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

STATEM	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
for Seconda	ry Transmissions by	DATE RECEIVED	AMOUNT	- coplicsoa@loc.gov
General instru	ems (Short Form) actions are located of this workbook	08/24/2023	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: ((YYY/(Period))	
	2023/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20231	Barcode Data Filing Period (option	al - see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of t title of the subsidiary, not that of the par		bsidiary of another corporation, give the full c	corporate
Owner	List any other name or names under which	ch the owner conducts the business o	f the cable system.	
	If there were different owners during the single statement of account and royalty f		n the last day of the accounting period should unting period.	d submit a
	Check here if this is the system's first filin	g. If not, enter the system's ID numb	er assigned by the Licensing Division.	30424
	LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTE	Μ	
	Fidelity Cablevision, LLC			
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFEREN	NT)	
	CoBridge Broadband, LLC dba Fide	elity Communications		
	MAILING ADDRESS OF OWNER OF 64 N Clark	CABLE SYSTEM		
	(Number, street, rural route, apartment, or suite n	umber)		
	City, town, state, zip)			
С	INSTRUCTIONS: In line 1, give any busin names already appear in space B. In line			5
System	IDENTIFICATION OF CABLE SYSTEM:			
	1			
	MAILING ADDRESS OF CABLE SYSTEM	l:		
	2 (Number, street, rural route, apartment, or suite n	umber)		
	(City, town, state, zip code)			
Privacy Act Notic	e: Section 111 of title 17 of the United States Code au	thorizes the Copyright Offce to collect t	he personally identifying information (PII) reque	sted on this

Privacy Act Notice: Section 111 of title 117 of the United States Code aution/zes the Copyinght 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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
Name	Fidelity Cablevision, LLC	304
D	Instructions: List each separate community served by the cable system. A "communit" "a separate and distinct community or municipal entity (including unincorporated com discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list as the "first community." Please use it as the first community on all future filings.	nmunities within unincorporated areas and including single t will serve as a form of system identification hereafter kno
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho identified city.	ome parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First Community	Maumelle North Little Rock	AR AR
dd Rows as Necessary		
		การการการการการการการการการการการการการก

	LEGAL NAME OF OWNER OF C								TEM ID
Name	Fidelity Cablevision, LL							515	3042
		0							
Е	SECONDARY TRANSMISSION								
-	In General: The information in s system, that is, the retransmission	-		-		•			
Secondary	about other services (including p								
Transmission	last day of the accounting period	l (June 30 or D	ecembe	er 31, as the ca	ase may be	e).		-	
Service: Sub-	Number of Subscribers: Both	•							
scribers and Rates	down by categories of secondary each category by counting the n	•				•			
Nates	separately for the particular serv					•	•	scharged	
	Rate: Give the standard rate c					•	,	ge and the	
	unit in which it is generally billed				any standa	rd rate variatio	ns within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				rios of cos	ondony transm		on that apple	
	systems most commonly provide			-					
	that applies to your system. Not								
	categories, that person or entity					•			
	subscriber who pays extra for ca					d in the count u	nder "Servi	ce to the	
	first set" and would be counted or Block 2: If your cable system I					service that an	e different f	from those	
	printed in block 1 (for example, t	-		•					
	with the number of subscribers a	and rates, in the	e right-h	nand block. A t	wo- or thre	e-word descrip	tion of the	service is	
	sufficient.						DI OOI	(0	
	BLC	DCK 1 NO. OF	. 1		-		BLOCK	K 2 NO. OF	1
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential:								
	 Service to first set 		300	67.53					
	 Service to additional set(s) 								
	 FM radio (if separate rate) 								
	Motel, hotel		2	9.30					
	Commercial		1	20.00					
	Converter								
	Residential								
	Non-residential								
								1	
	SERVICES OTHER THAN SEC In General: Space F calls for rate					ll vour cable sy	etom's son	vices that were	
F	not covered in space E, that is, t								
	service for a single fee. There ar								
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the un enter only the letters "PP" in the		usually	billed. If any ra	ates are ch	narged on a vai	riable per-p	rogram basis,	
Secondary ransmissions:	Block 1: Give the standard rat		the cabl	e system for ea	ach of the	applicable serv	ices listed.		
Rates	Block 2: List any services that							were not	
	listed in block 1 and for which a				ished. List	these other se	rvices in the	e form of a	
	brief (two- or three-word) description and include the rate for each.								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER		RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services:			ation: Non-res	idential		_ .		
	• Pay cable	PP		tel, hotel		\$80/hr	Tier		67.7
	• Pay cable—add'l channel			mmercial		\$80/hr	Tier	.	17.2
	Fire protection		-	/ cable			Digital		12.0
	•Burglar protection		-	/ cable-add'l ch	nannel		Digital	IIEr	7.9
	Installation: Residential	¢00/h		e protection					
	First set	\$80/hr		glar protection					
	Additional set(s) EM radio (if separate rate)			services: connect		¢OF			
	 FM radio (if separate rate) Converter 					\$25			
	- Converter			connect tlet relocation					
					~~~				
	1		- 1010	ve to new addr	633				1

	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTE
Name	Fidelity Cablevision, I			3
	PRIMARY TRANSMITTERS:			
G Primary ransmitters: Television	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, a: <b>Substitute Basis Stations</b> basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on t <b>Column 2:</b> Give the channe of license. For example, W <b>Column 3:</b> Indicate in each educational station, by ente (for independent multicast), For the meaning of these te <b>Column 4:</b> Give the location	also in space I, if the station was carried on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination pr d with a station according to its over-the-	(1) stations carried only on a part- e carriage of certain network progra 1(e)(2) and (4))]; and (2) certain stat rried by your cable system on a su- be Special Statement and Program I both on a substitute basis and als see page (v) of the general instruc- rogram services such as HBO, ES -air designation. For example, rep- vision station for broadcasting over station, an independent station, or for network multicast), "I" (for indep r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station	-time basis under rams [sections rations carried on a ubstitute program n Log)—if the so on some other ctions. SPN, etc. Identify each bort multistream er the air in its community a noncommercial pendent), "I-M" tional multicast). n is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KARK-TV	32	N	LITTLE ROCK, AR
	KARK-DT2	32.2	I-M	LITTLE ROCK, AR
Rows as Necessary	KARK-DT3	32.3	I-M	LITTLE ROCK, AR
-	KARK-DT4	32.4	I-M	LITTLE ROCK, AR
	KARZ-TV	28	l	LITTLE ROCK, AR
	KARZ-DT2	28.2	I-M	LITTLE ROCK, AR
	KASN	34	I	PINE BLUFF, AR
	KASN-DT2	34.2	I-M	PINE BLUFF, AR
	ΚΑΤV	22	Ν	LITTLE ROCK, AR
	KATV-DT2	22.2	I-M	LITTLE ROCK, AR
	KATV-DT3	22.3	I-M	LITTLE ROCK, AR
	KATV-DT4	22.4	I-M	LITTLE ROCK, AR
	KETS	7	E	LITTLE ROCK, AR
	ККАР	36	I	LITTLE ROCK, AR
	KLRT	30	l	LITTLE ROCK, AR
	KLRT-DT2	30.2	I-M	LITTLE ROCK, AR
	KMYA-DT	18	<u>I</u>	LITTLE ROCK, AR
	ктну	12	Ν	LITTLE ROCK, AR
			-	
	KVTN-TV	24		PINE BLUFF, AR
	KVTN-TV	24	I	PINE BLUFF, AR
	KVTN-TV			PINE BLUFF, AR
		24	I	PINE BLUFF, AR

Fidelity Cab	FOWNER OF C		I G I EIVI.					SYSTEM
	t every radio s	tation ca	rried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf isignal, indicate Column 4: G	it is carried by monitoring, to prmation about m. lentify the call tate whether to the radio stati this by placing sive the station	the sys be receivent the Co sign of e he statio on's sign a check a's location	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on the each station carried. n is AM or FM. hal was electronically processes (mark in the "S/D" column. on (the community to which the the community with which the	: the system's he system's FM ante his point, see pag ed by the cable s e station is licens	adend, and (2 nna, during ce ge (v) of the ge ystem as a se sed by the FC0	) it can b ertain sta eneral ir parate a	be expected, ated intervals. Istructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		5,0		J. LE JION		5,5		

Accounting Perio	od: 2023/1						FOR	M SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF		STEM:					SYSTEM ID#
	Fidelity Cablevision, L	LC						30424
_	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	ENT AND PROGRAM LC	G			
I	In General: In space I, ident substitute basis during the a	accounting p	period, under sp	pecific present and former F	CC rules, reg	ulations, o	r authorizatio	ns. For a further
Substitute	explanation of the programn				he general ins	structions i	n the paper S	SA1-2 form.
Carriage: Special	1. SPECIAL STATEMEN					4		
Statement and	<ul> <li>During the accounting pe</li> </ul>		ur cable syste	m carry, on a substitute ba	isis, any nonr	network te	· •	
Program Log	broadcast by a distant sta						YES	X NO
	Note: If your answer is "No log in block 2.	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you r	must comp	plete the prog	gram
	period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. <b>Column 2:</b> If the prograt <b>Column 3:</b> Give the call <b>Column 4:</b> Give the bro the case of Mexican or Cat <b>Column 5:</b> Give the mon first. Example: for May 7 gi <b>Column 6:</b> State the tim to the nearest five minutes stated as "6:00–6:30 p.m."	titute progr ace, please of every n a distant sta egulations, ries like "m . Bulls." m was broa sign of the adcast stat nadian stat nth and day ive "5/7." nes when th . Example: ter "R" if the and regulat mming that	am on a separ e add additiona onnetwork tele ation and that y or authorizatio ovies" or "bask adcast live, ent station broadd ion's location ( ions, if any, the y when your sy he substitute pr a program car e listed program tions in effect of	I rows to the tables. evision program ("substitut your cable system substitu- your cable system substitu- your cable system substitu- your cable system substitu- regate system from 6:0° m was substituted for prog during the accounting period	e program") ti ted for the pro neral instruct am titles, for e "No." ram. e station is lid e program. Us r cable syste 1:15 p.m. to 6 ramming that od; enter the l	hat, during ogramming ions for fu example, " censed by lentified). se numera m. List the 3:28:30 p.n t your syst letter "P" if	the account g of another rther informa I Love Lucy" the FCC or, ils, with the r times accur h. should be em was <i>requ</i> the listed pr	ting station ition. or in nonth ately <i>iired</i>
	SUBSTITUTE PROGRAM					N SUBST AGE OCC		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	6. FROM	TIMES — TO	DELETION
							_	
							_	
							_	
							_	
								"
								"
								"
								"
							_	
							_	
							_	
							_	
							_	
							_	

Accounting Period:	2023/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Fidelity Cablevision, LLC	S	YSTEM ID# 30424
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 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 amount, see	2,822.00 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> 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 \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800	
	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-mon	
	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		0.00
	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 \$137,1	00)	
	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)		
	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 \$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	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	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)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!

Accounting Period:	2023/1			FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF ON Fidelity Cablevi	WNER OF CABLE SYSTEM: sion, LLC		SYSTEM ID# 30424
<b>M</b> Channels	to its subscribers, 1. Enter the total r system carried to 2. Enter the total r on which the cat	and (2) the cable system's to number of channels on which elevision broadcast stations . number of activated channels ble system carried television		ations 27 316
N Individual to Be Contacted		BE CONTACTED IF FURTH bout this statement of accoun	ER INFORMATION IS NEEDED (Identify an individual to whom	
for Further Information	Name	Melinda Lahmann	Tel	lephone 573-468-1216
		64 N Clark (Number, street, rural route, apartr Sullivan, MO 63080 (City, town, state, zip) melinda.lahmar	n@fidelitycommunications.com Fax (optional)	
O Certification	I, the undersigned     (Owner     (Agent	d, hereby certify that (Check o • other than corporation or p of owner other than corpora	st be certified and signed in accordance with Copyright Office regula ne, <i>but only one</i> , of the boxes.) artnership) I am the owner of the cable system as identified in line 1 o tion or partnership) I am the duly authorized agent of the owner of th	of space B; or
	X (Office in lin • I have examined	er or partner) I am an officer (i ne 1 of space B. the statement of account and , and correct to the best of my	wner is not a corporation or partnership; or f a corporation) or a partner (if a partnership) of the legal entity identifie nereby declare under penalty of law that all statements of fact containe knowledge, information, and belief, and are made in good faith.	
			X /s/ Quynh Tran Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	
		Typed or printed Title: (Title of of	name: Quynh Tran Vice President & Treasurer Ictal position held in corporation or partnership)	
		Date:	August 23, 2023	

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	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
elity Cablevision, LLC	3042
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 fol- lowing 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 sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
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?	
YES. Enter the total here and list the satellite carrier(s) below	
Name     Name       Mailing Address     Mailing Address	
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
x	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	
x       days         Line 3 Multiply line 2 by the number of days late and enter the sum here       -         x 0.00274       -         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       \$	
x       days         Line 3 Multiply line 2 by the number of days late and enter the sum here       -         x 0.00274       -         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	
Line 3       Multiply line 2 by the number of days late and enter the sum here       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       -         k       - <td></td>	
x	
x	

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