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.

8/17/2023

DATE RECEIVED

STATEMENT OF ACCOUNT

for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

SA1-2E Short Form

Return completed workbook by email to:

coplicsoa@copyright.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting Period		20231 Barcode Data Filing Period (optional - see instructions)
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		TDS Metrocom, LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		525 Junction Road (Number, street, rural route, apartment, or suite number)
		Madison, WI 53717 (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 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	
		TDS Telecom, Inc. MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)
Privacy Act Notic	e: Section	n 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 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 suffciency of the fling, a determination that would be made by a court of law.

Nerse	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
Name	TDS Metrocom, LLC	6379
D	Instructions: List each separate community served by the cable system. A "commu "a separate and distinct community or municipal entity (including unincorporated discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you	nity" is the same as a "community unit" as defined in FCC rules communities within unincorporated areas and including single,
Area Served	as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile identified city.	home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First Community	Coeur d'Alene	ID
Community		
Add Rows as Necessary		
,		

	LEGAL NAME OF OWNER OF O							FORM SA1	TEM II
Name	TDS Metrocom, LLC							010	6379
Е	SECONDARY TRANSMISSION								
-	In General: The information in system, that is, the retransmissi	•		0		•			
Secondary	about other services (including					•			
Transmission	last day of the accounting period	•				,			
Service: Sub-	Number of Subscribers: Bot	•					•		
scribers and Rates	down by categories of secondar each category by counting the r	•		•		•			
	separately for the particular service	vice at the rate	indicat	ed—not the nu	mber of se	ts receiving ser	vice).	-	
	Rate: Give the standard rate of	•						•	
	unit in which it is generally billed category, but do not include dise	· · ·		,		ird rate variation	ns within a	particular rate	
	Block 1: In the left-hand block					condary transmi	ission serv	vice that cable	
	systems most commonly provid							0,	
	that applies to your system. Not			-		-			
	categories, that person or entity subscriber who pays extra for ca					•			
	first set" and would be counted								
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, with the number of subscribers					•			
	sufficient.		e ngm-					301110013	
	BL	OCK 1					BLOC		
	CATEGORY OF SERVICE	NO. OF SUBSCRIBI		RATE	САТЕ	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RA
	Residential:	COBCONIDI		TVTE	0/11		(WIGE	COBCONIBEINO	
	 Service to first set 		1,199	\$25/mo					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		4	\$64/mo					
	Converter								
	Residential	•	1,199	\$8/Mo.					
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s				
F	In General: Space F calls for ra					all your cable sy	stem's sei	vices that were	
F	not covered in space E, that is,					•	•		
Services	service for a single fee. There a furnished at cost or (2) services								
Other Than	amount of the charge and the u	nit in which it is							
Secondary	enter only the letters "PP" in the		the eeb	la avatam far a	ach af tha		iana liatad		
ransmissions: Rates	Block 1: Give the standard ra Block 2: List any services tha			•					
	listed in block 1 and for which a	• •			-	-	•		
	brief (two- or three-word) descri	ption and inclue	de the r	ate for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER		RATE	CATEG	ORY OF SERVICE	RAT
	Continuing Services:			ation: Non-res	idential				
	 Pay cable Pay cable—add'l channel 	\$8.00-\$15.00		otel, hotel mmercial		\$0 - \$50.00			
	Fire protection			mmerciai y cable		φυ - φου.υυ			
	•Burglar protection			y cable-add'l cl	annel				
	Installation: Residential			e protection					
	• First set	\$0-\$50.00		rglar protection					
	 Additional set(s) 	••••••		services:					1
	1		• Po	connect		\$0-\$25.00			1
	 FM radio (if separate rate) 		-176	connect		+• +=•.••			
	FM radio (if separate rate)Converter			sconnect		<i></i>			
	,		• Dis			19.98-39.96			

	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:		SYSTEM
Name	TDS Metrocom, LLC			63
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ansmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, Substitute Basis Station basis under specific FCC • Do <i>not</i> list the station he station was carried <i>only</i> o • List the station here, and basis. For further informat Column 1: List each station multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, M	d also in space I, if the station was carried tion concerning substitute basis stations, on's call sign. <i>Do not</i> report origination p ed with a station according to its over-the n the form. nel number the FCC assigned to the tele WRC is channel 4 in Washington, D.C.	 (1) stations carried only on a particle (1) stations carried only on a particle carriage of certain network propriation (2) and (4))]; and (2) certain station and (2) certain statement and (2) certain statement and Programing (2) certain (2) certain statement and Programing (2) certain statement and Programing (2) certain statement and Programing (2) certain (2) certain statement and Programing (2) certain (2) certain statement and Programing (2) certain (2	rt-time basis under ograms [sections stations carried on a substitute program am Log)—if the also on some other uctions. ESPN, etc. Identify each eport multistream ver the air in its community
	educational station, by end (for independent multicast For the meaning of these Column 4: Give the locati	ch case whether the station is a network s tering the letter "N" (for network), "N-M" (t), "E" (for noncommercial educational), o terms, see page (iv) of the general instru- ion of each station. For U.S. stations, list adian stations, if any, give the name of th	for network multicast), "I" (for inde or "E-M" (for noncommercial educ uctions in the paper SA1-2 form. the community to which the station	ependent), "I-M" cational multicast). ion is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER 28.1	3. TYPE OF STATION	4. LOCATION OF STATION Spokane, WA
Rows as Necessary	KAYU	28.1	N	Spokane, WA
lows as Necessary	KAYU KAYU-DT2	28.1 28.2	N N-M	Spokane, WA Spokane, WA
ows as Necessary	KAYU KAYU-DT2 KCDT	28.1 28.2 26.1	N N-M E	Spokane, WA Spokane, WA Coeur d'Alene, ID
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2	28.1 28.2 26.1 26.2	N N-M E E-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Coeur d'Alene, ID
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3	28.1 28.2 26.1 26.2 26.3	N N-M E E-M E-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4	28.1 28.2 26.1 26.2 26.3 26.4	N N-M E E-M E-M E-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT5	28.1 28.2 26.1 26.2 26.3 26.4 26.5	N N-M E E-M E-M E-M E-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT5 KHQ	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1	N N-M E E-M E-M E-M E-M N	Spokane, WA Spokane, WA Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID Coeur d'Alene, ID Spokane, WA
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2	N N-M E E-M E-M E-M E-M N N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA Spokane, WA Spokane, WA
tows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM	28.1 28.2 26.1 26.2 26.3 26.3 26.4 26.5 6.1 6.1 6.2 2.1	N N-M E E-M E-M E-M E-M N N-M N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA Spokane, WA Spokane, WA Spokane, WA Spokane, WA
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2	N N-M E E-M E-M E-M E-M N N-M N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA Spokane, WA Spokane, WA Spokane, WA Spokane, WA Spokane, WA
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2 KREM-DT2	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2 2.3	N N-M E E-M E-M E-M E-M N N N-M N-M N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2 KREM-DT2 KREM-DT3 KREM-DT6	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2 2.3 2.6	N N-M E E-M E-M E-M E-M N N N-M N-M N-M N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA
tows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2 KREM-DT2 KREM-DT3 KREM-DT6 KXLY	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2 2.3 2.6 4.1	N N-M E E-M E-M E-M E-M N N N-M N N-M N-M N-M N-M N-M N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA
lows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2 KREM-DT2 KREM-DT3 KREM-DT6 KXLY KXLY-DT2	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2 2.3 2.6 4.1 4.2	N N-M E E-M E-M E-M N N N N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA
Rows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2 KREM-DT2 KREM-DT3 KREM-DT6 KXLY KXLY-DT2 KXLY-DT2	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2 2.3 2.6 4.1 4.2 4.3	N N-M E E-M E-M E-M E-M N N N N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2 KREM-DT2 KREM-DT3 KREM-DT6 KXLY KXLY-DT2 KXLY-DT2	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2 2.3 2.6 4.1 4.2 4.3 4.4	N N-M E E-M E-M E-M E-M E-M N E-M N N-M N-M N-M N-M N-M N-M N-M N-M N-M	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA
Rows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2 KREM-DT2 KREM-DT3 KREM-DT6 KXLY KXLY-DT2 KXLY-DT2 KXLY-DT3 KXLY-DT4 KXLY-DT5	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2 2.3 2.6 4.1 4.2 4.3 4.4 4.5	N N-M E E-M E-M E-M E-M N	Spokane, WA Spokane, WA Coeur d'Alene, ID Spokane, WA Spokane, WA
ows as Necessary	KAYU KAYU-DT2 KCDT KCDT-DT2 KCDT-DT3 KCDT-DT4 KCDT-DT4 KCDT-DT5 KHQ KHQ-DT2 KREM KREM-DT2 KREM-DT2 KREM-DT3 KREM-DT6 KXLY KXLY-DT2 KXLY-DT2 KXLY-DT3 KXLY-DT4 KXLY-DT5 KSPS	28.1 28.2 26.1 26.2 26.3 26.4 26.5 6.1 6.2 2.1 2.2 2.3 2.6 4.1 4.2 4.3 4.4 4.5 7.1	N N-M E E-M E-M E-M E-M E-M N E-M N N-M N-M N-M N-M N-M N-M N-M N-M N-M	Spokane, WASpokane, WACoeur d'Alene, IDCoeur d'Alene, IDCoeur d'Alene, IDCoeur d'Alene, IDCoeur d'Alene, IDSpokane, WASpokane, WA

ounting Period:				FORM SA1-2E. PA				
Name	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM				
	TDS Metrocom, LLC			63				
	PRIMARY TRANSMITTERS:	TELEVISION						
•	In General: In space G, ide	entify every television station (including	g translator stations and low power tele	evision stations)				
G	-		ot (1) stations carried only on a part-tin	-				
			the carriage of certain network program					
Primary	76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.	61(e)(2) and (4))]; and (2) certain station	ons carried on a				
ransmitters:		as explained in the next paragraph.						
Television			carried by your cable system on a subs	stitute program				
		ules, regulations, or authorizations:	(the Special Statement and Program L	og)—if the				
	station was carried <i>only</i> or			og)—ii the				
			ed both on a substitute basis and also	on some other				
		•	s, see page (v) of the general instructio					
			program services such as HBO, ESPN					
			ne-air designation. For example, repor	t multistream				
	"WETA-2" as the same on							
		-	levision station for broadcasting over the	he air in its community				
		/RC is channel 4 in Washington, D.C.	estation an independent station or a	noncommercial				
		Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial						
	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).							
	(for independent multicast)	, "E" (for noncommercial educational),	or "E-M" (for noncommercial education					
	(for independent multicast) For the meaning of these to Column 4: Give the location	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis	or "E-M" (for noncommercial education	nal multicast). s licensed by the				
	(for independent multicast) For the meaning of these to Column 4: Give the location	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is	nal multicast). s licensed by the				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				
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	(for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	, "E" (for noncommercial educational), erms, see page (iv) of the general inst on of each station. For U.S. stations, lis idian stations, if any, give the name of	or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	nal multicast). s licensed by the s identified.				

LEGAL NAME OF		CABLE 3						SYSTEM I 637
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					н
on the basis of For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G	it is carried by monitoring, to ormation about m. lentify the call tate whether to the radio stat this by placing ive the station	y the sys be rece it the Co sign of the static ion's sig g a chec n's locati	I-Band FM Carriage: Under O stem whenever it is received a ived at the headend, with the opyright Office regulations on the each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. ion (the community to which the the community with which the	t the system's he system's FM ante this point, see pa sed by the cable s ne station is licen	eadend, and (2 enna, during o age (v) of the g system as a s sed by the FC	2) it can certain s general eparate	be expected, tated intervals. instructions 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	
		0,0				0,0		
N/A								
						·		
				h				
							·	

Accounting Peric	od: 2023/01 LEGAL NAME OF OWNER OF							OVOTEN ID
Name	TDS Metrocom, LLC	- CABLE SYS						SYSTEM ID 6379
	SUBSTITUTE CARRIAGI	E: SPECIA		NT AND PROGRAM LO	G			
I Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	accounting pe	eriod, under sp	ecific present and former F	CC rules, regu	ulations, or	authorizatio	ns. For a further
Substitute Carriage:		-			ie general ma			
Special	1. SPECIAL STATEMEN					otwork tok	ovicion prov	arom.
Statement and	During the accounting per	-	ii cable system	r carry, on a substitute ba	515, any nonin			
Program Log	broadcast by a distant sta	ation?				L	YES	X NO
	Note: If your answer is "No	o", leave the	rest of this pa	ge blank. If your answer i	s "Yes," you r	nust comp	lete the pro	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI	E PROGRA	MS					
	In General: List each subs				s wherever po	ossible, if t	heir meanir	ng is
	clear. If you need more spa			rows to the tables. /ision program ("substitute	a program") ti	hat during	the accour	oting
	period, was broadcast by a	•			,	•		•
	under certain FCC rules, re		•			•		
	Do not use general categor		vies" or "bask	etball." List specific progra	am titles, for e	example, "I	Love Lucy	" or
	"NBA Basketball: 76ers vs.		doaet live ant	ar "Vee" Otherwise enter	"No "			
				er "Yes." Otherwise enter asting the substitute prog				
				he community to which th		censed by	the FCC or	, in
	the case of Mexican or Car	nadian statio	ons, if any, the	community with which the	e station is ide	entified).		
		•	when your sys	stem carried the substitute	e program. Us	se numera	ls, with the	month
	first. Example: for May 7 gi		aubatituta ar	aron was carried by you	r aabla avatar		times see	rotoly
				ogram was carried by you				
	tio the nearest live minutes	Example: a	a program carr	ied by a system from 6.0?			i. onould be	•
			a program carr	ied by a system from 6:0 ⁴	i. io p.iii. to o	.20.00 p.11		
	stated as "6:00–6:30 p.m."			n was substituted for prog		·	em was <i>req</i>	uired
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a	ter "R" if the and regulation	listed progran ons in effect d	n was substituted for prog uring the accounting perio	ramming that od; enter the l	t your syste etter "P" if	the listed p	
	stated as "6:00–6:30 p.m." Column 7: Enter the left to delete under FCC rules a was substituted for program	ter "R" if the and regulation mming that y	listed progran ons in effect d	n was substituted for prog uring the accounting perio	ramming that od; enter the l	t your syste etter "P" if	the listed p	
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	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the and regulation mming that y	listed progran ons in effect d /our system w	n was substituted for prog uring the accounting peric as permitted to delete unc	ramming that od; enter the l ler FCC rules WHE	t your syste etter "P" if and regul	the listed plations in	rogram
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the and regulation mming that y b. GUBSTITUTI	listed progran ons in effect d our system w	n was substituted for prog uring the accounting peric as permitted to delete unc	ramming that od; enter the l ler FCC rules WHE CARRI	t your syste etter "P" if and regul N SUBST AGE OCC	the listed plations in ITUTE	rogram 7. REASON FC
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the and regulation mming that y b. GUBSTITUTI	listed progran ons in effect d /our system w	n was substituted for prog uring the accounting peric as permitted to delete unc	ramming that od; enter the l ler FCC rules WHE	t your syste etter "P" if and regul N SUBST AGE OCC	the listed plations in	rogram
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: TDS Metrocom, LLC		S	YSTEM II 6379
K Gross Receipts	GROSS RECEIPTS Instructions : The figure you give in this space determines the form you file and the amo all amounts (gross receipts) paid to your cable system by subscribers for the system's s (as identified in space E) during the accounting period. For a further explanation of how t	econdary trans	mission service	
	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.		-	4,857.79
	IMPORTANT: You must complete a statement in space P concerning gross receipts.		(Amount of gro	oss 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 th Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less th See page (vi) of the general instructions located in the paper SA1-2 form for more information 	nan \$527,600	\$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 y accounting period is \$52.00	/ou must pay foi	this six-month	
	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	2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but me	ore than \$137,	100)	
	1. Base amount under statutory formula	263,800.00	_	
	2. Enter amount of gross receipts from space K	224,857.79		
	3. Subtract line 2 from line 1	38,942.21	_	
	4. Enter the amount of gross receipts from space K	. \$	224,857.79	
	5. Enter the amount from line 3	\$	38,942.21	
	6. Subtract line 5 from line 4	\$	185,915.58	
	7. Multiply line 6 by .005 (enter figure here)		\$	929.58
	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		\$	929.58
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but	less than \$52	7,600)	
	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			
	FILING FEE AND TOTAL REMITTANCE DUE			
Filing Fee and	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	\$	929.58	
otal Remittance Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		20.00	
		Ψ	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3		\$	949.58
	EFT Trace # or TRANSACTION ID #]	

Accounting Period:	2023/01		FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF C TDS Metrocom	DWNER OF CABLE SYSTEM: n, LLC	SYSTEM ID# 63799
M Channels		ou must give (1) the number of channels on which the cable system carried television broadcast stations s, and (2) the cable system's total number of activated channels during the accounting period.	
		I number of channels on which the cable television broadcast stations	2
	on which the ca	I number of activated channels able system carried television broadcast stations cast services	3
N Individual to Be Contacted		BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Mitchell Maier Telephone (608) 886-8210	
	Address 	525 Junction Rd (Number, street, rural route, apartment, or suite number) Madison, WI 53593 (City, town, state, zip) Finance@tdstelecom.com Fax (optional)	
O Certification	I, the undersigned (Owne (Agent in li X (Office in li I have examined	(This statement of account must be certified and signed in accordance with Copyright Office regulations) ed, 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 B; or t of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified line 1 of space B and that the owner is not a corporation or partnership; or er or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable syster ine 1 of space B. d the statement of account and hereby declare under penalty of law that all statements of fact contained herein re, and correct to the best of my knowledge, information, and belief, and are made in good faith. on 1001(1986)]	η

X /s/ Sharon V. Tisdale
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: Sharon V. Tisdale
Title: Assistant Treasurer (Title of official position held in corporation or partnership)
Date: August 11, 2023

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

	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
S Metrocom, LLC	63799
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. 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	P Special Statement Concerning Gross Receipts Exclusion
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT 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 Assessment
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x	
x Line 2 Multiply line 1 by the interest rate* and enter the sum here	
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