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

Return completed workbook

STATEMENT OF ACCOUNT			FOR COPYRIGHT OFFICE USE ONLY by email to:					
for Seconda	ny Tra	nsmissions by	DATE RECEIVED	AMOUNT				
Cable Systems (Short Form)					<u>coplicsoa@loc.gov</u>			
				\$	For additional information,			
General instru	ictions	are located	2/26/25		contact the U.S. Copyright Office Licensing Division at:			
in the first tab of this workbook				ALLOCATION NUMBER	Tel: (202) 707-8150			
				-				
Α	ACCO	OUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))				
			Period 1 = January 1 - June 30	Period 2 = July 1 - December 31				
		2024/2						
			Barcode Data Filing Period (optiona	I - see instructions)				
			3 1 1 1	···· ···· · · · · · · · · · · · · · ·				
Accounting								
Period								
		Instructions:						
В		Give the full legal name of the owner of the title of the subsidiary, not that of the pare		sidiary of another corporation, give the full	corporate			
_								
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 or	the last day of the accounting period shoul	d submit a			
		single statement of account and royalty fe	ee payment covering the entire accou	nting period.				
		Check here if this is the system's first filin	g. If not, enter the system's ID numbe	r assigned by the Licensing Division.	28446			
		LEGAL NAME OF OWNER/MAILIN		a				
		LEGAL NAME OF OWNER/MAILIN	JADDRESS OF CABLE STSTEN	<u>a</u>				
		MEDIACOM MINNESOTA LLC						
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFEREN	Т)				
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM					
		ONE MEDIACOM WAY	CABLE STOTEM					
		(Number, street, rural route, apartment, or suite n	umber)					
		MEDIACOM PARK, NY 10918						
		(City, town, state, zip)						
С				entify the business and operation of t he system, if different from the addre	5			
System		IDENTIFICATION OF CABLE SYSTEM:						
	1	MEDIACOM MINNESOTA LLC						
		MAILING ADDRESS OF CABLE SYSTEM						
		1504 Second Street S.E.						
	2	(Number, street, rural route, apartment, or suite n	umber)					
		Waseca, MN 56093						

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.

(City, town, state, zip code)

D Instruct "a separ discrete as the "f	te and distinct community or municipal entity (including unincorporat inincorporated areas)." 47 C.F.R. 76.5(dd). The first community that st community." Please use it as the first community on all future filing	ted communities within unincorporated areas and including single,				
D "a separ discrete as the "h Note: Er identifie First Community	te and distinct community or municipal entity (including unincorporat inincorporated areas)." 47 C.F.R. 76.5(dd). The first community that st community." Please use it as the first community on all future filing	ted communities within unincorporated areas and including single,				
Area Served Note: Er identifie First Community		Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rule "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter kno as the "first community." Please use it as the first community on all future filings.				
Community		bile home parks should be reported in parentheses below the				
Community	CITY OR TOWN	STATE				
Community	Grand Marais	MN				
Add Rows as Necessary						
Add Rows as Necessary						

	FOR LEGAL NAME OF OWNER OF CABLE SYSTEM:								
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					SYS	TEM ID 2844
	MEDIACOM MINNESOT	A LLC							2044
_	SECONDARY TRANSMISSION	SERVICE: SI	JBSCR	IBERS AND R	ATES				
E	In General: The information in space E should cover all categories of secondary transmission service of the								
Secondary	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give informa about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the services of the services (including pay cable) in space F, not here.								
Transmission	last day of the accounting period								
Service: Sub-	Number of Subscribers: Both	n blocks in spa	ce E ca	Il for the number	er of subso	cribers to the ca	ble system	n, broken	
scribers and	down by categories of secondary								
Rates	each category by counting the n separately for the particular serv		-				-	s charged	
	Rate: Give the standard rate c					•	,	ge and the	
	unit in which it is generally billed	· ·		,	iny standa	rd rate variatior	is within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				ries of sec	ondary transmi	ssion servi	ce that cable	
	systems most commonly provide	•		-		•			
	that applies to your system. Not	e: Where an ir	ndividua	Il or organizatio	n is receiv	ing service that	falls unde	r different	
	categories, that person or entity				• •		•		
	subscriber who pays extra for ca first set" and would be counted of					a in the count u	ider "Servi	ice to the	
	Block 2: If your cable system					service that are	e different f	from those	
	printed in block 1 (for example, t					•	,.		
	with the number of subscribers a sufficient.	and rates, in th	e right-l	hand block. A t	vo- or thre	e-word descript	ion of the	service is	
		DCK 1					BLOCK	< 2	
		NO. OF		DATE	0.17			NO. OF	D 4 T
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RATI
	Service to first set		16	40.00-57.00					
	Service to additional set(s)			40.00-57.00					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		0	40.00-57.00					
	Converter								
	Residential								
	Non-residential								
					•			I	
_	SERVICES OTHER THAN SEC In General: Space F calls for rate					Il your cable sy	stem's serv	vices that were	
F	not covered in space E, that is, t	hose services	that are	e not offered in	combinatio	on with any sec	ondary trar	nsmission	
. .	service for a single fee. There ar		,		0		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		usualiy	billed. If ally is		larged on a var	abic pei-p	rogram basis,	
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.								
Rates	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 service brief (two- or three-word) description and include the rate for each.							e lorm of a	
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE	-	GORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:			ation: Non-res					
	• Pay cable	PP	• Mo	tel, hotel			Variety	TV	####
	Pay cable—add'l channel	PP	۰Co	mmercial					
	Fire protection		•Pa	y cable					
	 Burglar protection 			y cable-add'l ch	annel				
	Installation: Residential			e protection					
	• First set	75.00		rglar protection					
	Additional set(s)	49.00		services:					
	• FM radio (if separate rate)	0.00		connect		49.00			
	Converter	9.99		connect		40.00			
	1		• Ou	tlet relocation		49.00			
				ve to new addr	000				

	2024/2			FORM SA1-2E. PAGE			
Name	LEGAL NAME OF OWNER OF			SYSTEM IE			
	MEDIACOM MINNESO			2844			
G Primary ansmitters: Television	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, <i>except</i> (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 <i>not</i> 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 <i>only</i> 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. <i>Do not</i> 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 for						
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION			
	KBJR/KBJR HD (NBC)	19	N	Duluth, MN			
	KBJR-DT2/KBJR-DT2 HD (CB	19.2	N-M	Duluth, MN			
Rows as Necessary	KBJR-DT3 (MyNet)	19.3	I-M				
Rows as Necessary				Duluth, MN			
	KCWV/KCWV TCT (HD)	20	I	Duluth, MN Duluth, MN			
······································	KCWV/KCWV TCT (HD) KDLH/KDLH (HD) CW	20 33					
, , , , , , , , , , , , , , , , , , , ,			I	Duluth, MN			
,	KDLH/KDLH (HD) CW	33	 	Duluth, MN Duluth, MN			
,	KDLH/KDLH (HD) CW KDLH-DT2 True Crime	33 33.2	I I I-M	Duluth, MN Duluth, MN Duluth, MN			
	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff	33 33.2 33.3	I I I-M I-M	Duluth, MN Duluth, MN Duluth, MN Duluth, MN			
	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD	33 33.2 33.3 33.4	I I I-M I-M I-M	Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN			
,	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery	33 33.2 33.3 33.4 33.5	I I I-M I-M I-M I-M	Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN			
,	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest	33 33.2 33.3 33.4 33.5 33.6	I I I-M I-M I-M I-M	Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN			
	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest KQDS/KQDS HD (FOX) KQDS-DT2 Antenna TV	33 33.2 33.3 33.4 33.5 33.6 17	I I I-M I-M I-M I-M I-M I	Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN Duluth, MN			
,	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest KQDS/KQDS HD (FOX) KQDS-DT2 Antenna TV WDIO/WDIO HD (ABC)	33 33.2 33.2 33.3 33.4 33.5 33.6 17 17.2 17.2 43	I I I I-M I-M I-M I-M I I I I I N	Duluth, MN			
	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest KQDS/KQDS HD (FOX) KQDS-DT2 Antenna TV WDIO/WDIO HD (ABC) WDIO-DT2 MeTV HD	33 33.2 33.3 33.4 33.5 33.6 17 17.2 43 43.2	I I I I I M I I I I I I I I I I I I I I	Duluth, MN			
, , , , , , , , , , , , , , , , , , ,	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest KQDS/KQDS HD (FOX) KQDS-DT2 Antenna TV WDIO/WDIO HD (ABC) WDIO-DT2 MeTV HD WDSE/WDSE HD (PBS)	33 33.2 33.2 33.3 33.4 33.5 33.6 17 17.2 43 43.2 38	I I I I I I I I I I I I I I I I I I I	Duluth, MN			
	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest KQDS/KQDS HD (FOX) KQDS-DT2 Antenna TV WDIO/WDIO HD (ABC) WDIO-DT2 MeTV HD WDSE-WDSE HD (PBS)	33 33.2 33.3 33.4 33.4 33.5 33.6 17 17.2 43 43 43.2 38 38.2	I I I I I M I M I I I I I I I I I I I I	Duluth, MN			
	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest KQDS/KQDS HD (FOX) KQDS-DT2 Antenna TV WDIO/WDIO HD (ABC) WDIO-DT2 MeTV HD WDSE/WDSE HD (PBS) WDSE-DT2 Explore (PBS) HD WDSE-DT3 Create HD	33 33.2 33.2 33.3 33.4 33.5 33.6 17 17.2 43 43 43.2 38 38.2 38.3	I I I I I M I M I I I I I I I I E E E-M E-M	Duluth, MN			
	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest KQDS/KQDS HD (FOX) KQDS-DT2 Antenna TV WDIO/WDIO HD (ABC) WDIO-DT2 MeTV HD WDSE/WDSE HD (PBS) WDSE-DT3 Create HD WDSE-DT3 Create HD	33 33.2 33.2 33.3 33.4 33.4 33.5 33.6 17 17.2 43 43 43.2 38 38.2 38.3 38.4	I I I I I I I I I I I I I I I I I I I	Duluth, MN Duluth, MN			
	KDLH/KDLH (HD) CW KDLH-DT2 True Crime KDLH-DT3 Laff KDLH-DT3 Laff KDLH-DT4 Court TV HD KDLH-DT5 ION Mystery KDLH-DT6 Quest KQDS/KQDS HD (FOX) KQDS-DT2 Antenna TV WDIO/WDIO HD (ABC) WDIO-DT2 MeTV HD WDSE/WDSE HD (PBS) WDSE-DT2 Explore (PBS) HD WDSE-DT3 Create HD	33 33.2 33.2 33.3 33.4 33.5 33.6 17 17.2 43 43 43.2 38 38.2 38.3	I I I I I M I M I I I I I I I I E E E-M E-M	Duluth, MN			

MEDIACOM	OWNER OF C							SYSTEM 284
	every radio s	station ca	rried on a separate and discre					н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recein the consistence sign of e the static ion's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante his point, see par ed by the cable s e station is licens	adend, and (2 nna, during c ge (v) of the g ystem as a se sed by the FC	!) it can ertain st eneral ii eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
	AM or EM	e/n			AM or EM	e/n		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
						·		

ccounting Perio	LEGAL NAME OF OWNER OF	CABLE 313						SYSTEM II
Name	MEDIACOM MINNESO							2844
<u> </u>	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	ENT AND PROGRAM LC	G			
	In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.							
Substitute Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE							
Special								
tatement and	• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program							
Program Log	broadcast by a distant station? YES XINO Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program							
	-	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you r	nust comp	plete the pr	rogram
	log in block 2. 2. LOG OF SUBSTITUT		MS					
	In General: List each subs			ate line. Use abbreviation	s wherever po	ossible, if	their mean	ing is
	clear. If you need more spa	ace, please	add additiona	I rows to the tables.	·			C C
				vision program ("substitute				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general catego							
	"NBA Basketball: 76ers vs.							-
				er "Yes." Otherwise enter casting the substitute prog				
				the community to which th		censed by	the FCC c	or. in
	the case of Mexican or Car		,	3				,
		•	when your sy	stem carried the substitute	e program. Us	se numera	als, with the	e month
	first. Example: for May 7 gi		a authotituta nu		r aabla avata	a. Liattha	times ass	urotoly (
				ogram was carried by you ried by a system from 6.0				
	to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be							
	stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i>							
	•		listed program	n was substituted for prog	ramming that	your syst	tem was <i>re</i>	quired
	•	ter "R" if the						
	Column 7: Enter the let to delete under FCC rules was substituted for program	ter "R" if the and regulati mming that y	ions in effect c	during the accounting perio	od; enter the l	etter "P" if	f the listed	
	Column 7: Enter the let to delete under FCC rules	ter "R" if the and regulati mming that y	ions in effect c	during the accounting perio	od; enter the l	etter "P" if	f the listed	
	Column 7: Enter the let to delete under FCC rules was substituted for program	ter "R" if the and regulati mming that y	ions in effect c	during the accounting perio	od; enter the l ler FCC rules	etter "P" if	f the listed llations in	
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y b. UBSTITUTI	ions in effect o your system w	during the accounting period	od; enter the I ler FCC rules WHE CARRI	etter "P" if and regu N SUBST AGE OCC	f the listed lations in	7. REASON F
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y b. UBSTITUTI	ions in effect o your system w	during the accounting period	od; enter the l ler FCC rules WHE	etter "P" if and regu N SUBST AGE OCC	f the listed lations in	7. REASON F
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON F
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON F
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON F
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	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON I DELETION
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON I DELETION
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON F
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON F
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	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON F
	Column 7: Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the and regulati mming that y 5. UBSTITUTI 2. LIVE?	ions in effect c your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	wher the left of t	etter "P" it and regu N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON F
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Accounting Period:	2024/2	FORM SA	1-2E. PAGE 6.					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM MINNESOTA LLC	S	28446					
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this 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.	nission service amount, see	7,705.24 ss receipts)					
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$ • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800						
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS							
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	this six-mon						
	Line 1. Royalty fee for accounting period	. \$	52.00					
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00					
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	\$	52.00					
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,	100)						
	1. Base amount under statutory formula	/						
	2. Enter amount of gross receipts from space K							
	3. Subtract line 2 from line 1							
	4. Enter the amount of gross receipts from space K							
	5. Enter the amount from line 3							
	6. Subtract line 5 from line 4							
	7. Multiply line 6 by .005 (enter figure here)							
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00					
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8							
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527	,600)						
	1. Enter the amount of gross receipts from space K							
	2. Base amount under statutory formula							
	3. Subtract line 2 from line 1	-						
	4. Multiply line 3 by .01							
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00						
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00						
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6							
	FILING FEE AND TOTAL REMITTANCE DUE							
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00						
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00						
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00					
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat							

Accounting Period:	2024/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM MINNESOTA LLC	SYSTEM ID# 28446
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations 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 and nonbroadcast services	26 52
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name Kenneth J. Kohrs Telephone	845-443-2762
	Address One Mediacom Way (Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip) Email Copyrights@mediacomcc.com Fax (optional)	
O Certification	 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 line 1 of space B (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s 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 identified as own 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 contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	system as identified ner of the cable system
	X /s/ Kenneth J. Kohrs 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: Kenneth J. Kohrs Title: Group Vice President, Financial Reporting (Title of official position held in corporation or partnership)	
	Date: 2/14/2025	

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
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
DIACOM MINNESOTA LLC	2844
 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? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
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. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
x	
Line 3 Multiply line 2 by the number of days late and enter the sum here x 0.00274	
Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	
 * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i>. 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	

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I	1.00
Ν	0.25
E	0.25
I-M	1
N-M	0.25
E-M	0.25