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	FOR COPYRIGHT OFFICE USE ONLY					
	ry Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov				
Cable Syste	ms (Short Form)							
Conoral instru	ctions are located	2/26/25	\$	For additional information, contact the U.S. Copyright				
	of this workbook		ALLOCATION NUMBER	Office Licensing Division at: Tel: (202) 707-8150				
			THE OF THE THE MELT	-				
				_l				
Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT: (Y	YYY/(Period))					
	2024/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31					
		Percede Data Siling Revied (antions	· :					
		Barcode Data Filing Period (optiona	- see instructions)					
Accounting Period								
	Instructions:							
Р	Give the full legal name of the owner		sidiary of another corporation, give the full o	corporate				
В	title of the subsidiary, not that of the	parent corporation.						
Owner	List any other name or names under v	which the owner conducts the business of	the cable system.					
	-		the last day of the accounting period should	d submit a				
	single statement of account and royal	ty fee payment covering the entire accou	nting period.	37171				
	Check here if this is the system's first	filing. If not, enter the system's ID numbe	r assigned by the Licensing Division.	0/1/1				
	LEGAL NAME OF OWNER/MAIL	ING ADDRESS OF CABLE SYSTEM	1					
	MEDIACOM WISCONSIN LLC							
	BUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFEREN	Т)					
	MAILING ADDRESS OF OWNER	OF CABLE SYSTEM						
	ONE MEDIACOM WAY (Number, street, rural route, apartment, or su	te number)						
	MEDIACOM PARK, NY 10918							
	(City, town, state, zip)			h				
С	INSTRUCTIONS: In line 1, give any bunch names already appear in space B. In line							
System	1	l:						
	MEDIACOM WISCONSIN LLC							
	MAILING ADDRESS OF CABLE SYST	EM:						
	2 1504 Second Street, S.E. (Number, street, rural route, apartment, or su	te number)						
	Waseca, MN 56093							
	(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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II					
	MEDIACOM WISCONSIN LLC	3717					
D	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 know as the "first community." Please use it as the first community on all future filings.						
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mo identified city.	bile home parks should be reported in parentheses below the					
	CITY OR TOWN	STATE					
First	Fort McCoy	WI					
Community							
Add Rows as Necessary							

							FORM SA1-				
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:				SYS	TEM ID			
	MEDIACOM WISCONSI	N LLC						3717			
-	SECONDARY TRANSMISSION	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES									
E	In General: The information in s		-		•						
Secondary	system, that is, the retransmission about other services (including particular services)										
Transmission	last day of the accounting period										
Service: Sub-	,,	`	,	,	,	ble system	, broken				
scribers and	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										
Rates	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 of				•	,	ae and the				
	unit in which it is generally billed	-				-	-				
	category, but do not include disc										
	Block 1: In the left-hand block			-	•						
	systems most commonly provide that applies to your system. Not										
	categories, that person or entity		-		-						
	subscriber who pays extra for ca	able service to	additional sets woul	d be include	d in the count u	nder "Servi	ce to the				
	first set" and would be counted o										
	Block 2: If your cable system printed in block 1 (for example, t	-	•								
	with the number of subscribers a					,					
	sufficient.	,	5		•						
	BLO	DCK 1	-			BLOCK					
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RATI			
	Residential:					-					
	Service to first set		2 0-62.99								
	 Service to additional set(s) 										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		0 0-62.99)							
	Converter										
	Residential										
	 Non-residential 										
	SERVICES OTHER THAN SEC			TES							
-	In General: Space F calls for ra				all your cable sy	stem's serv	vices that were				
F	not covered in space E, that is, t										
Comisso	service for a single fee. There as furnished at cost or (2) services		,	0		0.0	,				
Services Other Than											
Secondary	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.										
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 services in the form of a brief (two- or three-word) description and include the rate for each.										
	CATEGORY OF SERVICE	BLO RATE	CATEGORY OF SI	RVICE	RATE	CATEGO	BLOCK 2 DRY OF SERVICE	RATE			
	Continuing Services:	TUTE	Installation: Non-r		TUTE	0/TEOC		TUTL			
	• Pay cable	PP	• Motel, hotel			Variety	τν	####			
	• Pay cable—add'l channel	PP	Commercial								
	Fire protection		• Pay cable								
	•Burglar protection		• Pay cable-add'l	channel							
	Installation: Residential		Fire protection								
	• First set	75.00	 Burglar protecti 	on							
	 Additional set(s) 	49.00	Other services:								
		1	Deserves		40.00						
	• FM radio (if separate rate)		 Reconnect 		49.00						
	• FM radio (if separate rate) • Converter	9.99	Reconnect Disconnect		49.00						
	, , ,	9.99		n	49.00						

	ст.						
Name	LEGAL NAME OF OWNER OF			SYSTEM 37			
	MEDIACOM WISCONSIN LLC PRIMARY TRANSMITTERS: TELEVISION						
G Primary Transmitters: 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 te						
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION			
	1. CALL SIGN WEAU/WEAU(HD) NBC	2. B'CAST CHANNEL NUMBER 38	3. TYPE OF STATION N	4. LOCATION OF STATION Eau Claire, WI			
	WEAU/WEAU(HD) NBC	38	N	Eau Claire, WI			
	WEAU/WEAU(HD) NBC	38 38.2	N I-M	Eau Claire, WI Eau Claire, WI			
	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV	38 38.2 38.3	N I-M I-M	Eau Claire, WI Eau Claire, WI Eau Claire, WI			
	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV WEAU-DT4 Movies!	38 38.2 38.3 38.4	N I-M I-M	Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI			
ld Rows as Necessary	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV WEAU-DT4 Movies! WEAU/WEAU-DT5 (HD) CW	38 38.2 38.3 38.4 38.5	N I-M I-M I-M	Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI			
d Rows as Necessary	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV WEAU-DT4 Movies! WEAU/WEAU-DT5 (HD) CW WHLA/WHLA(HD) PBS	38 38.2 38.3 38.4 38.5 30	N I-M I-M I-M E	Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI LaCrosse, WI			
d Rows as Necessary	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV WEAU-DT4 Movies! WEAU/WEAU-DT5 (HD) CW WHLA/WHLA(HD) PBS WHLA-DT2 PBS TWC HD	38 38.2 38.3 38.4 38.5 30 30.2	N i-M i-M i-M E E E-M	Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI LaCrosse, WI LaCrosse, WI			
d Rows as Necessary	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV WEAU-DT4 Movies! WEAU/WEAU-DT5 (HD) CW WHLA/WHLA(HD) PBS WHLA-DT2 PBS TWC HD WHLA-DT3 PBS Create	38 38.2 38.3 38.4 38.5 30 30.2 30.3	N I-M I-M I-M E E-M E-M	Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI LaCrosse, WI LaCrosse, WI			
d Rows as Necessary	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV WEAU-DT4 Movies! WEAU/WEAU-DT5 (HD) CW WHLA/WHLA(HD) PBS WHLA-DT2 PBS TWC HD WHLA-DT3 PBS Create WHLA-DT4 PBS Kids	38 38.2 38.3 38.4 38.5 30 30.2 30.3 30.4	N I-M I-M I-M E E E-M E-M E-M	Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI			
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d Rows as Necessary	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV WEAU-DT4 Movies! WEAU/WEAU-DT5 (HD) CW WHLA/WHLA(HD) PBS WHLA-DT2 PBS TWC HD WHLA-DT3 PBS Create WHLA-DT4 PBS Kids WKBT/WKBT(HD) CBS WKBT/WKBT(HD) CBS WKBT-DT2 (MYNET) WLAX/WLAX(HD) FOX WLAX-DT2 Antenna TV	38 38.2 38.3 38.3 38.4 38.5 30 30.2 30.3 30.4 8 8.2 17 17.2	N 	Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI			
d Rows as Necessary	WEAU/WEAU(HD) NBC WEAU-DT2 Cozi WEAU-DT3 MeTV WEAU-DT4 Movies! WEAU/WEAU-DT5 (HD) CW WHLA/WHLA(HD) PBS WHLA-DT2 PBS TWC HD WHLA-DT3 PBS Create WHLA-DT4 PBS Kids WKBT/WKBT(HD) CBS WKBT-DT2 (MYNET) WLAX/WLAX(HD) FOX WLAX-DT2 Antenna TV WLAX-DT3 Laff	38 38.2 38.3 38.4 38.5 30 30.2 30.3 30.4 8 8.2 17 17.2 17.3	N 	Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI Eau Claire, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI LaCrosse, WI			
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all-band basis of Special Instru receivable if (1 on the basis of For detailed inf paper SA1-2 for Column 1: 1 Column 2: 5 Column 3: 1 signal, indicate	st every radio s whose signals ctions Conce) it is carried by monitoring, to ormation abou rrm. dentify the call	station ca were ge rning Al y the sys be recei	arried on a separate and discro nerally receivable by your cab I-Band FM Carriage: Under C	le system during		ions car	ried on an	н
eceivable if (1 on the basis of For detailed inf paper SA1-2 for Column 1: I Column 2: S Column 3: I signal, indicate) it is carried by monitoring, to ormation about orm. dentify the call	y the sys be recei				g period		
	f the radio stat this by placing Give the station	l sign of e the static ion's sigi g a checl n's locati	tem whenever it is received a ived 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 the the community with which the	t the system's he system's FM ante this point, see pay ed by the cable s he station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC) it can l ertain sta eneral ir eparate a	be expected, ated intervals. Instructions in the. and discrete	Primary Transmitters Radio
	<u> </u>					0 /5		
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							SYSTEM I	
Name	MEDIACOM WISCONS							371	
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LC	G				
	In General: In space I, ident								
	substitute basis during the a								
Substitute Carriage:	explanation of the program				ne general ins	structions	in the pape	er 5A 1-2 10fm.	
Special	 SPECIAL STATEMEN During the accounting pe 	-			eie anv nonr	otwork to	levision pr	ogram	
tatement and	broadcast by a distant sta	•	al cable system	in carry, on a substitute ba	1313, any 11011				
Program Log	Note: If your answer is "No		rest of this no	age blank. If your answer i	с "Vec " vou r	nust com	YES		
	log in block 2.			ige blank. If your answer h	5 103, you1			logiam	
	2. LOG OF SUBSTITUT	E PROGRA	MS						
	In General: List each subs	stitute progra	am on a separ		s wherever po	ossible, if	their mear	ning is	
	clear. If you need more spa					aat during	the energy	unting	
	period, was broadcast by a			vision program ("substitute our cable system substitut					
	under certain FCC rules, re								
	Do not use general catego		ovies" or "bask	etball." List specific progra	am titles, for e	example, "	'I Love Luc	cy" or	
	"NBA Basketball: 76ers vs. Column 2: If the program		dcast live_ent	er "Yes." Otherwise enter	"No "				
				casting the substitute prog					
			,	the community to which th			the FCC o	or, in	
	the case of Mexican or Car Column 5: Give the more			e community with which the stem carried the substitute			als with th	e month	
	first. Example: for May 7 gi	•	when your sy		e program. Os		ais, with th	emontin	
	Column 6: State the tim	nes when the		ogram was carried by you					
			a program car	ried by a system from 6:01	1:15 p.m. to 6	:28:30 p.r	n. should l	be	
	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."								
			listed presses	n was substituted for prog	romanain a that			au viva d	
	Column 7: Enter the let	ter "R" if the		n was substituted for prog					
	Column 7: Enter the let to delete under FCC rules	ter "R" if the and regulation	ions in effect o	luring the accounting perio	od; enter the l	etter "P" i	f the listed		
	Column 7: Enter the let	ter "R" if the and regulation mming that y	ions in effect o	luring the accounting perio	od; enter the l	etter "P" i	f the listed		
	Column 7: Enter the let to delete under FCC rules was substituted for program	ter "R" if the and regulation mming that y	ions in effect o	luring the accounting perio	od; enter the l ler FCC rules	etter "P" i and regu	f the listed llations in		
	Column 7: Enter the let to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the and regulation mming that y S.	ions in effect o	luring the accounting period ras permitted to delete und	od; enter the l ler FCC rules WHE	etter "P" it and regu	f the listed llations in	7. REASON F	
	Column 7: Enter the let to delete under FCC rules was substituted for prograr effect on October 19, 1976	tter "R" if the and regulation mming that y 5. SUBSTITUTE 2. LIVE?	E PROGRAM	luring the accounting period ras permitted to delete und	wd; enter the l der FCC rules WHE CARRI. 5. MONTH	etter "P" in and regun N SUBST AGE OCC	f the listed llations in FITUTE CURRED TIMES	7. REASON F	
	Column 7: Enter the let to delete under FCC rules was substituted for prograr effect on October 19, 1976	tter "R" if the and regulation mming that y b. SUBSTITUTE	ions in effect of your system w	luring the accounting period ras permitted to delete und	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	
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Accounting Period:	2024/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM WISCONSIN LLC	S	YSTEM ID# 37171
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.	ission service amount, see	9,332.79 ss receipts)
L Copyright 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 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	. <u></u>	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,	00)	
	1. Base amount under statutory formula \$ 263,800.00		
	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		hts!

Accounting Period:	2024/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MEDIACOM WISCONSIN LLC	SYSTEM ID# 37171
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 41
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	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) 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 X (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable 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 ow 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 hereia 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 mer 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 WISCONSIN LLC	3717
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."	P 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.	
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	
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
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	-
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.	

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