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

SA1-2E Short Form

STATEM	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
for Second	ary Transmissions by	DATE RECEIVED	AMOUNT	<u> </u>
General instr	ems (Short Form) uctions are located o of this workbook	03/03/2025	For additional information, contact the U.S. Copyright Office Licensing Division a Tel: (202) 707-8150	
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: ()	YYY/(Period))	_
	2024/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20242	Barcode Data Filing Period (optiona	ıl - see instructions)	
Accounting Period				
В	title of the subsidiary, not that of the par	ent corporation.	sidiary of another corporation, give the full o	corporate
Owner	List any other name or names under whi If there were different owners during the single statement of account and royalty f	e accounting period, only the owner o	n the last day of the accounting period should	d submit a
	Check here if this is the system's first filir	ng. If not, enter the system's ID numbe	r assigned by the Licensing Division.	23546
	LEGAL NAME OF OWNER/MAILIN	IG ADDRESS OF CABLE SYSTE	Λ	
	Cogeco US (Delmar), LLC			
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFEREN	T)	
	MAILING ADDRESS OF OWNER OF 3 Batterymarch Park, Suite	e 200		
	(Number, street, rural route, apartment, or suite r Quincy, MA 02169 (City, town, state, zip)	under)		
С	INSTRUCTIONS: In line 1, give any busi names already appear in space B. In line			
System	1 IDENTIFICATION OF CABLE SYSTEM: Cogeco US, LLC			
	MAILING ADDRESS OF CABLE SYSTEM	1:		
	2 330 Drummer Drive	umber)		
	Grasonville, MD 21638 (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 sufficiency of the fling, a determination that would be made by a court of law.

Nomo	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Cogeco US (Delmar), LLC	23546
D	Instructions: List each separate community served by the cable syste "a separate and distinct community or municipal entity (including ur discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first comm as the "first community." Please use it as the first community on all	em. A "community" is the same as a "community unit" as defined in FCC rules: nincorporated communities within unincorporated areas and including single, nunity that you list will serve as a form of system identification hereafter knowr
Area Served	identified city.	
	CITY OR TOWN	STATE
First	Town of Perryville	MD
Community	Cecil County	MD
	Town of Port Deposit	MD
Add Rows as Necessary		

										2E. PAGE
Name	LEGAL NAME OF OWNER OF C								-	EM ID 2354
	Cogeco US (Delmar), LL									2001
-	SECONDARY TRANSMISSION	I SERVICE: SU	JBSCRI	BERS AND R	ATES					
E	In General: The information in s									
Secondary	system, that is, the retransmission about other services (including particular services)									
Fransmission	last day of the accounting period	• • •						ing on the		
Service: Sub-	Number of Subscribers: Both	h blocks in spa	ce E ca	ll for the numb	er of subso	cribers to the cal	ble system	, broken		
scribers and	down by categories of secondar			•		•				
Rates	each category by counting the n separately for the particular serv			0,0				charged		
	Rate: Give the standard rate of					•	,	ge and the		
	unit in which it is generally billed	. (Example: "\$	20/mth")). Summarize a	any standa	ard rate variation	s within a	oarticular rate		
	category, but do not include disc									
	Block 1: In the left-hand block systems most commonly provide	•		0						
	that applies to your system. Not									
	categories, that person or entity			-		-				
	subscriber who pays extra for ca					d in the count ur	ider "Servi	ce to the		
	first set" and would be counted of Block 2: If your cable system	0			()	convice that are	different f	rom these		
	printed in block 1 (for example, t	Ũ								
	with the number of subscribers a					,		<i>,</i> 0		
	sufficient.		Ũ		_	•				
	BLC	DCK 1					BLOCK			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBE	RS	RAT
	Residential:									
	Service to first set		632	\$49.99	Enterta	inment		5	808	\$89.9
	 Service to additional set(s) 				Variety				11	\$134
	• FM radio (if separate rate)									
	Motel, hotel		0							
	Commercial		140	\$49.99						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC									
_	In General: Space F calls for ra					all your cable sys	stem's serv	rices that were		
F	not covered in space E, that is, t		,		-					
	service for a single fee. There are				0					
Services Other Than	furnished at cost or (2) services amount of the charge and the ur									
Secondary	enter only the letters "PP" in the		usually	Dilleu. II arry i	ales ale ci	larged on a van	able per-p	ografii basis,		
ransmissions:	Block 1: Give the standard rat		the cable	e system for e	ach of the	applicable servi	ces listed.			
Rates	Block 2: List any services that				•	υ.				
	listed in block 1 and for which a				ished. List	these other ser	vices in the	e form of a		
	I priot (two or three word) description	Juon and inclu	ue me ra							
	brief (two- or three-word) descrip								2	
		BLO	-			DATE	0.175.00	BLOCK		DAT
	CATEGORY OF SERVICE	BLO RATE	CATEG	GORY OF SER		RATE	CATEGO	BLOCK	ICE	RAT
	CATEGORY OF SERVICE Continuing Services:	RATE	CATEO Installa	GORY OF SER ation: Non-res		RATE	CATEGO		ICE	RAT
	CATEGORY OF SERVICE Continuing Services: • Pay cable	-	CATEC Installa • Mot	GORY OF SER ation: Non-res tel, hotel		RATE	CATEGO		ICE	RAT
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	RATE	CATEO Installa • Mot • Cor	GORY OF SER ation: Non-res tel, hotel mmercial		RATE	CATEGO		ICE	RAT
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	RATE	CATEC Installa • Mot • Cor • Pay	GORY OF SER ation: Non-res tel, hotel	idential	RATE	CATEGO		ICE	RAT
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	RATE	CATEG Installa • Mot • Cor • Pay • Pay	GORY OF SER ation: Non-res tel, hotel nmercial / cable	idential	RATE	CATEGO		ICE	RAT
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	RATE	CATEG Installa • Mot • Cor • Pay • Pay • Fire	GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l cl	idential	RATE	CATEGO		ICE	RAT
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	RATE \$1.99-19.99 \$99.00	CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur	GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l cl protection	idential	RATE	CATEGO		ICE	RATI
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	RATE \$1.99-19.99 \$99.00	CATEC Installa • Mol • Cor • Pay • Pay • Fire • Bur Other s	GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable / cable-add'l cl e protection glar protection	idential	RATE	CATEGO		ICE	RAT
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	RATE \$1.99-19.99 \$99.00	CATEC Installa • Mol • Cor • Pay • Pay • Fire • Bur Other s • Rec	GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l cl e protection glar protection services:	idential		CATEGO		ICE	RAT
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	RATE \$1.99-19.99 \$99.00	CATEC Installa • Mol • Cor • Pay • Pay • Fire • Bur Other s • Rec • Dis	GORY OF SER ation: Non-res tel, hotel mmercial / cable / cable-add'l cl e protection glar protection services: connect	idential		CATEGO		ICE	RAT

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
lame	Cogeco US (Delmar),			235
	PRIMARY TRANSMITTERS:			
G rimary smitters: evision	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, a Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station here, station was carried <i>only</i> on • List the station here, and a basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on a Column 2: Give the channel of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these te Column 4: Give the location	also in space I, if the station was carrie on concerning substitute basis stations n's call sign. <i>Do not</i> report origination d with a station according to its over-th	of (1) stations carried only on a part the carriage of certain network prog 61(e)(2) and (4))]; and (2) certain st carried by your cable system on a s the Special Statement and Program ed both on a substitute basis and al s, see page (v) of the general instruc- program services such as HBO, ES e-air designation. For example, rep evision station for broadcasting over station, an independent station, or (for network multicast), "I" (for inde or "E-M" (for noncommercial educa- uctions in the paper SA1-2 form. t the community to which the statio	t-time basis under grams [sections tations carried on a ubstitute program n Log)—if the lso on some other ctions. SPN, etc. Identify each port multistream er the air in its community er a noncommercial upendent), "I-M" ational multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WBAL	11	N	Baltimore, MD
		45	••	
	WBFF	45	Ν	Baltimore, MD
vs as Necessary	WDCA	45 20	N I	Baltimore, MD Washington, DC
rs as Necessary			N I N	
rs as Necessary	WDCA	20	l	Washington, DC
rs as Necessary	WDCA WJZ	20 13	I N	Washington, DC Baltimore, MD
rs as Necessary	WDCA WJZ WMAR	20 13 2	I N N	Washington, DC Baltimore, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT	20 13 2 42	I N N	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV	20 13 2 42 8	I N N E I	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet	20 13 2 42 8 8.3	I N N E I	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB	20 13 2 42 8 8.3 24	I N N E I I I	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD Baltimore, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium	20 13 2 42 8 8 8.3 24 8.4	I N N E I I I I I I M	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD Baltimore, MD Baltimore, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Antenna TV	20 13 2 42 8 8.3 24 8.4 8.2	I N N E I I I I I I H H	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Antenna TV WBAL-MeTV	20 13 2 42 8 8.3 24 8.4 8.2 11.2	I N N E I I I I I I M I-M	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Stadium WNUV-Antenna TV WBAL-MeTV WBFF-Charge	20 13 2 42 8 8 8 8 3.3 24 8.4 8.4 8.2 11.2 45.4	I N N E I I I I I-M I-M I-M	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Stadium WNUV-Antenna TV WBAL-MeTV WBFF-Charge WBFF-MyNet	20 13 2 42 8 8.3 24 8.4 8.4 8.2 11.2 45.4 45.2	I N N E I I I I I I M I-M I-M I-M	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD
is as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Stadium WNUV-Antenna TV WBAL-MeTV WBFF-Charge WBFF-MyNet WDCA-MyNet	20 13 2 42 8 8 8.3 24 8.4 8.2 11.2 45.4 45.2 20.1	I N N I I I I I I I I I I I I I I I I I	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Stadium WNUV-Antenna TV WBAL-MeTV WBFF-Charge WBFF-Charge WBFF-MyNet WDCA-MyNet	20 13 2 42 8 8 8 8 8 8 8 8 8 8 8 8 8	I N N E I I I I I M I-M I-M I-M I-M I-M	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Stadium WNUV-Antenna TV WBAL-MeTV WBFF-Charge WBFF-Charge WBFF-MyNet WDCA-MyNet WJZ-Dabl WJZ-Start	20 13 2 42 8 8.3 24 8.4 8.2 11.2 45.4 45.2 20.1 13.3 13.2	I N N N E I I I I I I I I I I I I I I I	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD
is as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Stadium WNUV-Antenna TV WBAL-MeTV WBFF-Charge WBFF-MyNet WDCA-MyNet WJZ-Dabl WJZ-Start WMAR-Bounce	20 13 2 42 8 8 8.3 24 8.4 8.2 11.2 45.4 45.2 20.1 13.3 13.2 2.3	i N N E i i i i i M i-M i-M i-M i-M i-M i-M i-M	Washington, DCBaltimore, MDBaltimore, MDAnnapolis, MDBaltimore, MD
rs as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Stadium WNUV-Antenna TV WBAL-MeTV WBFF-Charge WBFF-MyNet WDCA-MyNet WJZ-Dabl WJZ-Start WMAR-Bounce	20 13 2 42 8 8 8.3 24 8.4 8.2 11.2 45.4 45.2 20.1 13.3 13.2 2.3	i N N E i i i i i M i-M i-M i-M i-M i-M i-M i-M	Washington, DCBaltimore, MDBaltimore, MDAnnapolis, MDBaltimore, MD
is as Necessary	WDCA WJZ WMAR WMPT WNUV WNUV-Comet WUTB WNUV-Stadium WNUV-Stadium WNUV-Antenna TV WBAL-MeTV WBFF-Charge WBFF-MyNet WDCA-MyNet WJZ-Dabl WJZ-Start WMAR-Bounce	20 13 2 42 8 8 8.3 24 8.4 8.2 11.2 45.4 45.2 20.1 13.3 13.2 2.3	i N N E i i i i i M i-M i-M i-M i-M i-M i-M i-M	Washington, DC Baltimore, MD Baltimore, MD Annapolis, MD Baltimore, MD

EGAL NAME OF			I STEM.					SYSTEM II 235
	t every radio s	tation ca	arried on a separate and discronnerally receivable by your cab					н
eceivable if (1) on the basis of l For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If signal, indicate Column 4: G	it is carried by monitoring, to prmation abou rm. lentify the call tate whether t the radio stati this by placing vive the statior	y the sys be recein to the Co sign of o the static ion's sign g a chech n's locati	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 k mark in the "S/D" column. on (the community to which th	t the system's he system's FM ant this point, see pa red by the cable ne station is licer	eadend, and (enna, during c age (v) of the c system as a s used by the FC	2) it can certain si general i eparate	be expected, tated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	s, ir any,	the community with which the	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
SALL SIGN		3,0	LOOATION OF STATION	UALL SIGN		3,0		
							·	
							·	

ccounting Perio								
Name	LEGAL NAME OF OWNER OF Cogeco US (Delmar), I		IEM:					SYSTEM ID 2354
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM L	OG			
I	In General: In space I, ident substitute basis during the a	tify every non	network televi	<i>sion program,</i> broadcast	by a <i>distant</i> sta			
Substitute	explanation of the programm	ning that mus	st be included	in this log, see page (v) o	the general ins	structions in	the paper S	SA1-2 form.
Carriage: Special	1. SPECIAL STATEMEN							
Statement and	 During the accounting per 	riod, did you	ir cable syster	n carry, on a substitute l	oasis, any nonr	network telev	vision prog	
Program Log	broadcast by a distant sta						YES	× NO
	Note: If your answer is "No	o", leave the	rest of this pa	ige blank. If your answei	is "Yes," you i	must comple	te the pro	gram
	log in block 2. 2. LOG OF SUBSTITUTE		MS					
	In General: List each subs			ate line. Use abbreviatio	ns wherever p	ossible, if th	eir meanin	q is
	clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re	ace, please a of every noi distant stati	add additional nnetwork tele ion and that y	rows to the tables. vision program ("substitu our cable system substit	ite program") t uted for the pro	hat, during t ogramming (he accoun of another	ting station
	Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call	. Bulls." m was broac	dcast live, ent	er "Yes." Otherwise ente	r "No."	example, "I L	ove Lucy"	or
	Column 4: Give the broat the case of Mexican or Car Column 5: Give the more	adcast station nadian station	on's location (i ons, if any, the	the community to which community with which t	he station is lie he station is id	entified).		
	first. Example: for May 7 gir Column 6: State the tim to the nearest five minutes.	nes when the	•					
		•	a program oun	ned by a system from 6.	51.15 p.m. to t			
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program	ter "R" if the and regulation mming that y	listed prograr ons in effect d	n was substituted for pro luring the accounting pe	gramming that iod; enter the l	t your syster etter "P" if th	ne listed pr	
	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 prograr ons in effect d	n was substituted for pro luring the accounting pe as permitted to delete u	gramming that iod; enter the l inder FCC rules	t your syster etter "P" if th	tions in	7. REASON F
	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.	listed prograr ons in effect d /our system w	n was substituted for pro uring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th and regular N SUBSTIT	TUTE IRRED	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. UBSTITUTE 2. LIVE?	Listed program ons in effect d your system w <u>E PROGRAM</u> 3. STATION'S	n was substituted for pro luring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th s and regula N SUBSTIT AGE OCCU	TUTE URRED MES	7. REASON F
	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. UBSTITUTE 2. LIVE?	Listed program ons in effect d your system w <u>E PROGRAM</u> 3. STATION'S	n was substituted for pro uring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th s and regular N SUBSTIT AGE OCCU	TUTE URRED MES	7. REASON F
	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. UBSTITUTE 2. LIVE?	Listed program ons in effect d your system w <u>E PROGRAM</u> 3. STATION'S	n was substituted for pro uring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th s and regular N SUBSTIT AGE OCCU	TUTE URRED MES	7. REASON F
	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. UBSTITUTE 2. LIVE?	Listed program ons in effect d your system w <u>E PROGRAM</u> 3. STATION'S	n was substituted for pro uring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th s and regular N SUBSTIT AGE OCCU	TUTE URRED MES	7. REASON F
	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. UBSTITUTE 2. LIVE?	Listed program ons in effect d your system w <u>E PROGRAM</u> 3. STATION'S	n was substituted for pro uring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th s and regular N SUBSTIT AGE OCCU	TUTE URRED MES	7. REASON F
	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. UBSTITUTE 2. LIVE?	Listed program ons in effect d your system w <u>E PROGRAM</u> 3. STATION'S	n was substituted for pro uring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th s and regular N SUBSTIT AGE OCCU	TUTE URRED MES	7. REASON F
	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. UBSTITUTE 2. LIVE?	Listed program ons in effect d your system w <u>E PROGRAM</u> 3. STATION'S	n was substituted for pro uring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th s and regular N SUBSTIT AGE OCCU	TUTE URRED MES	7. REASON F
	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. UBSTITUTE 2. LIVE?	Listed program ons in effect d your system w <u>E PROGRAM</u> 3. STATION'S	n was substituted for pro uring the accounting pe as permitted to delete u	gramming that iod; enter the l nder FCC rules WHE CARRI 5. MONTH	t your syster etter "P" if th s and regular N SUBSTIT AGE OCCU	TUTE URRED MES	7. REASON F
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Accounting Period:	2024/2			FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Cogeco US (Delmar), LLC			S	23546 23546
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and all amounts (gross receipts) paid to your cable system by subscribers for the sy (as identified in space E) during the accounting period. For a further explanatio 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	ystem's se n of how t	econdary transn to compute this	nission service	382
Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 b • Use block 3 if the amount of gross receipts in space K is more than \$263,800 b See page (vi) of the general instructions located in the paper SA1-2 form for more in BLOCK 1: GROSS RECEIPTS OF \$137,	out less the nformation ,100 OR	an \$527,600 n. LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00	y fee that y	ou must pay for	this six-mon	
	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 lin	ies 1 and 2	2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	S (but mo	ore than \$137,	100)	
	1. Base amount under statutory formula	\$	263,800.00	_	
	2. Enter amount of gross receipts from space K	\$	227,382.00	_	
	3. Subtract line 2 from line 1	\$	36,418.00	-	
	4. Enter the amount of gross receipts from space K		\$	227,382.00	
	5. Enter the amount from line 3		. \$	36,418.00	
	6. Subtract line 5 from line 4		\$	190,964.00	
	7. Multiply line 6 by .005 (enter figure here)			\$	954.82
	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		\$	954.82
	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	\$	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	Ξ			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	954.82	
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			\$	974.82
	Important: Your remittance must be in the form of an electronic paym 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 OF CABLE SYSTEM: Cogeco US (Deimar), LLC	SYSTEM ID# 23546
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broat to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whe we can contact about this statement of account.)	iom
for Further Information	Name Adrianna Maciejewska	Telephone 617-786-8800
	Address 3 Batterymarch Park, Suite 200 (Number, street, rural route, apartment, or suite number) Quincy, MA 02169 (City, town, state, zip)	
	Email legal@breezeline.com Fax (option	al)
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good fait [18 U.S.C., Section 1001(1986)] 	line 1 of space B; or ner of the cable system as identified identified as owner of the cable system contained herein
	X /s/ Sean Brushett Enter an electronic signature on the line above to certify this state Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	tement.
	Typed or printed name: Sean Brushett Title: Chief Operations Officer (Title of official position held in corporation or partnership)	
	Date: February 2	7, 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
CAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
geco US (Delmar), LLC	23546
 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 	P Special Statement Concerning Gross Receipts Exclusion
made by satellite carriers to satellite dish owners? NO YES. Enter the total here and list the satellite carrier(s) below	
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. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Interest Assessment
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessment
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