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 COPYRIGH	IT OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>
General instructions are located in the first tab of this workbook	8/23/23	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
	RY THIS STATEMENT. (VY	(VV/(Period))	

A	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		2023/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20231 Barcode Data Filing Period (optional - see instructions)
Accounting Period		
		Instructions:
В		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
		TDS Broadband Service LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		Baja Broadband
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		525 Junction Rd. (Number, street, rural route, apartment, or sulte number)
		Madison, WI 53717-2152 (City, town, state, zjp)
	INSTR	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
С		s 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:
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
	_	
		(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.

Accounting Period	2023/1	
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#
Name		25787
D	TDS Broadband Service LLC Instructions: List each separate community served by the cable system. A "a separate and distinct community or municipal entity (including unincor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community as the "first community." Please use it as the first community on all futur. Note: Entities and properties such as hotels, apartments, condominiums,	"community" is the same as a "community unit" as defined in FCC rules: porated communities within unincorporated areas and including single, that you list will serve as a form of system identification hereafter known e filings.
Area Served	identified city.	
	CITY OR TOWN	STATE
First	Fort Stockton	TX
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM							A1-2E. PAGI
Name	TDS Broadband Service								2578
Е	SECONDARY TRANSMISSION In General: The information in s					, transmission o	onvice of th	a cabla	
-	system, that is, the retransmission	•		-	-				
Secondary	about other services (including p								
Transmission	last day of the accounting period								
Service: Sub- scribers and	Number of Subscribers: Both down by categories of secondar						-		
Rates	each category by counting the n								
	separately for the particular serv					•	,		
	Rate: Give the standard rate of	-	-	•			-		
	unit in which it is generally billed category, but do not include disc				y stanuar		s wiu iir a p		
	Block 1: In the left-hand block	in space E, th	e form li	sts the categorie		•			
	systems most commonly provide							0,	
	that applies to your system. Not categories, that person or entity			-		-			
	subscriber who pays extra for ca				• •	0,	•		
	first set" and would be counted of								
	Block 2: If your cable system printed in block 1 (for example, t	-							
	with the number of subscribers a								
	sufficient.		•			•			
	BL	OCK 1 NO. OF	. 1				BLOCK	C2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATI	EGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential:								
	 Service to first set 		435	25.00					
	 Service to additional set(s) 								
	 FM radio (if separate rate) 								
	Motel, hotel		39	17.97/mo.					
	Commercial								
	Converter Residential		622	¢6/Ma					
	Non-residential		633	\$6/Mo.					
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	SIONS: RATES					
F	In General: Space F calls for ra								
•	not covered in space E, that is, t service for a single fee. There a					,	,		
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the ur		usually	billed. If any rat	es are ch	arged on a varia	able per-pro	ogram basis,	
Secondary Transmissions:	enter only the letters "PP" in the Block 1: Give the standard rate		ho coble	evetom for oor	h of the c	nnliaghla convic	oc listod		
Rates	Block 2: List any services that							were not	
	listed in block 1 and for which a				-				
	brief (two- or three-word) descrip	otion and includ	le the ra	te for each.					
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SERV		RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services:			tion: Non-resi	dential				
	•Pay cable	8.00-15.00		el, hotel		<u> </u>			
	Pay cable—add'l channel		_	nmercial		\$0 - \$50			
	 Fire protection Burglar protection 		-	v cable v cable-add'l cha	annal				
	•Burgiar protection		· ·	protection	annei				
	• First set	\$0 - \$50		glar protection					
	Additional set(s)	\$0 - \$50 \$0 - \$50		services:					
	• FM radio (if separate rate)	÷• •••		connect		0-25			
	• Converter			connect					
	· · · /		• Dis			19.98-39.96			

Name	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM
	TDS Broadband Serv	vice LLC		28
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable syste	entify every television station (including tr em during the accounting period, except (in effect on June 24, 1981, permitting the	(1) stations carried only on a part	t-time basis under
Primary	Ű,	in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61		
ansmitters: Felevision	substitute program basis, a	as explained in the next paragraph. s: With respect to any distant stations car		
elevision	basis under specific FCC r	ules, regulations, or authorizations:		
	 Do not list the station her station was carried only or 	re in space G—but do list it in space I (the n a substitute basis.	e Special Statement and Program	n Log)—if the
	• List the station here, and	also in space I, if the station was carried		
	Column 1: List each statio	on concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pro	ogram services such as HBO, ES	SPN, etc. Identify each
	multicast stream associate "WETA-2" as the same on	d with a station according to its over-the-a the form.	air designation. For example, rep	port multistream
	Column 2: Give the chann	el number the FCC assigned to the televi	ision station for broadcasting ove	er the air in its community
	Column 3: Indicate in each	VRC is channel 4 in Washington, D.C. h case whether the station is a network st	•	
		ering the letter "N" (for network), "N-M" (fo), "E" (for noncommercial educational), or		
	For the meaning of these to	erms, see page (iv) of the general instruc	tions in the paper SA1-2 form.	,
		on of each station. For U.S. stations, list the adian stations, if any, give the name of the	•	-
		, , , ,	,	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KMID	2.1	N	Midland, TX
	KMID-DT2	2.2	N-M	Midland, TX
Rows as Necessary	KMID-DT3	2.3	N-M	Midland, TX
	KMID-DT4	2.4	N-M	Midland, TX
	KOSA	7.1	N	Odessa, TX
	KOSA-DT2	7.2	N-M	Odessa, TX
	KOSA-DT3	7.3	N-M	Odessa, TX
	KOSA-DT3 KOSA-DT4	7.3 7.4	N-M N-M	Odessa, TX Odessa, TX
	KOSA-DT4	7.4	N-M	Odessa, TX
	KOSA-DT4 KPEJ	7.4 24.1	N-M N	Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2	7.4 24.1 24.2	N-M N N-M	Odessa, TX Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3	7.4 24.1 24.2 24.3	N-M N N-M N-M	Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES	7.4 24.1 24.2 24.3 9.1	N-M N N-M N-M N	Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES KWES-DT2	7.4 24.1 24.2 24.3 9.1 9.2	N-M N N-M N-M N N-M	Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES KWES-DT2 KWES-DT3	7.4 24.1 24.2 24.3 9.1 9.2 9.3	N-M N N-M N-M N-M N-M N-M	Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES KWES-DT2 KWES-DT3 KWES-DT4	7.4 24.1 24.2 24.3 9.1 9.2 9.3 9.4	N-M N N-M N-M N-M N-M N-M N-M	Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES KWES-DT2 KWES-DT3 KWES-DT4 KWES-DT5	7.4 24.1 24.2 24.3 9.1 9.2 9.3 9.4 9.5	N-M N N-M N-M N-M N-M N-M N-M N-M	Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES KWES-DT2 KWES-DT3 KWES-DT4 KWES-DT5 KWES-DT7	7.4 24.1 24.2 24.3 9.1 9.2 9.3 9.3 9.4 9.5 9.7	N-M N N-M N-M N-M N-M N-M N-M N-M N-M	Odessa, TX Odessa, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES KWES-DT2 KWES-DT4 KWES-DT5 KWES-DT7 KUPB	7.4 24.1 24.2 24.3 9.1 9.2 9.3 9.4 9.5 9.7 18.1	N-M N N-M N-M N-M N-M N-M N-M N-M N-M I	Odessa, TX Odessa, TX Midland, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES KWES-DT2 KWES-DT3 KWES-DT4 KWES-DT5 KWES-DT7 KUPB KUPB-DT2	7.4 24.1 24.2 24.3 9.1 9.2 9.3 9.4 9.5 9.7 18.1 18.2	N-M N N-M N-M N-M N-M N-M N-M N-M N-M I I I-M	Odessa, TXOdessa, TXMidland, TXMidland, TX
	KOSA-DT4 KPEJ KPEJ-DT2 KPEJ-DT3 KWES KWES-DT2 KWES-DT4 KWES-DT4 KWES-DT5 KWES-DT7 KUPB KUPB-DT2 KENW	7.4 24.1 24.2 24.3 9.1 9.2 9.3 9.3 9.4 9.5 9.5 9.7 18.1 18.2 3	N-M N N-M N-M N-M N-M N-M N-M N-M N-M I I I-M	Odessa, TX Odessa, TX

Name	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM
Name	TDS Broadband Serv	vice LLC		25
	PRIMARY TRANSMITTERS:	TELEVISION		
<u>^</u>		entify every television station (including	· · · · ·	,
G		em during the accounting period, excep		
During and		in effect on June 24, 1981, permitting t		
Primary ransmitters:		(e)(2) and (4), or 76.63 (referring to 76.6 as explained in the next paragraph.	(e)(2) and $(4))];$ and (2) certain stati	ons carried on a
Television		s: With respect to any distant stations of	arried by your cable system on a sub	stitute program
relevision		rules, regulations, or authorizations:		situte program
		re in space G—but do list it in space I (i	the Special Statement and Program L	og)—if the
	station was carried only or			<i></i>
	 List the station here, and 	also in space I, if the station was carried	d both on a substitute basis and also	on some other
		on concerning substitute basis stations		
		on's call sign. <i>Do not</i> report origination		
		ed with a station according to its over-th	e-air designation. For example, repo	t multistream
	"WETA-2" as the same on			h in in 14
		nel number the FCC assigned to the tele	evision station for broadcasting over t	ne air in its community
		VRC is channel 4 in Washington, D.C. h case whether the station is a network	station an independent station or a	noncommercial
		ering the letter "N" (for network), "N-M"	<i>, , , , , , , , , ,</i>	
), "E" (for noncommercial educational),		
				nai mulucast).
	For the meaning of these t	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis	uctions in the paper SA1-2 form.	
	For the meaning of these t Column 4: Give the location	erms, see page (iv) of the general instr	uctions in the paper SA1-2 form. t the community to which the station i	s licensed by the
	For the meaning of these t Column 4: Give the location	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis	uctions in the paper SA1-2 form. t the community to which the station i	s licensed by the
	For the meaning of these t Column 4: Give the location	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis	uctions in the paper SA1-2 form. t the community to which the station i	s licensed by the
	For the meaning of these t Column 4: Give the location	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis	uctions in the paper SA1-2 form. t the community to which the station i	s licensed by the
	For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis adian stations, if any, give the name of	uctions in the paper SA1-2 form. t the community to which the station i the community with which the station	s licensed by the is identified.
	For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis adian stations, if any, give the name of	uctions in the paper SA1-2 form. t the community to which the station i the community with which the station	s licensed by the is identified.
	For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis adian stations, if any, give the name of	uctions in the paper SA1-2 form. t the community to which the station i the community with which the station	s licensed by the is identified.
	For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis adian stations, if any, give the name of	uctions in the paper SA1-2 form. t the community to which the station i the community with which the station	s licensed by the is identified.
	For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis adian stations, if any, give the name of	uctions in the paper SA1-2 form. t the community to which the station i the community with which the station	s licensed by the is identified.
	For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis adian stations, if any, give the name of	uctions in the paper SA1-2 form. t the community to which the station i the community with which the station	s licensed by the is identified.
	For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis adian stations, if any, give the name of	uctions in the paper SA1-2 form. t the community to which the station i the community with which the station	s licensed by the is identified.
	For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	erms, see page (iv) of the general instr on of each station. For U.S. stations, lis adian stations, if any, give the name of	uctions in the paper SA1-2 form. t the community to which the station i the community with which the station	s licensed by the is identified.

Accounting Period: 2023/1					FOF	RM SA1-2E. PAGE 4.
LEGAL NAME OF OWNER OF CABLE SYSTEM:						SYSTEM ID#
TDS Broadband Service LLC						25787
PRIMARY TRANSMITTERS: RADIO						
In General: List every radio station carried on a separate and discr	ret	te basis and list t	hose FM stati	ons carr	ied on an	H
all-band basis whose signals were generally receivable by your cal	ble	e system during t	he accounting	g period.		
 Special Instructions Concerning All-Band FM Carriage: Under the receivable if (1) it is carried by the system whenever it is received at on the basis of monitoring, to be received at the headend, with the For detailed information about the Copyright Office regulations on paper SA1-2 form. 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 process signal, indicate this by placing a check mark in the "S/D" column. 	at f sy th	the system's hea /stem's FM anter is point, see pag	idend, and (2) nna, during ce e (v) of the ge	it can b rtain sta eneral ins	e expected, ted intervals. structions in the.	Primary Transmitters: Radio
Column 4: Give the station's location (the community to which the	he	station is license	ed by the FCC	cor, in th	ne case of	
Mexican or Canadian stations, if any, the community with which the			-			
			—			1
CALL SIGN AM or FM S/D LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	4
N/A				L		

Accounting Perio	d: 2023/1						FORM	1 SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	TDS Broadband Servic	ce LLC						25787
Substitute	SUBSTITUTE CARRIAGI In General: In space I, ident substitute basis during the a explanation of the programm	ify <i>every no</i> ccounting p	<i>nnetwork televi</i> eriod, under sp	<i>sion program,</i> broadcast t ecific present and former	oy a <i>distant</i> s FCC rules, re	egulations, or au	thorization	ns. For a further
Carriage:	1. SPECIAL STATEMEN	-			0			
Special	 During the accounting per 				asis anv no	nnetwork televi	sion nroar	am
Statement and		-		n ourry, on a substitute b	abio, any no			
Program Log	broadcast by a distant sta	uon?					YES	X NO
	Note: If your answer is "No	", leave the	rest of this pa	ge blank. If your answer	is "Yes," you	u must complete	e the prog	ram
	log in block 2.							
	2. LOG OF SUBSTITUTE	E PROGRA	AMS					
	In General: List each subst				ns wherever	possible, if thei	r meaning	l is
	clear. If you need more spa				ta programa")	that during the	+i	
	Column 1: Give the title period, was broadcast by a							
	under certain FCC rules, re		,	,		0 0		
	Do not use general categor	ies like "mo						
	"NBA Basketball: 76ers vs.							
	Column 2: If the program Column 3: Give the call		,					
	Column 4: Give the broa					licensed by the	FCC or i	in
	the case of Mexican or Car							
	Column 5: Give the mor		when your sy	stem carried the substitu	te program.	Use numerals,	with the m	nonth
	first. Example: for May 7 giv							4 - I
	Column 6: State the time to the nearest five minutes.							ately
	stated as "6:00-6:30 p.m."	Example.	a program oan		/1. TO p.m. to	0.20.00 p.m. 0		
	Column 7: Enter the lett							
	to delete under FCC rules a							ogram
	was substituted for program effect on October 19, 1976.	•	your system w	as permitted to delete ur	ider FCC rui	es and regulation	ons in	
					WH	EN SUBSTITU	JTE	
	SI	JBSTITUT	E PROGRAM		CARF	RIAGE OCCUF	RRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		ES TO	DELETION
						_		
					-			
					-			
						_		
						_		
						_		
						- <u>-</u> -		
							••••••	
					-	_		
						_		
						_		
						_		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	/STEN
Name	TDS Broadband Service LLC		25
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En 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 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.	nission service amount, se),787.8
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$ • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,80(
	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 th accounting period is \$52.00	iis six-month	
	Line 1. Royalty fee for accounting period	\$	52.0
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.0
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	\$	52.0
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,10	00)	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	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		0.0
	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 \$527,6	500)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	-		
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
Filing Fee and Total Remittance	-	52.00	
-	FILING FEE AND TOTAL REMITTANCE DUE		
Total Remittance		52.00	67.0
Total Remittance		52.00 15.00	67.0

Accounting Period:	2023/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: TDS Broadband Service LLC	SYSTEM ID# 25787
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 and nonbroadcast services	21 161
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 Zaneta Lewis Telephone (60	08) 664-8517
	Address 525 Junction Rd (Number, street, rural route, apartment, or suite number) Madison, WI 53717 (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; or (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 (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner 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)] (Is U.S.C., Section 1001(1986)] (Is use the an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) 	em as identified
	Typed or printed name: Sharon V. Tisdale	
	(Title of official position held in corporation or partnership) Date: August 28, 2023	

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

ounting Period:	2023/1	FORM SA1-2E. PAGE
AL NAME OF OW	NER OF CABLE SYSTEM:	SYSTEM ID
6 Broadband	Service LLC	2578
The Satellite H lowing sentence "In dete service scribers For more inform located in the p During the acc made by satell X NO	TATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS Iome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the folce: remining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include substandard amounts collected from subscribers receiving secondary transmissions pursuant to section 119." mation on when to exclude these amounts, see the note on page (vii) of the general instructions baper SA1-2 form. ounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions ite carriers to satellite dish owners? er the total here and list the satellite carrier(s) below. \$	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address	Name Mailing Address	
	ASSESSMENT	
For an explana	plete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. ation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessmen
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