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					
02/26/2025	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		Barcode Data Filing Period (optional - see instructions)
Accounting 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 General Communication Inc.
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		2550 Denali Street, Ste. 1000 (Number, street, rural route, apartment, or suite number)
		Anchorage, AK 99503-2751 (City, town, state, zjp)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these is 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:
		GCI Cable, Inc Juneau
		MAILING ADDRESS OF CABLE SYSTEM:
	2	8390 Airport Rd., Ste. 101 (Number, street, rural route, apartment, or suite number)
		Juneau, AK 99801 (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.

Community Comm		T	FORM SA1-2E. PAG
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC ru "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including sing 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 kn 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 parentheses below the identified city. CITY OR TOWN STATE Juneau AK	Name		SYSTEM
"a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including sing 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 kn 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 parentheses below the identified city. CITY OR TOWN STATE Juneau AK			
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 kn 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 parentheses below the identified city. CITY OR TOWN STATE Juneau AK Community			
Area Served CITY OR TOWN STATE First Community Community Community STATE Juneau Area Juneau Community Community STATE Juneau AK Community STATE AK Community Community	D		
Area Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city. CITY OR TOWN STATE Juneau AK Community	_		
Area Served identified city. CITY OR TOWN STATE First Juneau AK Community			
CITY OR TOWN STATE First Juneau AK Community	Area		nobile home parks should be reported in parentheses below the
First Juneau AK Community	Served	identified city.	
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Community			
		Juneau	AK
Rose a November 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Community		
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	d Rows as Necessary		
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Accounting Period: 2024/2
FORM SA1-2E. PAGE 2.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

General Communication Inc.

SYSTEM ID# 9888

Ε

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.

BL	OCK 1	BLOCK 2				
	NO. OF			NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:						
Service to first set	810	\$15.18				
Service to additional set(s)						
• FM radio (if separate rate)						
Motel, hotel						
Commercial	0	#DIV/0!				
Converter						
Residential						
Non-residential					0	

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	\$20.90	Motel, hotel		Digital Converter	5.99
 Pay cable—add'l channel 		Commercial		Tier 2	\$61.22
Fire protection		• Pay cable		Digital Tiers	14.25
Burglar protection		 Pay cable-add'l channel 			
Installation: Residential		Fire protection		DVR Tuner	14.99
• First set	25.50	Burglar protection			
 Additional set(s) 	15.00	Other services:			
 FM radio (if separate rate) 		Reconnect	20.00		
Converter		Disconnect			
		Outlet relocation	20.00		
		 Move to new address 			

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 9888

General Communication Inc.

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, *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
KJUD	8.1	N	Juneau, AK
KJUD-2	8.2	I-M	Juneau, AK
KJUD-3	8.3	I-M	Juneau, AK
KATH	35.1	N	Juneau, AK
KDMD-2	38.2	<u>l</u>	Anchorage, AK
KYES	5.1	N	Juneau, AK
ктоо	10.1	E	Juneau, AK
KTOO-2	10.2	E-M	Juneau, AK
KT00-3	10.3	E-M	Juneau, AK
KTOO-4	10.4	E-M	Juneau, AK
KYES-2	5.2	I-M	Juneau, AK

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

9888

General Communication Inc.

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
KVIM	FM	Х	JUNEAU, AK				
KJNO	AM	X	JUNEAU, AK				
KTOO	FM	Х	JUNEAU, AK				
KTKU	FM	Х	JUNEAU, AK			1	
KSUP	FM	Х	JUNEAU, AK				
KBJZ	FM	Х	JUNEAU, AK				
KXLI	AM	X	JUNEAU, AK				
MOODY	FM	Х	JUNEAU, AK			1	
KINY	AM	Х	JUNEAU, AK			1	
KXLL	FM	Х	JUNEAU, AK			1	
KRNN	FM	X	JUNEAU, AK				
							
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Accounting Perio	LEGAL NAME OF OWNER OF	F CABLE SYS	STEM:							FUR	M SA1-2E. PAGE 5. SYSTEM ID#
Name	General Communicat										9888
											0000
Substitute	SUBSTITUTE CARRIAGE In General: In space I, iden substitute basis during the explanation of the programi	ntify every no accounting p ming that mu	nnetwork televi eriod, under sp est be included	isio peci in t	n program, broadcast by ific present and former F his log, see page (v) of the	a <i>distant</i> CC rules,	reg	ulations,	or au	ıthorizatic	ns. For a further
Carriage: Special	SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program										
Statement and Program Log	 During the accounting per broadcast by a distant sta 	•	ur cable systei	m c	arry, on a substitute ba	sis, any r	onr	network t	elevi	sion prog	x NO
	Note: If your answer is "N	o", leave the	rest of this pa	age	blank. If your answer is	"Yes," y	ou r	nust con	nplete	-	
	log in block 2.	TE DECOR	· · · · ·								
	2. LOG OF SUBSTITUT In General: List each subsclear. If you need more sp Column 1: Give the title period, was broadcast by a under certain FCC rules, r Do not use general catego "NBA Basketball: 76ers vs Column 2: If the progra Column 3: Give the brot the case of Mexican or Ca Column 5: Give the brot first. Example: for May 7 g Column 6: State the tin to the nearest five minutes stated as "6:00–6:30 p.m.' Column 7: Enter the let to delete under FCC rules was substituted for progra effect on October 19, 1976	stitute prograce, please of every not a distant state egulations, ories like "mo. Bulls." Im was broad a sign of the badcast stationadian station and day ive "5/7." In the swhen the second case when	am on a separ add additional connetwork tele- tion and that your authorization ovies" or "bask dcast live, ent station broadd on's location (ons, if any, the when your sy e substitute pro a program car e listed program ions in effect of	I ro visitions. ceth cer " cast the cogr rogr rried m w	ws to the tables. ion program ("substitute r cable system substitut See page (v) of the ger ball." List specific progra "Yes." Otherwise enter " ting the substitute progra community to which the man carried the substitute ram was carried by your d by a system from 6:01 was substituted for progra ng the accounting perio	e programed for the heral instimutitles, for the heral instimutitles, for the heral institution is estation is programed; cable sy:15 p.m.	s lice ster to 6	nat, durin ogrammi ions for t example, censed b entified). se nume m. List th :28:30 p	ng the ng of urthe "I Lo yy the rals, ne tim .m. s	e account another information for the country of th	ting station ation. or in month rately
		NUDOTITUT	T DDOODAA					N SUBS			7. REASON FOR
	1. TITLE OF PROGRAM	1	E PROGRAM 3. STATION'S	т —		5. MON		AGE OC	. TIM		DELETION
	1. 11122 01 1 1 (0010 (0)	Yes or No	CALL SIGN	4.	STATION'S LOCATION	AND DA	۱Y	FROM		ТО	
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: General Communication Inc.	31	/STEM I 98
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transi (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	mission service	
	Gross receipts from subscribers for secondary transmission service(s) during the accounting period	\$ 89	,931.00
	IMPORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gro	•
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.	\$263,80(
	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 t accounting period is \$52.00	his six-month	
	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 \$137,1	00)	
	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)	
	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		
	The state of the s		
Filing Fee and otal Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
	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
	EFT Trace # or TRANSACTION ID #		
	<u>Important:</u> Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more		

Accounting Period:	2024/2				FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF General Communication				SYSTEM ID# 9888
M Channels	to its subscribers, and (2) the subscribers to its subscribers, and (2) the subscribers to its subscribers to its subscribers, and (2) the subscribers to its subscribers.	ne cable system's tot	channels on which the cable system carried teletal number of activated channels during the acc		13
	Enter the total number of on which the cable system and nonbroadcast service	carried television b	oroadcast stations		304
N Individual to Be Contacted	INDIVIDUAL TO BE CONT we can contact about this st		ER INFORMATION IS NEEDED (Identify an ind .)	lividual to whom	
for Further Information	Name Cindy I	Hall		Telephone 90	7-868-5615
	(Number, st	enali Street, Sto	ent, or suite number)		
	Anchol (City, town,	rage, AK 99503 state, zip)			
	Email	chall2@gci.co	om	Fax (optional) 907-868-981	17
O Certification			st be certified and signed in accordance with Co	opyright Office regulations)	
Commodition			artnership) I am the owner of the cable system as	s identified in line 1 of space B; or	r
			tion or partnership) I am the duly authorized age vner is not a corporation or partnership; or	ent of the owner of the cable syste	em as identified
	X (Officer or partn in line 1 of spa	,	a corporation) or a partner (if a partnership) of th	ne legal entity identified as owner	of the cable system
		ect to the best of my k	nereby declare under penalty of law that all staten knowledge, information, and belief, and are made		
			X /s/ Josh Lonn		
			Enter an electronic signature on the line above to c Enter signature using an "/s/ signature" (e.g., /s/ Jo	•	
		Typed or printed r	name: Josh Lonn		
			Chief Product Officer cial position held in corporation or partnership)		
		Date:		February 26, 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.

EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
General Communication Inc.	9888
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.	
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 Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
x	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
x days	_
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@copyright.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 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.