This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

## SA1-2E Short Form

|                      |   |   |  | Return completed workbook<br>by email to:  |
|----------------------|---|---|--|--|
| -                    | ENT OF ACCOUNT  | FOR COPYRIGH                            | T OFFICE USE ONLY  | by email to.   |
|                      | ry Transmissions by   | DATE RECEIVED                           | AMOUNT   | coplicsoa@copyright.gov  |
| -                    | ms (Short Form)   | 11/1/23                                 | \$   | For additional information,<br>contact the U.S. Copyright<br>Office Licensing Division at: |
|                      | of this workbook  |   | ALLOCATION NUMBER  | Tel: (202) 707-8150  |
|                      |   |   |  |  |
| Α                    | ACCOUNTING PERIOD COVERED   | BY THIS STATEMENT: (Y)                  | YYY/(Period))  |  |
|                      | 2023/1  | Period 1 = January 1 - June 30          | Period 2 = July 1 - December 31                                |  |
|                      |   | Barcode Data Filing Period (optional -  | see instructions)  |  |
| Accounting<br>Period |   |   |  |  |
| В                    | Instructions:<br>Give the full legal name of the owner of th<br>title of the subsidiary, not that of the pare | -                                       | diary of another corporation, give the full cor                | porate   |
| Owner                | List any other name or names under whic   | th the owner conducts the business of t | he cable system.   |  |
|                      | If there were different owners during the single statement of account and royalty for                         |   | the last day of the accounting period should s<br>ting period. | ubmit a  |

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 SYST | ſEM |
|---|-----|
| CableSouth Media III. LLC                         |     |

| BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)  |
|---|
|   |
| MAILING ADDRESS OF OWNER OF CABLE SYSTEM                  |
| 1615 Poydras St. Suite 650                                |
| (Number, street, rural route, apartment, or suite number) |
| New Orleans, LA 70112                                     |

(City, town, state, zip code)

|        |   | (City, town, state, zip)   |
|--------|---|--|
| С      |   | RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these<br>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 | 4 | IDENTIFICATION OF CABLE SYSTEM:  |
|        | 1 | Swyft Connect  |
|        |   | MAILING ADDRESS OF CABLE SYSTEM:   |
|        | 2 | (Number, street, rura) route, apartment, or suite number)  |

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  |
|----------------------|---|---|
| Name                 | CableSouth Media III, LLC   | 298   |
| D                    | Instructions: List each separate community served by the cable system. A "commur<br>"a separate and distinct community or municipal entity (including unincorporated co<br>discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you<br>as the "first community." Please use it as the first community on all future filings. | ommunities within unincorporated areas and including sing<br>ist will serve as a form of system identification hereafter kn |
| Area<br>Served       | Note: Entities and properties such as hotels, apartments, condominiums, or mobile identified city.  | home parks should be reported in parentheses below the  |
|                      | CITY OR TOWN  | STATE   |
| First                | Columbia  | MS  |
| Community            | Foxworth  | MS  |
|                      | Marion County   | MS  |
| dd Rows as Necessary |   |   |
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|                        | LEGAL NAME OF OWNER OF C  | ARI E SVSTEM      |  |  |              |                    |             | FORM SA1       | TEM ID |
|------------------------|---|-------------------|--|--|--------------|--------------------|-------------|----------------|--------|
| Name                   | CableSouth Media III, LI  |                   |  |  |              |                    |             | 010            | 2986   |
|                        |   | 20                |  |  |              |                    |             |                |        |
| Е                      | SECONDARY TRANSMISSION  |                   |  |  |              |                    |             |                |        |
|                        | In General: The information in s  | •                 |  | -  |              |                    |             |                |        |
| Secondary              | system, that is, the retransmission about other services (including p   |                   |  |  |              |                    |             |                |        |
| Transmission           | last day of the accounting period   | , , ,             | ,  |  | ,            |                    |             |                |        |
| Service: Sub-          | Number of Subscribers: Both   |                   |  |  |              |                    | le system,  | broken         |        |
| scribers and           | down by categories of secondary   | ,                 |  | 0 / 1  |              |                    |             |                |        |
| Rates                  | each category by counting the n   | •                 |  | 0,0  |              |                    |             | charged        |        |
|                        | separately for the particular serv<br>Rate: Give the standard rate c  |                   |  |  |              |                    |             | e and the      |        |
|                        | unit in which it is generally billed  | -                 | -  | •  |              |                    | -           |                |        |
|                        | category, but do not include disc   | •                 | ,  |  | ,            |                    |             |                |        |
|                        | Block 1: In the left-hand block   | •                 |  | •  |              | •                  |             |                |        |
|                        | systems most commonly provide   |                   |  |  |              |                    |             |                |        |
|                        | that applies to your system. <b>Not</b> categories, that person or entity   |                   |  | 0  |              | 0                  |             |                |        |
|                        | subscriber who pays extra for ca  |                   |  |  |              |                    | •           |                |        |
|                        | 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.  | and rates, in the | e right-h  | and block. A tw  | o- or three  | e-word description | on of the s | ervice is      |        |
|                        |   | OCK 1             |  |  |              |                    | BLOC        | < 2            |        |
|                        |   | NO. OF            |  |  |              |                    |             | NO. OF         |        |
|                        | CATEGORY OF SERVICE   | SUBSCRIB          | ERS  | RATE   | CATE         | EGORY OF SEF       | RVICE       | SUBSCRIBERS    | RAT    |
|                        | Residential:  |                   | 054  | 00.05  |              |                    |             |                |        |
|                        | Service to first set  |                   | 351  | 32.85  |              |                    |             |                |        |
|                        | <ul> <li>Service to additional set(s)</li> </ul>  |                   |  |  |              |                    |             |                |        |
|                        | • FM radio (if separate rate)   |                   |  |  |              |                    |             |                |        |
|                        | Motel, hotel  |                   |  |  |              |                    |             |                |        |
|                        | Commercial  |                   |  |  |              |                    |             |                |        |
|                        | Converter   |                   |  |  |              |                    |             |                |        |
|                        | • Residential   |                   |  |  |              |                    |             |                |        |
|                        | Non-residential   |                   |  |  |              |                    |             |                |        |
|                        | SERVICES OTHER THAN SEC   |                   | NSMIS  |  |              |                    |             |                |        |
| -                      | <b>In General:</b> Space F calls for rat  |                   |  |  |              | l your cable syst  | em's servi  | ces that were  |        |
| F                      | not covered in space E, that is, t  | •                 | ,  |  | •            | • •                |             |                |        |
|                        | service for a single fee. There ar  | •                 |  |  | 0            |                    | • • • •     |                |        |
| Services<br>Other Than | furnished at cost or (2) services   |                   |  |  |              |                    |             |                |        |
| Secondary              | amount of the charge and the un<br>enter only the letters "PP" in the   |                   | usually  | billed. If any ra  | les are cha  | arged on a varia   | bie per-pro | ogram basis,   |        |
| ransmissions:          | Block 1: Give the standard rat  |                   | he cable   | e system for ea  | ch of the a  | pplicable servic   | es listed.  |                |        |
| Rates                  | Block 2: List any services that   |                   |  |  |              |                    |             |                |        |
|                        | listed in block 1 and for which a   |                   |  |  | shed. List t | these other serv   | ces in the  | form of a      |        |
|                        | brief (two- or three-word) descrip  | otion and includ  | e the ra   | ite for each.  |              |                    | 1           |                |        |
|                        |   | BLO               |  |  |              |                    |             | BLOCK 2        |        |
|                        |   |                   |  | GORY OF SER  |              | RATE               | CATEG       | ORY OF SERVICE | RAT    |
|                        | CATEGORY OF SERVICE   | RATE              |  |  |              |                    |             |                |        |
|                        | Continuing Services:  | RATE              |  | ation: Non-res   | dential      |                    |             |                |        |
|                        | Continuing Services:<br>• Pay cable   | RATE              | • Mo   | tel, hotel   | idential     |                    |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel  | RATE              | • Mo<br>• Coi  | tel, hotel<br>mmercial   | Idential     |                    |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection   | RATE              | • Mo<br>• Col<br>• Pay   | tel, hotel<br>mmercial<br>/ cable  |              |                    |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>•Burglar protection  | RATE              | • Mo<br>• Cor<br>• Pay<br>• Pay  | tel, hotel<br>mmercial<br>/ cable<br>/ cable-add'l ch  |              |                    |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'I channel<br>• Fire protection<br>•Burglar protection<br>Installation: Residential   |                   | • Mo<br>• Col<br>• Pay<br>• Pay<br>• Fire  | tel, hotel<br>mmercial<br>/ cable<br>/ cable-add'l ch<br>e protection  |              |                    |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>•Burglar protection  | 150.00            | • Mo<br>• Cor<br>• Pay<br>• Pay<br>• Fire<br>• Bur                                     | tel, hotel<br>mmercial<br>/ cable<br>/ cable-add'l ch<br>e protection<br>rglar protection                        |              |                    |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'I channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)                                  |                   | • Mo<br>• Col<br>• Pay<br>• Pay<br>• Fire<br>• Bur<br><b>Other</b> :                   | tel, hotel<br>mmercial<br>/ cable<br>/ cable-add'l ch<br>protection<br>glar protection<br>services:              |              |                    |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'I channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set   |                   | • Mo<br>• Col<br>• Pay<br>• Pay<br>• Fire<br>• Bur<br><b>Other</b> :                   | tel, hotel<br>mmercial<br>/ cable<br>/ cable-add'l ch<br>e protection<br>rglar protection                        |              | 150.00             |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'I channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)                                  |                   | • Mo<br>• Col<br>• Pay<br>• Pay<br>• Fire<br>• Bur<br>• Bur<br>• Re                    | tel, hotel<br>mmercial<br>/ cable<br>/ cable-add'l ch<br>protection<br>glar protection<br>services:              |              | 150.00             |             |                |        |
|                        | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)<br>• FM radio (if separate rate) | 150.00            | • Mo<br>• Col<br>• Pay<br>• Pay<br>• Fire<br>• Bur<br>• Bur<br>• Bur<br>• Rer<br>• Dis | tel, hotel<br>mmercial<br>y cable<br>y cable-add'l ch<br>e protection<br>glar protection<br>services:<br>connect |              | 150.00             |             |                |        |

| ccounting Period:                           |  |  |   | FORM SA1-2E. PAGE 3.  |  |
|---|--|--|---|---|--|
| Name  | LEGAL NAME OF OWNER OF   |  |   | SYSTEM ID#<br>29865   |  |
|   | CableSouth Media III,  |  |   | 23003   |  |
| G<br>Primary<br>Transmitters:<br>Television | PRIMARY TRANSMITTERS:<br>In General: In space G, ide<br>carried by your cable syste<br>FCC rules and regulations<br>76.59(d)(2) and (4), 76.61(4<br>substitute program basis, a<br>Substitute Basis Stations<br>basis under specific FCC rr<br>• Do not list the station here<br>station was carried only on<br>• List the station here, and<br>basis. For further informatic<br>Column 1: List each station<br>multicast stream associated<br>"WETA-2" as the same on<br>f license. For example, W<br>Column 3: Indicate in each<br>educational station, by ente<br>(for independent multicast).<br>For the meaning of these to | TELEVISION<br>entify every television station (including<br>m during the accounting period, <i>excep</i><br>in effect on June 24, 1981, permitting t<br>e)(2) and (4), or 76.63 (referring to 76.6<br>s explained in the next paragraph.<br>: With respect to any distant stations c<br>ules, regulations, or authorizations:<br>e in space G—but do list it in space I (f<br>a substitute basis.<br>also in space I, if the station was carrie<br>on concerning substitute basis stations<br>n's call sign. <i>Do not</i> report origination<br>d with a station according to its over-th | t (1) stations carried only on a part-tin<br>the carriage of certain network progra<br>51(e)(2) and (4))]; and (2) certain stati<br>arried by your cable system on a sub<br>the Special Statement and Program L<br>ed both on a substitute basis and also<br>, see page (v) of the general instruction<br>program services such as HBO, ESP<br>e-air designation. For example, report<br>evision station for broadcasting over t<br>station, an independent station, or a<br>(for network multicast), "I" (for independent<br>or "E-M" (for noncommercial education<br>uctions in the paper SA1-2 form. | me basis under<br>ms [sections<br>ions carried on a<br>stitute program<br>.og)—if the<br>on some other<br>ons.<br>N, etc. Identify each<br>rt multistream<br>he air in its community<br>noncommercial<br>undent), "I-M"<br>onal multicast). |  |
|   |  | dian stations, if any, give the name of t  |   |   |  |
|   |  |  |   |   |  |
|   | WLBT   | 2  | N   | Jackson, MS   |  |
|   | WDAM   | 3  | N   | Laurel, MS  |  |
| ows as Necessary                            | WDAM   | 4  | N   | Laurel, MS  |  |
|   | WHPM   | 5  | <b>I</b>  | Hattiesburg, MS   |  |
|   | WHLT   | 6  | N   | Hattiesburg, MS   |  |
|   | WMAH   | 7  | E   | Hattiesburg, MS   |  |
|   | WHPM   | 9  | N   | Hattiesburg, MS   |  |
|   | WGN  | 19   | l   | Chicago, IL   |  |
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| EGAL NAME O   |   |  | YSIEM:  |  |   |   |  | SYSTEM I<br>298                  |
|---|---|--|---|--|---|---|--|----------------------------------|
|   | t every radio s   | station ca   | arried on a separate and discr<br>nerally receivable by your cab  |  |   |   |  | н                                |
| eceivable if (1)<br>on the basis of<br>For detailed info<br>paper SA1-2 for<br>Column 1: lo<br>Column 2: S<br>Column 3: If<br>signal, indicate<br>Column 4: G | it is carried by<br>monitoring, to<br>prmation about<br>rm.<br>dentify the call<br>tate whether to<br>the radio stat<br>this by placing<br>sive the station | y the sys<br>be recein<br>the Co<br>sign of e<br>the static<br>ion's sign<br>g a chech<br>n's locati | I-Band FM Carriage: Under C<br>tem whenever it is received a<br>ved at the headend, with the<br>pyright Office regulations on t<br>each station carried.<br>on is AM or FM.<br>nal was electronically process<br>(mark in the "S/D" column.<br>on (the community to which the<br>the community with which the | t the system's he<br>system's FM ante<br>this point, see pa<br>ed by the cable s<br>he station is licens | adend, and (2<br>enna, during c<br>ge (v) of the g<br>system as a se<br>sed by the FC | 2) it can<br>ertain st<br>jeneral in<br>eparate : | be expected,<br>ated intervals.<br>nstructions in the.<br>and discrete | Primary<br>Transmitters<br>Radio |
| CALL SIGN   | AM or FM  | S/D  | LOCATION OF STATION   | CALL SIGN  | AM or FM  | S/D   | LOCATION OF STATION  |                                  |
| 0.122 0.011   |   | 0,5  |   | 0.122 0.011  | 7 01 1 1  | 0.2   |  |                                  |
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| Accounting Peric             |  |  |   |  |  |   | FORM  | I SA1-2E. PAGE 5  |
|------------------------------|--|--|---|--|--|---|---|---|
| Name                         | LEGAL NAME OF OWNER OF<br>CableSouth Media III, I  |  | STEM:   |  |  |   |   | SYSTEM ID#<br>29865   |
|                              |  |  |   |  | _  |   |   |   |
| Substitute                   | SUBSTITUTE CARRIAGI<br>In General: In space I, ident<br>substitute basis during the a<br>explanation of the programm   | ify every no   | nnetwork televi<br>period, under sp   | <i>sion program,</i> broadcast by<br>pecific present and former F  | a <i>distant</i> sta<br>CC rules, reg  | ulations, or a  | uthorizatior  | ns. For a further   |
| Carriage:                    | 1. SPECIAL STATEMEN  |  |   |  | Je general in  |   | ie paper e.   |   |
| Special                      | <ul> <li>During the accounting per</li> </ul>  |  |   |  | sis, any noni  | network telev   | ision progr   | am  |
| Statement and<br>Program Log | broadcast by a distant sta   | tion?  |   |  | ·  |   | YES   | × NO  |
|                              | <b>Note:</b> If your answer is "No   | " leave the  | e rest of this pa   | ge blank If your answer is   | s "Yes " vou i   | must complet  | -   | -   |
|                              | log in block 2.  | ,  |   | g  | ····, <b>,</b> ····  |   |   |   |
|                              | period, was broadcast by a<br>under certain FCC rules, re<br>Do not use general categor<br>"NBA Basketball: 76ers vs.<br><b>Column 2:</b> If the prograr<br><b>Column 3:</b> Give the call<br><b>Column 4:</b> Give the broa<br>the case of Mexican or Car<br><b>Column 5:</b> Give the mor<br>first. Example: for May 7 gir<br><b>Column 6:</b> State the tim<br>to the nearest five minutes.<br>stated as "6:00–6:30 p.m." | ace, please<br>of every no<br>distant sta<br>egulations, i<br>ries like "mo<br>Bulls."<br>m was broa<br>sign of the<br>adcast stati<br>natian stati<br>nath and day<br>ve "5/7."<br>es when th<br>Example:<br>er "R" if the<br>and regulat<br>nming that | add additional<br>onnetwork tele-<br>tion and that y<br>or authorization<br>ovies" or "bask<br>dcast live, entr<br>station broadc<br>on's location (f<br>ons, if any, the<br>v when your sy<br>e substitute pri<br>a program carr<br>e listed program<br>ions in effect d | rows to the tables.<br>vision program ("substitute<br>our cable system substitut<br>ns. See page (v) of the gen<br>etball." List specific progra<br>er "Yes." Otherwise enter "<br>asting the substitute progra-<br>the community to which the<br>stem carried the substitute<br>ogram was carried by your<br>ried by a system from 6:01<br>n was substituted for progra<br>uring the accounting perio | e program") t<br>red for the pro-<br>neral instruct<br>in titles, for o<br>"No."<br>ram.<br>e station is li-<br>e station is id<br>program. U<br>r cable syste<br>:15 p.m. to for<br>ramming that<br>id; enter the | hat, during th<br>ogramming o<br>ions for furth<br>example, "I Lo<br>censed by the<br>lentified).<br>se numerals,<br>m. List the tir<br>5:28:30 p.m. s<br>t your system<br>letter "P" if th | e accounti<br>f another s<br>er informat<br>ove Lucy"<br>e FCC or, i<br>with the m<br>mes accura<br>should be<br>n was <i>requi</i><br>e listed pro | ng<br>station<br>tion.<br>or<br>in<br>nonth<br>ately<br><i>ired</i> |
|                              |  |  |   |  |  | N SUBSTIT   |   | 7. REASON FOR   |
|                              | 1. TITLE OF PROGRAM  | 2. LIVE?   | E PROGRAM<br>3. STATION'S   |  | 5. MONTH   | 6. TIN  |   | DELETION  |
|                              |  | Yes or No  | CALL SIGN   | 4. STATION'S LOCATION  | AND DAY  | FROM —  | то  |   |
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| Accounting Period:                        | <b>2023/1</b> FORM SA1-2E. F  | PAGE 6       |
|---|---|--------------|
| Name                                      | LEGAL NAME OF OWNER OF CABLE SYSTEM:     SYSTE       CableSouth Media III, LLC     2  | M ID#<br>986 |
| K<br>Gross Receipts                       | GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total c all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se page (vii) of the general instructions located in the paper SA1-2 form         Gross receipts from subscribers for secondary transmission service(s)       #### Compute the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.       #################################### | 16           |
|   | COPYRIGHT ROYALTY FEE   |              |
| Copyright<br>Royalty Fee                  | Instructions: To compute the royalty fee you owe<br>Complete block 1, block 2, or block 3.<br>Use block 1 if the amount of gross receipts in space K is \$137,100 or less<br>Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,80(<br>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(<br>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 this six-month accounting period is \$52.00   |              |
|   | Line 1. Royalty fee for accounting period \$ 52.  | 00           |
|   | Line 2. Interest charge. Enter the amount from line 4, space Q, page 8  | 00           |
|   | Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 \$ 52.   | 00           |
|   | BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)  |              |
|   | 1. Base amount under statutory formula  |              |
|   | 2. Enter amount of gross receipts from space K  |              |
|   | 3. Subtract line 2 from line 1  |              |
|   | 4. Enter the amount of gross receipts from space K  |              |
|   | 5. Enter the amount from line 3   |              |
|   | 6. Subtract line 5 from line 4  |              |
|   | 7. Multiply line 6 by .005 (enter figure here)  |              |
|   |   | 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 \$527,600)  |              |
|   | 1. Enter the amount of gross receipts from space K  |              |
|   | 2. Base amount under statutory formula  |              |
|   | 3. Subtract line 2 from line 1  |              |
|   | 4. Multiply line 3 by .01   |              |
|   | 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,319.00   |              |
|   | 6. Interest charge. Enter the amount from line 4, space Q, page 8   |              |
|   | 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6   |              |
|   | FILING FEE AND TOTAL REMITTANCE DUE   |              |
|   |   |              |
| Filing Fee and<br>Total Remittance<br>Due | 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$ 52.00  |              |
| Due                                       | 2. Filing Fee (See the instructions for more information on filing fee calculations)  |              |
|   | 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 67.   | 00           |
|   | EFT Trace # or TRANSACTION ID # 2791FML1  |              |
|   | Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.  |              |

| Accounting Period:                 | 2023/1   |   |  |  |  |  | FORM SA1-2E. PAGE 7                                 |
|------------------------------------|--|---|--|--|--|--|---|
| Name                               | LEGAL NAME OF<br>CableSouth M  | OWNER OF CABLE SYSTEM:<br>Iedia III, LLC  |  |  |  |  | SYSTEM ID#<br>29865                                 |
| M<br>Channels                      | <ol> <li>to its subscriber</li> <li>1. Enter the tota<br/>system carried</li> <li>2. Enter the tota<br/>on which the comparison</li> </ol> | You must give (1) the number of<br>rs, and (2) the cable system's<br>al number of channels on whic<br>d television broadcast stations<br>al number of activated channe<br>cable system carried television<br>cast services  | total num<br>th the cab<br>to the cab<br>the cab                       | ber of activated channels of | luring the   | accounting period.   | ns<br>  |
| N<br>Individual to<br>Be Contacted |  | D BE CONTACTED IF FURTI<br>about this statement of accou  |  | ORMATION IS NEEDED (Id   | dentify an   | individual to whom   |   |
| for Further<br>Information         | Name   | William Welsh   |  |  |  | Telephon   | e 504-272-7998 x5020                                |
|                                    | Address  | 1615 Poydras St. Su<br>(Number, street, rural route, apart<br>New Orleans, LA 70<br>(City, town, state, zip)  | tment, or su   | lite number)   |  |  |   |
|                                    | Email  | regulatory@sw   | yftconne   | ct.com   |  | Fax (optional)   |   |
| O<br>Certification                 | I, the undersign     (Owned)     (Agen     in     X     (Offici     in     I have examined)  | I (This statement of account m<br>red, hereby certify that (Check of<br>er other than corporation or p<br>at of owner other than corpora-<br>line 1 of space B and that the of<br>cer or partner) I am an officer (<br>line 1 of space B.<br>d the statement of account and<br>te, and correct to the best of my<br>ion 1001(1986)] | ation or pa<br>ation or pa<br>owner is no<br>if a corpor-<br>hereby de | ily one , of the boxes.)<br><b>ip)</b> I am the owner of the cab<br><b>artnership)</b> I am the duly au<br>ot a corporation or partnersh<br>ration) or a partner (if a partn<br>eclare under penalty of law th   | le system<br>thorized ag<br>ip; or<br>ership) of i | as identified in line 1 of space<br>gent of the owner of the cabl<br>the legal entity identified as o<br>ements of fact contained here | e system as identified<br>owner of the cable system |
|                                    |  | Typed or printed  | Enter sigr<br>I name:  | /s/ William Welsh<br>electronic signature on the lin<br>nature using an "/s/ signature<br>William Welsh  |  |  |   |
|                                    |  | Title:<br>(Title of o<br>Date:  |  | Accounting<br>ion held in corporation or partner   | ship)  | 11/01/2023   |   |

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 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 telephon 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 i 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 th 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

| unting Period: 2023/1  | FORM SA1-2E. PAGE                      |
|--|--|
| AL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM I                               |
| eSouth Media III, LLC  | 2986                                   |
| <ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:         <ul> <li>"In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."</li> </ul> </li> <li>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.</li> <li>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?</li> <li>X NO</li> </ul> | Concerning Gross<br>Receipts Exclusion |
| YES. Enter the total here and list the satellite carrier(s) below  |  |
| Name     Mailing Address   |  |
|  |  |
| INTEREST ASSESSMENT  |  |
|  |  |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.  | Q                                      |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.  | Q                                      |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.   | Q<br>Interest Assessment               |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.<br>Line 1 Enter the amount of late payment or underpayment   | Q                                      |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.<br>Line 1 Enter the amount of late payment or underpayment   | Interest Assessme                      |
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| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment  | Interest Assessme                      |
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| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.<br>Line 1 Enter the amount of late payment or underpayment   | Lays                                   |
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