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							
AMOUNT							
\$							
ALLOCATION NUMBER							

Return completed workbook by email to:

### coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
	Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
	20242 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
	Fidelity Cablevision, LLC
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
	CoBridge Broadband, LLC dba Sparklight
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM
	64 N Clark (Number, street, rural route, apartment, or suite number)
	Sullivan, MO 63080 (City, town, state, zip)
	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
С	names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1 IDENTIFICATION OF CABLE SYSTEM:
	MAILING ADDRESS OF CABLE SYSTEM:
	2 (Number, street, rural route, apartment, or suite number)
	(City, town, state, zip code)

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

		FORM SA1-2E. PAG						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM						
	Fidelity Cablevision, LLC 2218							
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "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 known 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 mobile holdentified city.	ome parks should be reported in parentheses below the						
Served	·							
	CITY OR TOWN	STATE						
First Community	Thayer Mammoth Spring	MO AR						
Rows as Necessary								

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Fidelity Cablevision, LLC

SYSTEM ID# 22187

Е

### 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		BLOCH	₹2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
Service to first set	73	42.00	IPTV	14	42.00
<ul> <li>Service to additional set(s)</li> </ul>					
<ul> <li>FM radio (if separate rate)</li> </ul>					
Motel, hotel					
Commercial	9	42.00			
Converter					
Residential					
Non-residential					

F

Services Other Than Secondary Transmissions: Rates

# SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	10.99-19.00	<ul> <li>Motel, hotel</li> </ul>		Standard Cable	86.00
<ul> <li>Pay cable—add'l channel</li> </ul>		<ul> <li>Commercial</li> </ul>		Digital Value Pack	16.00
Fire protection		• Pay cable		Standard IPTV	86.00
•Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>			
Installation: Residential		<ul> <li>Fire protection</li> </ul>			
• First set		<ul> <li>Burglar protection</li> </ul>			
<ul> <li>Additional set(s)</li> </ul>		Other services:			
<ul> <li>FM radio (if separate rate)</li> </ul>		<ul> <li>Reconnect</li> </ul>	\$30		
Converter		Disconnect			
		<ul> <li>Outlet relocation</li> </ul>			
		<ul> <li>Move to new address</li> </ul>			

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 22187

Fidelity Cablevision, LLC

G

### Primary Transmitters: Television

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
K36NN-D	36		WEST PLAINS, MO
KAIT	27	N	JONESBORO, AR
KOLR	10	N	SPRINGFIELD, MO
KOLR-DT2	10.2	I-M	SPRINGFIELD, MO
KOLR-DT3	10.3	I-M	SPRINGFIELD, MO
KOLR-DT4	10.4	I-M	SPRINGFIELD, MO
KOZK	16	E	SPRINGFIELD, MO
KOZL-TV	28	<b> </b>	SPRINGFIELD, MO
KOZL-DT2	28.2	I-M	SPRINGFIELD, MO
KOZL-DT3	28.3	I-M	SPRINGFIELD, MO
KRBK	22	l	OSAGE BEACH, MO
KRBK-DT2	22.2	I-M	OSAGE BEACH, MO
KRBK-DT3	22.3	I-M	OSAGE BEACH, MO
KSPR	34	N	SPRINGFIELD, MO
KYCW-LD	24	l	SPRINGFIELD, MO
KYTV	19	N	SPRINGFIELD, MO
KYCW-DT2	24.2	I-M	SPRINGFIELD, MO
KYCW-DT3	24.3	I-M	SPRINGFIELD, MO
KAIT-SIMUL	27	N	SPRINGFIELD, MO
KOLR-SIMUL	10	N	SPRINGFIELD, MO
KOZK-SIMUL	16	E	SPRINGFIELD, MO
KOZL-SIMUL	28	<u> </u>	SPRINGFIELD, MO
KRBK-SIMUL	22	<u> </u>	OSAGE BEACH, MO

Accounting Period: 2	2023/2			FORM SA1-2E. PAGE 3.		
	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM ID#		
Name	Fidelity Cablevision,	LLC		22187		
	PRIMARY TRANSMITTERS:	TELEVISION				
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 othe 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  Colum					
	1. CALL SIGN	1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION 4. LOCATIO				
	KSPR - SIMUL	34	N	SPRINGFIELD, MO		
	KYTV - SIMUL	19		SPRINGFIELD, MO		
Add Rows as Necessary	KYCW-LD-SIMUL	24		SPRINGFIELD, MO		
,		<u>-</u> ,		,		
				,		

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

FORM SA1-2E. PAGE 4.

Fidelity Cablevision, LLC

22187

### 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
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		<del> </del>					
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od: 2024/2						FOI	RM SA1-2E. PAGE 5.
LEGAL NAME OF OWNER OF		STEM:					SYSTEM ID#
Fidelity Cablevision, I	LLC						22187
In General: In space I, iden substitute basis during the explanation of the program.  1. SPECIAL STATEMEN  During the accounting period broadcast by a distant stance. If your answer is "Note: If y	ntify every no accounting printing that multiple that mult	period, under sy period, under sy ust be included RNING SUBS ur cable syste e rest of this pa	rision program, broadcast by pecific present and former F in this log, see page (v) of the strict CARRIAGE m carry, on a substitute basege blank. If your answer in the strict line. Use abbreviation.	y a distant stat FCC rules, reg the general ins asis, any nonr s "Yes," you r	ulations, o structions i network te nust comp	r authorization the paper levision pro	ons. For a further SA1-2 form.  gram  X NO ogram
Column 1: Give the title period, was broadcast by a under certain FCC rules, roon to use general categor "NBA Basketball: 76ers vs. Column 2: If the progra Column 3: Give the cal Column 4: Give the brothe case of Mexican or Ca Column 5: Give the mofirst. 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 left to delete under FCC rules was substituted for progra	e of every not a distant state egulations, ories like "mos. Bulls." at was broad a sign of the badcast stationath and day give "5/7." anes when the s. Example: "tter "R" if the and regulate mming that	onnetwork tele tion and that y or authorizatio ovies" or "bask adcast live, enf station broad ion's location ( ions, if any, the y when your sy e substitute pi a program car e listed progra- cions in effect of	evision program ("substitute our cable system substitute our cable system substitute ons. See page (v) of the geketball." List specific prograter "Yes." Otherwise enter casting the substitute prog (the community to which the community with which the other carried the substitute or carried by a system from 6:00 m was substituted for progduring the accounting period	ted for the properties of the	pegramming ions for fu example, " eensed by entified). se numera m. List the :28:30 p.r your syst etter "P" if and regu	g of anothe urther inform I Love Lucy the FCC o als, with the etimes accum. should be tem was reaf the listed plations in	r station lation.  r, in month lately equuired
S				CARRI	AGE OCC	CURRED	7. REASON FOR DELETION
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM	— TO	
	SUBSTITUTE CARRIAGE In General: In space I, ider substitute basis during the explanation of the program  1. SPECIAL STATEMEN • During the accounting pe broadcast by a distant stance Note: If your answer is "N log in block 2.  2. LOG OF SUBSTITUT In General: List each subsclear. If you need more sp Column 1: Give the title period, was broadcast by under certain FCC rules, r Do not use general catego "NBA Basketball: 76ers vs Column 2: If the progra Column 3: Give the cal Column 4: Give the brothe case of Mexican or Ca Column 5: Give the mo 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	In General: In space I, identify every no substitute basis during the accounting pexplanation of the programming that mu.  1. SPECIAL STATEMENT CONCEI  • During the accounting period, did yo broadcast by a distant station?  Note: If your answer is "No", leave the log in block 2.  2. LOG OF SUBSTITUTE PROGR. In General: List each substitute progrelear. If you need more space, please Column 1: Give the title of every neperiod, was broadcast by a distant statunder certain FCC rules, regulations, Do not use general categories like "m"NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast state the case of Mexican or Canadian static Column 5: Give the broadcast state the case of Mexican or Canadian static Column 5: Give the month and day first. Example: for May 7 give "5/7."  Column 6: State the times when the to the nearest five minutes. Example: stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the to delete under FCC rules and regulated was substituted for programming that effect on October 19, 1976.  SUBSTITUT	SUBSTITUTE CARRIAGE: SPECIAL STATEMIS In General: In space I, identify every nonnetwork televisubstitute basis during the accounting period, under sexplanation of the programming that must be included 1. SPECIAL STATEMENT CONCERNING SUBS • During the accounting period, did your cable syster broadcast by a distant station?  Note: If your answer is "No", leave the rest of this puriod in block 2.  2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separal clear. If you need more space, please add additional Column 1: Give the title of every nonnetwork teleperiod, was broadcast by a distant station and that younder certain FCC rules, regulations, or authorization Do not use general categories like "movies" or "basis". Column 2: If the program was broadcast live, encolumn 3: Give the call sign of the station broad Column 4: Give the broadcast station's location of the case of Mexican or Canadian stations, if any, the Column 5: Give the month and day when your syfirst. Example: for May 7 give "5/7."  Column 6: State the times when the substitute propertion to the nearest five minutes. Example: a program can stated as "6:00—6:30 p.m."  Column 7: Enter the letter "R" if the listed progration delete under FCC rules and regulations in effect of was substituted for programming that your system of the substitute program of the substitute program of the substitute program of the substitu	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LO In General: In space I, identify every nonnetwork television program, broadcast by substitute basis during the accounting period, under specific present and former F explanation of the programming that must be included in this log, see page (v) of 1  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute be broadcast by a distant station?  Note: If your answer is "No", leave the rest of this page blank. If your answer i log in block 2.  2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviation clear. If you need more space, please add additional rows to the tables.  Column 1: Give the title of every nonnetwork television program ("substitute period, was broadcast by a distant station and that your cable system substitu under certain FCC rules, regulations, or authorizations. See page (v) of the ge Do not use general categories like "movies" or "basketball." List specific progra "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter Column 3: Give the call sign of the station broadcasting the substitute prog Column 4: Give the broadcast station's location (the community to which the the case of Mexican or Canadian stations, if any, the community with which th Column 5: Give the month and day when your system carried the substitute first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by you to the nearest five minutes. Example: a program carried by a system from 6:0' stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for prog to delete under FCC rules and regulations in effect during the accounting peric was substituted for programming that your system was permitted to delete under effect on October 19, 1976.	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station substitute basis during the accounting period, under specific present and former FCC rules, regexplanation of the programming that must be included in this log, see page (v) of the general instance of the programming that must be included in this log, see page (v) of the general instance of the programming that must be included in this log, see page (v) of the general instance of the general instanc	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that y substitute basis during the accounting period, under specific present and former FCC rules, regulations, o explanation of the programming that must be included in this log, see page (v) of the general instructions in 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  * During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork to broadcast by a distant station?  Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complog in block 2.  2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if clear. If you need more space, please add additional rows to the tables.  Column 1: Give the title of every nonnetwork television program ("substitute program") that, during period, was broadcast by a distant station and that your cable system substituted for the programmin under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further than the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast station's location (the community to which the station is licensed by the case of Mexican or Canadian stations, if any, the community with which the station is identified).  Column 5: Give the month and day when your system carried by your cable system. List the to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.r.  Column 7: Enter the letter "R" if the listed program was substituted for programming that your syst to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" is was	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG  In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable sy substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizati explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  - During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television pro broadcast by a distant station?  Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the prolog in block 2.  2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaniclear. If you need more space, please add additional rows to the tables.  Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounteriod, was broadcast by a distant station and that your cable system substituted for the programming of another under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further inform Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy "NBA Basketball: Toers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program. Use numerals, with the first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by your cable system. List the times accut 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 region

counting Period:	<b>2024/2</b> FORM	SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Fidelity Cablevision, LLC	SYSTEM II
	Fidelity Cablevision, LLC	2218
1/	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of	of
K Gross Receipts	all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission servic (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see	
	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. \$	46,413.00
	IMPORTANT: You must complete a statement in space P concerning gross receipts.  (Amount of	gross receipts)
L	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe:	
Copyright Royalty Fee	<ul> <li>Complete block 1, block 2, or block 3.</li> <li>Use block 1 if the amount of gross receipts in space K is \$137,100 or less</li> </ul>	
rtoyalty i co	• Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800	
	<ul> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600</li> <li>See page (vi) of the general instructions located in the paper SA1-2 form for more information.</li> </ul>	
	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 this six-mon accounting period is \$52.00	
	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)	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	_
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	
	FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	
otal Remittance Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	_
	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 Register of Copyr See page i of the general instructions in the paper SA1-2 form for more information.	ngnis:

Accounting Period:	2024/2			FORM SA1-2E. PAGE 7
Name	Fidelity Cables	WNER OF CABLE SYSTEM: ision, LLC		SYSTEM ID# 22187
M Channels			els on which the cable system carried television broadcast stations nber of activated channels during the accounting period.	
Citamicic		number of channels on which the cal television broadcast stations	ble	26
	on which the ca	number of activated channels ble system carried television broadca ast services	ast stations	295
N Individual to Be Contacted		BE CONTACTED IF FURTHER INF bout this statement of account.)	ORMATION IS NEEDED (Identify an individual to whom	
for Further Information	Name	Jenae Heck	Telephone	602-364-6092
	Address	210 E. Earll Dr. (Number, street, rural route, apartment, or s	uite number)	
		Phoenix, AZ 85012-2626 (City, town, state, zip)		
	Email	melinda.lahmann@fid	elitycommunications.com Fax (optional)	
_	CERTIFICATION	This statement of account must be c	ertified and signed in accordance with Copyright Office regulations)	
O Certification	• I, the undersign	d, hereby certify that (Check one, but o	only one , of the boxes.)	
	(Owne	r other than corporation or partners	<b>chip)</b> I am the owner of the cable system as identified in line 1 of space B	3; or
		of owner other than corporation or ine 1 of space B and that the owner is	partnership) I am the duly authorized agent of the owner of the cable synot a corporation or partnership; or	ystem as identified
		<b>er or partner)</b> I am an officer (if a corp ine 1 of space B.	oration) or a partner (if a partnership) of the legal entity identified as own	ner of the cable system
		e, and correct to the best of my knowle	declare under penalty of law that all statements of fact contained herein dge, information, and belief, and are made in good faith.	
		X	/s/ Christopher Arntzen	
			an electronic signature on the line above to certify this statement. signature using an "/s/ signature" (e.g., /s/ John Smith)	
		Typed or printed name	: Christopher Arntzen	
			ice President ition held in corporation or partnership)	
		Date:	February 24, 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#
lelity Cablevision, LLC	22187
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?	P Special Statement Concerning Gross Receipts Exclusion
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.  Line 1 Enter the amount of late payment or underpayment	Q 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.	
Owner Address	
ID number First community served Accounting period	

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