
ogeco US (Penn), LLC	14054
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.	P Special Statement Concerning Gross 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	
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	-
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@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 th 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.