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.

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SA1-2E Short Form

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Return completed workbook

STATEM	ENT	OF ACCOUNT	FOR COPYRIGH	by email to:		
		ansmissions by	DATE RECEIVED	AMOUNT		
Cable Syste General instru in the first tab	uctions	are located	8/29/23	\$ ALLOCATION NUMBER	coplicsoa@copyright.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150	
Α	ACCO		BY THIS STATEMENT: (Y) Period 1 = January 1 - June 30	YYY/(Period)) Period 2 = July 1 - December 31	-	
Accounting Period		2023/1	Barcode Data Filing Period (optional -			
		Instructions:				
В		Give the full legal name of the owner of th title of the subsidiary, not that of the pare		diary of another corporation, give the full c	orporate	
Owner		List any other name or names under which	h the owner conducts the business of t	he cable system.		
		If there were different owners during the single statement of account and royalty fe Check here if this is the system's first filing	e payment covering the entire account		submit a	
		LEGAL NAME OF OWNER/MAILING	G ADDRESS OF CABLE SYSTEM			
		Three River Communications, LLC				
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)		
		MAILING ADDRESS OF OWNER OF PO Box 66	CABLE SYSTEM			
		(Number, street, rural route, apartment, or suite nu	imber)			
		Lynch, NE 68746 (City, town, state, zip)				
С				ntify the business and operation of the system, if different from the address		
System		IDENTIFICATION OF CABLE SYSTEM:				
-	1					
		MAILING ADDRESS OF CABLE SYSTEM:				
	2	(Number, street, rural route, apartment, or suite nu	mber)			
		(City, town, state, zip code)				
		(,,,				
Privacy Act Notic	ce: Section	111 of title 17 of the United States Code aut	horizes the Copyright Offce to collect the	e personally identifying information (PII) reque	sted 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 suffciency of the fling, a determination that would be made by a court of law.

Name D	LEGAL NAME OF OWNER OF CABLE SYSTEM: Three River Communications, LLC Instructions: List each separate community served by the cable system. A "c "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future f Note: Entities and properties such as hotels, apartments, condominiums, or identified city. CITY OR TOWN AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN PIERCE	orated communities within unincorporated areas and including sing hat you list will serve as a form of system identification hereafter kn filings.
D Area Served First Community	Instructions: List each separate community served by the cable system. A "c "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future f Note: Entities and properties such as hotels, apartments, condominiums, or identified city. CITY OR TOWN AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	community" is the same as a "community unit" as defined in FCC ru parted communities within unincorporated areas and including sing hat you list will serve as a form of system identification hereafter kn filings. • mobile home parks should be reported in parentheses below the STATE NE NE NE NE NE NE NE NE NE N
D Area Served First Community	"a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future f Note: Entities and properties such as hotels, apartments, condominiums, or identified city. CITY OR TOWN AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	orated communities within unincorporated areas and including sing hat you list will serve as a form of system identification hereafter kn filings. • mobile home parks should be reported in parentheses below the STATE NE NE NE NE NE NE NE NE NE N
Area Served First Community	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future f Note: Entities and properties such as hotels, apartments, condominiums, or identified city. CITY OR TOWN AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	hat you list will serve as a form of system identification hereafter kn filings. • mobile home parks should be reported in parentheses below the • STATE • NE • NE
Area Served First Community	as the "first community." Please use it as the first community on all future f Note: Entities and properties such as hotels, apartments, condominiums, or identified city. CITY OR TOWN AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	filings. mobile home parks should be reported in parentheses below the model model
Area Served First Community	Note: Entities and properties such as hotels, apartments, condominiums, or identified city. CITY OR TOWN AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	mobile home parks should be reported in parentheses below the STATE STATE NE NE NE NE NE NE NE NE NE
Area Served First Community	identified city. CITY OR TOWN AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	STATE NE NE NE NE NE NE NE NE NE NE
Served First Community	CITY OR TOWN AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	NE NE NE NE NE NE NE
Community	AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	NE NE NE NE NE NE NE
Community	AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	NE NE NE NE NE NE NE
Community	AINSWORTH O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	NE NE NE NE NE NE NE
Community	O'NEILL NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	NE NE NE NE NE NE NE
-	NAPER SPRINGVIEW LYNCH VERDEL JOHNSTOWN	NE NE NE NE NE
dd Rows as Necessary	SPRINGVIEW LYNCH VERDEL JOHNSTOWN	NE NE NE NE
\dd Rows as Necessary	SPRINGVIEW LYNCH VERDEL JOHNSTOWN	NE NE NE NE
	LYNCH VERDEL JOHNSTOWN	NE NE NE
	VERDEL JOHNSTOWN	NE NE
	JOHNSTOWN	NE
	PIERCE	NE
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	LEGAL NAME OF OWNER OF C							FORM SA1-	TEM ID
Name								010	6388
	Three River Communica	ations, LLC							
Е	SECONDARY TRANSMISSION					, transmission a	anviaa af th		
-	In General: The information in s system, that is, the retransmission			U		•			
Secondary	about other services (including p								
Transmission	last day of the accounting period	(June 30 or D	ecember	31, as the ca	se may be).		•	
Service: Sub-	Number of Subscribers: Both	•							
scribers and Rates	down by categories of secondary each category by counting the nu								
Nates	separately for the particular servi							alaigeu	
	Rate: Give the standard rate c							and the	
	unit in which it is generally billed.	· · ·	,		ny standar	d rate variations	within a pa	articular rate	
	category, but do not include disc Block 1: In the left-hand block				ies of seco	ondary transmiss	sion service	that cable	
	systems most commonly provide	•		-		•			
	that applies to your system. Note								
	categories, that person or entity				••	• •	•		
	subscriber who pays extra for ca					in the count und	der "Service	e to the	
	first set" and would be counted o Block 2: If your cable system I					service that are	different fro	m those	
	printed in block 1 (for example, ti								
	with the number of subscribers a	nd rates, in the	e right-ha	and block. A tv	vo- or three	e-word description	on of the se	rvice is	
	sufficient.						BLOCK	2	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RATE
	Residential:		202	25 50	Essent			200	40.0
	Service to first set		383	35.50	Essent	iai new		299	40.9
	• Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter Residential								
	Non-residential								
	• Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	IONS: RATE	S				
F	In General: Space F calls for rat	e (not subscrib	er) infor	mation with re	spect to al	• •			
Г	not covered in space E, that is, the					,	,		
Services	service for a single fee. There are furnished at cost or (2) services of	•			•				
Other Than	amount of the charge and the un								
Secondary	enter only the letters "PP" in the								
Fransmissions:	Block 1: Give the standard rat Block 2: List any services that							ioro not	
Rates	-								
	listed in block 1 and for which a separate charge was made or established. List these other serve brief (two- or three-word) description and include the rate for each.								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		ORY OF SER	VICE	RATE	CATEGO	RY OF SERVICE	RATE
	Continuing Services:			tion: Non-res					
	• Pay cable		• Mot	el, hotel			Expand	ed	99.9
	- i ay cable		• Con	nmercial			Expand	ed New	####
	• Pay cable—add'l channel		1				Expand		
			• Pay	cable				ed Plus	####
	• Pay cable—add'l channel		-	cable cable-add'l ch	nannel			ed Plus ed Plus New	#### #####
	Pay cable—add'l channel Fire protection		• Pay		nannel			ed Plus New	####
	 Pay cable—add'l channel Fire protection Burglar protection 		• Pay • Fire	cable-add'l ch			Expand	ed Plus New Ie	#### #####
	 Pay cable—add'l channel Fire protection Burglar protection Installation: Residential 		• Pay • Fire • Burg	cable-add'l ch protection			Expand Suprem	ed Plus New le le New	#### ##### #####
	 Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set 		• Pay • Fire • Burg Other s	cable-add'l ch protection glar protection			Expand Suprem Suprem	ed Plus New le le New	#### #### #### 13.5
	 Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) 		• Pay • Fire • Burg Other s • Rec	cable-add'l ch protection glar protection ervices:			Expand Suprem Suprem Starz/Ei	ed Plus New le le New ncore	
	 Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 		• Pay • Fire • Burg Other s • Rec • Disc	cable-add'l cł protection glar protection ervices: onnect			Expand Suprem Suprem Starz/Ei HBO	ed Plus New le le New ncore me/TMC	#### #### 13.50 19.00

				FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTEM ID#
	Three River Commun	· ·		63888
G rimary smitters:	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(TELEVISION entify every television station (including m during the accounting period, except in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6 is explained in the next paragraph.	(1) stations carried only on a part- ne carriage of certain network progr	time basis under ams [sections
evision	basis under specific FCC rr • Do not list the station her station was carried only on • List the station here, and basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on	also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the the form.	he Special Statement and Program d both on a substitute basis and als see page (v) of the general instruct program services such as HBO, ESI e-air designation. For example, rep	Log)—if the o on some other tions. PN, etc. Identify each ort multistream
	of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast) For the meaning of these te Column 4: Give the location FCC. For Mexican or Cana	el number the FCC assigned to the tele /RC is channel 4 in Washington, D.C. n case whether the station is a network sering the letter "N" (for network), "N-M" (, "E" (for noncommercial educational), c erms, see page (iv) of the general instru- on of each station. For U.S. stations, list dian stations, if any, give the name of th	station, an independent station, or a for network multicast), "I" (for indep or "E-M" (for noncommercial educat ictions in the paper SA1-2 form. the community to which the station ne community with which the station	a noncommercial pendent), "I-M" ional multicast). I is licensed by the h is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KMNE-DT	7.1	E	BASSETT, NE
	KMNE-DT2	7.2	E-M	BASSETT, NE
vs as Necessary	KFXL-DT	51.1	N	LINCOLN, NE
as Necessary	KFXL-DT KSNB-DT	51.1 4.1	N N	
as Necessary				LINCOLN, NE
S Necessary	KSNB-DT	4.1	N	LINCOLN, NE SUPERIOR, NE
s Necessary	KSNB-DT KOLN-DT	4.1 10.1	N N	LINCOLN, NE SUPERIOR, NE LINCOLN, NE
as Necessary	KSNB-DT KOLN-DT KHGI-DT	4.1 10.1 13.1	N N	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE
as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN	4.1 10.1 13.1 35.1	N N N I	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE
as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
vs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE
rs as Necessary	KSNB-DT KOLN-DT KHGI-DT KNEN KYNE	4.1 10.1 13.1 35.1 17.1	N N N I E	LINCOLN, NE SUPERIOR, NE LINCOLN, NE KEARNEY, NE NORFOLK, NE OMAHA, NE

.EGAL NAME OF Three River								SYSTEM II
	Communic	auons	, LLC					638
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					Н
eceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If signal, indicate t Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stat this by placing ive the statior	y the sys be recein the consistence sign of e the static ion's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see pa ed by the cable s le station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st eneral ii eparate a	be expected, ated intervals. hstructions 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	
SALE OION		5,0				5,0		
						·		

Accounting Perio			TENA				FORM	
Name	LEGAL NAME OF OWNER OF Three River Communi							SYSTEM ID# 63888
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LO	DG			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programn	accounting p	eriod, under sp	ecific present and former l	CC rules, reg	ulations, or a	uthorizatio	ns. For a further
Carriage:	1. SPECIAL STATEMEN	-			U			
Special	 During the accounting period 	riod, did you	ur cable syster	n carry, on a substitute b	asis, any non	network telev	ision prog	ram
Statement and Program Log	broadcast by a distant sta	ation?					YES	X NO
rogiani 20g	Note: If your answer is "No	o" leave the	rest of this pa	ige blank. If your answer	s "Yes " vou	must complet	-	-
	log in block 2.	, 10010 110		go blank. Il your anower	o 100, jou	indet complet		jian
	period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. Column 2: If the prograt Column 3: Give the call Column 4: Give the broat the case of Mexican or Cat Column 5: Give the mon first. Example: for May 7 gi Column 6: State the time to the nearest five minutes	a distant stat egulations, c ries like "mo . Bulls." m was broad sign of the adcast statio nadian statio nth and day ive "5/7." nes when the . Example: a	tion and that yo or authorization ovies" or "bask dcast live, ente station broadc on's location (t ons, if any, the when your system e substitute pro-	ns. See page (v) of the ge etball." List specific progr er "Yes." Otherwise enter asting the substitute prog the community to which the community with which the stem carried the substitut ogram was carried by you	ted for the pr eneral instruct am titles, for o "No." ram. ne station is li e station is ic e program. U ur cable syste	ogramming o tions for furth example, "I L censed by th lentified). se numerals, m. List the tir	f another : er informa ove Lucy" e FCC or, with the n nes accura	station tion. or in nonth
	stated as "6:00–6:30 p.m." Column 7: Enter the left to delete under FCC rules was substituted for program	ter "R" if the and regulati	ions in effect d		od; enter the	letter "P" if th	e listed pr	
	Column 7: Enter the lett to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the and regulati mming that y).	ions in effect d your system w	uring the accounting peri as permitted to delete un	d; enter the der FCC rules	letter "P" if th s and regulati	e listed pro ons in UTE	ogram
	Column 7: Enter the lett to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUT 2. LIVE?	ions in effect d your system w E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARRI 5. MONTH	N SUBSTIT AGE OCCU	e listed proof	
	Column 7: Enter the lett to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the and regulati mming that y 5.	ions in effect d your system w	uring the accounting peri as permitted to delete un	d; enter the der FCC rules WHE CARRI	letter "P" if th s and regulati N SUBSTIT	e listed proof	ogram 7. REASON FC
	Column 7: Enter the lett to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUT 2. LIVE?	ions in effect d your system w E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARRI 5. MONTH	N SUBSTIT AGE OCCU	e listed proof	ogram 7. REASON FC
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	Column 7: Enter the lett to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUT 2. LIVE?	ions in effect d your system w E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARRI 5. MONTH	N SUBSTIT AGE OCCU	e listed proof	ogram 7. REASON FO
	Column 7: Enter the lett to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUT 2. LIVE?	ions in effect d your system w E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARRI 5. MONTH	N SUBSTIT AGE OCCU	e listed proof	ogram 7. REASON FC
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Accounting Period:	2023/1 FOR	M SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Three River Communications, LLC	SYSTEM ID# 63888
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the to all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission se (as identified in space E) during the accounting period. For a further explanation of how to compute this amount,	ital c ervice
	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	162,201.20
	IMPORTANT: You must complete a statement in space P concerning gross receipts. (Amount	of gross 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 equal to \$263,80(• 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.	
	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-m accounting period is \$52.00	nontł
	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	
	2. Enter amount of gross receipts from space K \$ 162,201.20	
	3. Subtract line 2 from line 1	
	4. Enter the amount of gross receipts from space K \$ 162,201.2	:0
	5. Enter the amount from line 3	0
	6. Subtract line 5 from line 4	0
	7. Multiply line 6 by .005 (enter figure here)	303.01
	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	303.01
	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	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	0
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0
	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 Due		
	2. Filing Fee (See the instructions for more information on filing fee calculations)	<u>0</u>
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	323.01
	EFT Trace # or TRANSACTION ID # 277G97VK	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyr See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more inform	

Accounting Period:	2023/1		FORM SA1-2E. PAGE 7.
Name		OWNER OF CABLE SYSTEM: communications, LLC	SYSTEM ID# 63888
M Channels	 to its subscriber Enter the tota system carried Enter the tota on which the o 	You must give (1) the number of channels on which the cable system carried television broadcast stations rs, and (2) the cable system's total number of activated channels during the accounting period. al number of channels on which the cable d television broadcast stations	3 7 215
N Individual to Be Contacted		O BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Steven Dorf Telephone	402-569-2666
	Address	PO Box 66 (Number, street, rural route, apartment, or suite number) Lynch, NE 68746 (City, town, state, zip)	
	Email	info@threeriver.net Fax (optional)	
O Certification	I, the undersign (Own (Agen in X (Offic in · I have examine	I (This statement of account must be certified and signed in accordance with Copyright Office regulations need, hereby certify that (Check one, <i>but only one</i> , of the boxes.) er other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space at of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s I line 1 of space B and that the owner is not a corporation or partnership; or cer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow I line 1 of space B. d the statement of account and hereby declare under penalty of law that all statements of fact contained hereir te, and correct to the best of my knowledge, information, and belief, and are made in good faith. ion 1001(1986)]	B; or system as identified /ner of the cable system
		X /s/ Steven Dorf 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 name: Steven Dorf	
		Title: General Manager (Title of official position held in corporation or partnership)	
		Date: 8/29/2023	

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 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

	FORM SA1-2E. PAGI
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
ee River Communications, LLC	638
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 Exclusio
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.	
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Name	
Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
· · · · · · · · · · · · · · · · · · ·	
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
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 0.00274	
x 0.00274	
x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here	
x 0.00274	_
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 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 \$ - (interest charge) * 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@copyright.gov.	
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 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 \$ - (interest charge) * 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@copyright.gov.	
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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	

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.