This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1)

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY				
DATE RECEIVED	AMOUNT			
03/03/2025	\$ ALLOCATION NUMBER			

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
	Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting	20242 Barcode Data Filing Period (optional - see instructions)
Period	
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
	Cogeco US (Penn), LLC
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM
	3 Batterymarch Park, Suite 200 (Number, street, rural route, apartment, or suite number)
	Quincy, MA 02169
	(City, town, state, zip)
С	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1 IDENTIFICATION OF CABLE SYSTEM:
	Cogeco US, LLC
	MAILING ADDRESS OF CABLE SYSTEM:
	107 1/2 B Pleasant Ave. [Number, street, rural route, apartment, or suite number]
	Kingwood, WV 26537 (City, town, state, zip code)

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

LECAL MARE OF OWNER OF CASELS SYSTEM: Coggoo US (Ponn), LLC Instructions: list each separate community served by the cable system. A "community" is the same as a "community unit" as discrete unincorporated areas; and discrete unincorporate unincorporate unincorporate unincorporate unincorporate unincorporate unincorporate unincorporate unincorporate unincorporat	FORM SA1-2E. PAGE SYSTEM ID	<u> </u>	VSTEM:				
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as de "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification 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 home parks should be reported in parenthes identified city. CITY OR TOWN Town Of Albright Town Of Terra Alta County Of Preston Town Of Newburg Town Of Reedsville County Of Monongalia Town Of Tunnelton WV Town Of Tunnelton WV	1405		131EWI.	Name			
"a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification 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 home parks should be reported in parenthest identified city. CITY OR TOWN STATE City Of Kingwood Town Of Albright Town Of Terra Alta WV County Of Preston Town Of Masontown Town Of Newburg Town Of Reedsville County Of Monongalia Town Of Tunnelton WV		Historia de la companya del companya de la companya del companya de la companya d					
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Area Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parenthes identified city. CITY OR TOWN Town Of Kingwood Town Of Albright Town Of Terra Alta County Of Preston Town Of Masontown Town Of Newburg Town Of Reedsville County Of Monongalia Town Of Tunnelton WV Town Of Tunnelton WV Town Of Tunnelton	tification nereafter know						
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Town Of Tunnelton WV		WV					
Town of Tuneton		ı WV					

Accounting Period: 2024/2

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 14054

Cogeco US (Penn), LLC

E

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLO	OCK 1		BLOCK 2				
	NO. OF			NO. OF			
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE		
Residential:							
Service to first set	941	\$49.99	Entertainment	799	\$89.98		
 Service to additional set(s) 			Variety	17	\$134.98		
• FM radio (if separate rate)							
Motel, hotel	0						
Commercial	55	\$49.99					
Converter							
Residential							
Non-residential							

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

	BLOCK 2			
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE
Continuing Services:		Installation: Non-residential		
• Pay cable	\$1.99 - 19.99	Motel, hotel		
 Pay cable—add'l channel 		Commercial		
Fire protection		• Pay cable		
•Burglar protection		Pay cable-add'l channel		
Installation: Residential		Fire protection		
• First set	\$99.00	Burglar protection		
Additional set(s)	\$40.00	Other services:		
• FM radio (if separate rate)		Reconnect	\$40.00	
Converter		Disconnect	\$40.00	
		Outlet relocation	\$40.00	
		Move to new address	\$40.00	

Accounting Period: 2024/2 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 14054

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

Cogeco US (Penn), LLC

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, *except* (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 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 stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

Column 1: List each station's call sign. *Do not* report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C.

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 independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.

Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Add Rows as Necessary

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
KDKA	2	N	PITTSBURGH, PA
WDTV	5	N	WESTON, WV
WNPB	8	E	MORGANTOWN, WV
WPGH	53	l	PITTSBURGH, PA
WPNT	22	I	PITTSBURGH, PA
WPXI	11	N	PITTSBURGH, PA
VTAE	4	N	PITTSBURGH, PA
WVFX	16	N	CLARKSBURGH, WV
VQED	15	E	PITTSBURGH, PA
(DKA-Dabl	2.3	I-M	PITTSBURGH, PA
(DKA-Start	2.2	I-M	PITTSBURGH, PA
VBOY	12	N	CLARKSBURG, WV
WDTV-Circle	5.4	I-M	WESTON, WV
VDTV-Heroes	5.3	I-M	WESTON, WV
VPCB	40	l	GREENSBURG, PA
VPGH-AntTV	53.2	I-M	PITTSBURGH, PA
VPGH-Charge	53.3	I-M	PITTSBURGH, PA
VPKD	19	l	JEANNETTE, PA
VPNT-MyNet	22.1	I-M	PITTSBURGH, PA
VPNT-Comet	22.3	I-M	PITTSBURGH, PA
VPNT-Nest	22.2	I-M	PITTSBURGH, PA
WPNT-TBD	22.4	I-M	PITTSBURGH, PA
WTAE-Cozi	4.2	I-M	PITTSBURGH, PA

	2024/2			FORM SA1-2E. PA	GE 3			
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM				
Nume	Cogeco US (Penn), LL	LC .		14	054			
	PRIMARY TRANSMITTERS:	TELEVISION						
G	•	ntify every television station (including	•	,				
G	, , ,	n during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting t	• • • • • • • • • • • • • • • • • • • •					
Primary	76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.		•				
Transmitters: Television		s explained in the next paragraph. With respect to any distant stations of	carried by your cable system on a sub	ostitute program				
relevision	basis under specific FCC rules, regulations, or authorizations:							
	 Do not list the station here station was carried only on 	e in space G—but do list it in space I (the Special Statement and Program I	Log)—if the				
	-	a substitute basis. Ilso in space I, if the station was carrie	ed both on a substitute basis and also	o on some other				
		n concerning substitute basis stations	,					
		i's call sign. <i>Do not</i> report origination with a station according to its over-th						
	"WETA-2" as the same on t	he form.						
		el number the FCC assigned to the tel RC is channel 4 in Washington, D.C.	evision station for broadcasting over	the air in its community				
		case whether the station is a network	station, an independent station, or a	noncommercial				
		ring the letter "N" (for network), "N-M"						
		"E" (for noncommercial educational), rms, see page (iv) of the general instr	•	onal multicast).				
	Column 4: Give the location	n of each station. For U.S. stations, lis	t the community to which the station	•				
	FCC. For Mexican or Canad	dian stations, if any, give the name of	the community with which the station	is identified.				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	WPXI-Laff	11.3	I-M	PITTSBURGH, PA				
	WPXI-MeTV	11.2	I-M	PITTSBURGH, PA				
	VVF A1-IVIE I V	11.4	I-IVI	FII I I I I I I I I I I I I I I I I I I				
Add Rows as Necessary								

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Cogeco US (Penn), LLC

14054

PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

- Column 1: Identify the call sign of each station carried.
- Column 2: State whether the station is AM or FM.
- **Column 3:** If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
						 	
						 	
						 	
						l	

A	1. 2024/2						500	11 01 1 05 D1 05 5
Accounting Perio	LEGAL NAME OF OWNER OF	CARLE SYS	TFM:				FORI	M SA1-2E. PAGE 5. SYSTEM ID#
Name			TI LIVI.					14054
Substitute Carriage: Special Statement and Program Log	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system of substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program							stem carried on a ns. For a further SA1-2 form. Iram X NO gram g is ting station ation. or in month rately
	was substituted for prograr effect on October 19, 1976	nming that y		as permitted to delete und	der FCC rules	and regulation N SUBSTITU AGE OCCUI	JTE RRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIM FROM —	IES TO	DELETION
						_		

Accounting Period:	2024/2				SA1-2E. PAGE 6.		
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Cogeco US (Penn), LLC				14054		
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file ar all amounts (gross receipts) paid to your cable system by subscribers for the s (as identified in space E) during the accounting period. For a further explanation 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.	system's se on of how t	condary transm o compute this a	ission service amount, see \$319,	e		
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 Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions located in the paper SA1-2 form for more	but less tha	an \$527,600	263,800			
	BLOCK 1: GROSS RECEIPTS OF \$13	7,100 OR I	ESS				
	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						
	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 li	nes 1 and 2	!	· ·			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	SS (but mo	re than \$137,1	00)			
	Base amount under statutory formula	\$	263,800.00				
	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		- <u>-</u>		0.00		
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7	7 and 8	·····				
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	3,800 (but I	ess than \$527,	600)			
	Enter the amount of gross receipts from space K	\$	319,864.00				
	2. Base amount under statutory formula	\$	263,800.00				
	3. Subtract line 2 from line 1	\$	56,064.00				
	4. Multiply line 3 by .01		\$	560.64			
	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	1. 5. and 6 .		\$	1,879.64		
			-	<u> </u>	1,010.01		
	FILING FEE AND TOTAL REMITTANCE DU	JE					
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	1,879.64			
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		\$	20.00			
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,899.64		
	Important: Your remittance must be in the form of an electronic pays See page i of the general instructions in the paper SA1		-		ghts!		

Accounting Period:	2024/2				FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER O Cogeco US (Penn), LLC				SYSTEM ID# 14054
M Channels	_	the cable system's to	otal numb	s on which the cable system carried television broadcast stations per of activated channels during the accounting period.	
				·	25
	Enter the total number on which the cable system			et etetione	
	-			s data in the second se	253
N Individual to	INDIVIDUAL TO BE CON we can contact about this			PRMATION IS NEEDED (Identify an individual to whom	
for Further Information	Name Adria	nna Maciejewsk	a	Telephone	617-786-8800
	Address 3 Batt	erymarch Park, street, rural route, apartm	Suite	200	
	Quinc	y, MA 02169		,	
	(City, town	n, state, zip) legal@breezeline	e com	Fax (optional)	
	Liliali	legal@breezellin	C.COIII	T ax (optional)	
O Certification	CERTIFICATION (This stated) • I, the undersigned, hereby			rtified and signed in accordance with Copyright Office regulations)
Continuation				(p) I am the owner of the cable system as identified in line 1 of space	e B; or
				artnership) I am the duly authorized agent of the owner of the cable of a corporation or partnership; or	e system as identified
	(Officer or part in line 1 of sp		a corpor	ration) or a partner (if a partnership) of the legal entity identified as o	wner of the cable system
		rect to the best of my		eclare under penalty of law that all statements of fact contained here ge, information, and belief, and are made in good faith.	ein
			X	/s/ Sean Brushett	-
				electronic signature on the line above to certify this statement. nature using an "/s/ signature" (e.g., /s/ John Smith)	
		Typed or printed	name:	Sean Brushett	
				Operations Officer on held in corporation or partnership)	
		Date:		Feburary 27, 2025	

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.

ounting Period: 2024/2	FORM SA1-2E. PAGE 8
SAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
geco US (Penn), LLC	14054
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."	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.	Noosipio Exciudioni
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 Mailing Address Name 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	=
	-
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	
(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@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner	
Address	
ID number	1
First community served	"
Accounting period	

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 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.