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 COPYRIGH	IT OFFICE USE ONLY	Return completed workbook by email to:
		insmissions by	DATE RECEIVED	AMOUNT	
Cable Syste General instru in the first tab	uctions	are located	02/26/2025	\$ ALLOCATION NUMBER	coplicsoa@copyright.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCO	OUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))	
		2024/2	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 t title of the subsidiary, not that of the pare		idiary of another corporation, give the full	corporate
Owner		List any other name or names under which	h the owner conducts the business of	the cable system.	
		If there were different owners during the single statement of account and royalty f		the last day of the accounting period shoul ting period.	d submit a
		Check here if this is the system's first filin	g. If not, enter the system's ID number	assigned by the Licensing Division.	29837
		LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM		
		General Communication In	IC.		
		BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFERENT	<b>[</b> )	
		MAILING ADDRESS OF OWNER OF			
		2550 Denali Street, Ste. 100 (Number, street, rural route, apartment, or suite n			
		Anchorage, AK 99503-2751 (City, town, state, zip)	l		
С		, <b>0</b> ,		ntify the business and operation of t ie system, if different from the addre	
System		IDENTIFICATION OF CABLE SYSTEM:	, , , , , , , , , , , , , , , , , , , ,	, ,	5
	1	GCI Cable, Inc Homer			
		MAILING ADDRESS OF CABLE SYSTEM	:		
	2	3541 Greatland St. (Number, street, rural route, apartment, or suite n	umber)		
		Homer, AK 99603 (City, town, state, zip code)			
	•				
Privacy Act Notic	e: Section	111 of title 17 of the United States Code au	thorizes the Copyright Offce to collect the	e personally identifying information (PII) reque	ested on this

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 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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
Humo	General Communication Inc.	2983
D	Instructions: List each separate community served by the cable system. A "co "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that as the "first community." Please use it as the first community on all future fil Note: Entities and properties such as hotels, apartments, condominiums, or r	ated communities within unincorporated areas and including single, at you list will serve as a form of system identification hereafter know ings.
Area Served	identified city.	nobile nome parks should be reported in parentneses below the
	CITY OR TOWN	STATE
First	Homer	AK
Community	Kachemak City	AK
d Rows as Necessary		
u nows as necessary		
	ากการการการการการการการการการการการการกา	

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:						1-2E. PAGE
Name	General Communication	n Inc.							2983
_	SECONDARY TRANSMISSION		IBSCRIB	RS AND RATES	5				
E	In General: The information in s					nsmission	service of	the cable	
	system, that is, the retransmission								
Secondary	about other services (including p					te must be	those exis	ting on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both					rs to the ca	hle system	broken	
scribers and	down by categories of secondar	•							
Rates	each category by counting the n	•		•	•				
	separately for the particular serv					•	,		
	Rate: Give the standard rate of	-						-	
	unit in which it is generally billed category, but do not include disc				landard ra	ate variation	is within a	particular rate	
	Block 1: In the left-hand block				of second	ary transmi	ssion servi	ce that cable	
	systems most commonly provide	e to their subso	ribers. Giv	e the number of s	subscribe	rs and rate	for each li	sted category	
	that applies to your system. Not			-	-				
	categories, that person or entity subscriber who pays extra for ca								
	first set" and would be counted of					ne count u	nuel Selv		
	Block 2: If your cable system					vice that ar	e different i	from those	
	printed in block 1 (for example, t								
	with the number of subscribers a	and rates, in th	e right-har	d block. A two- o	or three-w	ord descrip	tion of the	service is	
	sufficient.	DCK 1		П			BLOCK	()	
		NO. OF	-				DLOOI	NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATEGO	RY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential:		407						
	Service to first set		107	\$14.99					
	Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	ANSMISSI	ONS: RATES					
F	In General: Space F calls for ra								
•	not covered in space E, that is, t service for a single fee. There ar								
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the ur		usually bi	lled. If any rates a	are charg	ed on a var	iable per-p	rogram basis,	
Secondary	enter only the letters "PP" in the								
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that							were not	
Nates	listed in block 1 and for which a	• •			-	-	-		
	brief (two- or three-word) descrip	otion and inclu	de the rate	for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEGO	RY OF SERVICE		RATE	CATEG	ORY OF SERVICE	RAT
	Continuing Services:		Installati	on: Non-resident	tial			_	
	• Pay cable	\$19.17	Motel					Converter	5.
	Pay cable—add'l channel		• Comn				Tier 2		\$61.
	Fire protection		• Pay c				Digital	Tiers	9.
	•Burglar protection		· · ·	able-add'l channe	el				
	Installation: Residential			rotection			DVR Tu	iner	14.
	• First set	25.50	-	ar protection					
	Additional set(s)	15.00	Other se						
	<ul> <li>FM radio (if separate rate)</li> </ul>		<ul> <li>Record</li> </ul>	nect		20.00			
	- ·								
	• Converter		Disco						
	• Converter		Outlet	nnect relocation to new address		20.00			

counting Period: 2	2024/2			FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM I
	General Communicat	ion Inc.		298
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(4 substitute program basis, an <b>Substitute Basis Stations</b> basis under specific FCC rules basis the station here, and a basis. For further informatic <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on a <b>Column 2:</b> Give the channel of license. For example, W <b>Column 3:</b> Indicate in each educational station, by enter (for independent multicast), For the meaning of these to <b>Column 4:</b> Give the location	also in space I, if the station was carrie on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	t (1) stations carried only on a part- he carriage of certain network progration (2) and (4))]; and (2) certain states arried by your cable system on a such the Special Statement and Program d both on a substitute basis and als see page (v) of the general instruc- program services such as HBO, ES e-air designation. For example, rep evision station for broadcasting over station, an independent station, or (for network multicast), "I" (for indep or "E-M" (for noncommercial education actions in the paper SA1-2 form. t the community to which the station	time basis under rams [sections ations carried on a ubstitute program Log)—if the so on some other tions. PN, etc. Identify each or multistream r the air in its community a noncommercial bendent), "I-M" tional multicast). n is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KTUU	2.1	N	Anchorage, AK
	KTUU-2	2.2	N-M	Anchorage, AK
ows as Necessary	КТВҮ	4.1	-	Anchorage, AK
	KYES	5.1		Anchorage, AK
	KYES-4	5.4	I-M	Anchorage, AK
	KAKM	7.1	E	Anchorage, AK
	KAKM-3	7.3	E-M	Anchorage, AK
	KAKM-2	7.2	E-M	Anchorage, AK
	KAKM-4	7.4	E-M	Anchorage, AK
	KYUR	13.1	N	Anchorage, AK
	KYUR-2	13.2	I-M	Anchorage, AK
	KCFT	35.1	Ι	Anchorage, AK
	KDMD-2	38.2	I-M	Anchorage, AK

General Cor	F OWNER OF (							SYSTEM I 298
	t every radio s	tation ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) on the basis of or detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: C	it is carried by monitoring, to prmation abou rm. dentify the call state whether t the radio stat this by placing Give the statior	y the sys be receint t the Co sign of he static ion's sig g a chech n's locati	II-Band FM Carriage: Under ( stem whenever it is received a ived at the headend, with the opyright Office regulations on 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	It the system's he system's FM ante this point, see pay sed by the cable s he station is licens	adend, and (2 nna, during co ge (v) of the g ystem as a se sed by the FC	!) it can   ertain st eneral ir eparate a	be expected, ated intervals. hstructions in the. and discrete	Primary Transmitters Radio
		-				0/5		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
BBI	AM		Homer, AK					
MJG	AM		Homer, AK					
GTL	AM		Homer, AK					
						[- <b></b>		

ccounting Perio	LEGAL NAME OF OWNER OF	CABLE SYSTEM							SYSTEM ID
Name	General Communicati								2983
	SUBSTITUTE CARRIAG	E: SPECIAL STA	TEMEN	T AND PROGRAM	LOG				
1	In General: In space I, ident					tation. that	vour c	cable svs	tem carried on a
	substitute basis during the a	accounting period, u	nder spec	cific present and forme	er FCC rules, r	egulations,	or aut	horizatio	ns. For a further
Substitute	explanation of the programn	ning that must be inc	cluded in t	this log, see page (v)	of the general	instructions	in the	e paper S	A1-2 form.
Carriage: Special	1. SPECIAL STATEMEN								
Statement and	<ul> <li>During the accounting pe</li> </ul>	riod, did your cable	system o	carry, on a substitute	basis, any no	nnetwork t	elevis	ion prog	
Program Log	broadcast by a distant station?								
	Note: If your answer is "No log in block 2.	o", leave the rest of	this page	e blank. If your answ	er is "Yes," yo	u must com	plete	the prog	gram
	clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. Column 2: If the progration Column 3: Give the call Column 4: Give the bro the case of Mexican or Call Column 5: Give the modifiest. Example: for May 7 gi Column 6: State the time to the nearest five minutes to the nearest five minutes	e of every nonnetwo a distant station and egulations, or autho ries like "movies" of . Bulls." m was broadcast liv sign of the station adcast station's loc nadian stations, if a nth and day when y ive "5/7." nes when the substi . Example: a progra	ork televis d that you prizations. r "baskett ve, enter ' broadcas ation (the ny, the co your syste itute progr	sion program ("substi ir cable system subs . See page (v) of the ball." List specific pro- "Yes." Otherwise end sting the substitute pro- e community to which ommunity with which em carried the substi- ram was carried by y	tituted for the general instru- gram titles, for rogram. In the station is the station is tute program. your cable sys	orogrammin ctions for f r example, licensed b identified). Use numer tem. List th	ng of a urther "I Lov y the rals, w e time	another a r informa ve Lucy" FCC or, vith the n es accura	station tion. or in nonth
	stated as "6:00–6:30 p.m." Column 7: Enter the let to delete under FCC rules was substituted for program	ter "R" if the listed p and regulations in e mming that your sys	effect duri	ing the accounting p	eriod; enter th	e letter "P"	if the	listed pr	
	<b>Column 7:</b> Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the listed p and regulations in e mming that your sys 5.	effect duri stem was	ing the accounting p	eriod; enter th under FCC ru	e letter "P" es and reg IEN SUBS	if the ulation	listed prons in	ogram
	Column 7: Enter the let to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the listed p and regulations in e mming that your sys b. UBSTITUTE PRO	effect duri stem was GRAM	ing the accounting p	eriod; enter th under FCC ru WH CAR	e letter "P" es and reg IEN SUBS RIAGE OC	if the ulation	listed prons in TE	
	<b>Column 7:</b> Enter the lett to delete under FCC rules was substituted for program effect on October 19, 1976	ter "R" if the listed p and regulations in e mming that your sys b. UBSTITUTE PRO	GRAM	ing the accounting p	eriod; enter th under FCC ru WH CAR 5. MONT	e letter "P" es and reg IEN SUBS RIAGE OC	if the ulation TITU <sup>-</sup> CUR	listed prons in TE	ogram 7. REASON FC
	Column 7: Enter the let to delete under FCC rules was substituted for prograr effect on October 19, 1976	ter "R" if the listed p and regulations in e mming that your sys UBSTITUTE PRO 2. LIVE? 3. STA	GRAM	ing the accounting p permitted to delete	eriod; enter th under FCC ru WH CAR 5. MONT	e letter "P" es and reg IEN SUBS RIAGE OC	if the ulation TITU <sup>-</sup> CUR	TE RED S	ogram 7. REASON FC
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Accounting Period:	2024/2 FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM: SYSTEM
Hame	General Communication Inc. 2983
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total c all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se 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.       \$ 11,037.00 (Amount of gross receipts)
	COPYRIGHT ROYALTY FEE
L Copyright Royalty Fee	<ul> <li>Instructions: To compute the royalty fee you owe</li> <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> <li>Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,80(</li> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(</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-month accounting period is \$52.00
	Line 1. Royalty fee for accounting period
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8
	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   \$   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
	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
	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)
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
	EFT Trace # or TRANSACTION ID #
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.

Accounting Period:	2024/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: General Communication Inc.	SYSTEM ID# 29837
<b>M</b> Channels	CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast state to its subscribers, and (2) the cable system's total number of activated channels during the accounting period.         1. Enter the total number of channels on which the cable system carried television broadcast stations         2. Enter the total number of activated channels on which the cable system carried television broadcast stations         on which the cable system carried television broadcast stations and nonbroadcast services	ations 18 282
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     Cindy Hall     Tele       Address     2550 Denali Street, Ste. 1000 (Number, street, rural route, apartment, or sulte number)     Anchorage, AK 99503	ephone 907-868-5615
	(City, town, state, zip) Email chall2@gci.com Fax (optional) 907	<b>'-868-9817</b>
O	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regula         • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)         (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 or         (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the in line 1 of space B and that the owner is not a corporation or partnership; or         X       (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifie 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 containe 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)]         Image: A system of the inter 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:       Josh Lonn         Title:       Chief Product Officer         (Title of official position held in corporation or partnership)	f space B; or e cable system as identified ed as owner of the cable system
	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 fing, a determination that would be made by a court of law.

unting Period: 2024/2	2			FORM SA1-2E. PAGE
AL NAME OF OWNER O	F CABLE SYSTEM:			SYSTEM I
neral Communicat	ion Inc.			2983
The Satellite Home V lowing sentence: "In determining service of prov	<b>MENT CONCERNING GROSS REO</b> liewer Act of 1988 amended Title 17, section g the total number of subscribers and the gui viding secondary transmissions of primary b mounts collected from subscribers receiving	n 111(d)(1)(A), of the C ross amounts paid to th proadcast transmitters,	Copyright Act by adding the fol- he cable system for the basic the system shall not include sub-	P Special Statement Concerning Gross
For more information located in the paper S	on when to exclude these amounts, see the SA1-2 form.	e note on page (vii) of	the general instructions	Receipts Exclusior
made by satellite carr	g period, did the cable system exclude any riers to satellite dish owners?	amounts of gross rece	ipts for secondary transmissions	
X NO				
YES. Enter the to	otal here and list the satellite carrier(s) below	W	\$	
Name Mailing Address		Name Mailing Address		
INTEREST ASSE	SSMENT			
•	nis worksheet for those royalty payments su interest assessment, see page (viii) of the			Q
For an explanation of	interest assessment, see page (viii) of the	general instructions loo	cated in the paper SA1-2 form.	Q Interest Assessmen
For an explanation of		general instructions loo	cated in the paper SA1-2 form.	Q Interest Assessmen
For an explanation of Line 1 Enter the am	interest assessment, see page (viii) of the ount of late payment or underpayment	general instructions loo	cated in the paper SA1-2 form.	Q Interest Assessmen
For an explanation of Line 1 Enter the am	interest assessment, see page (viii) of the	general instructions loo	cated in the paper SA1-2 form.	Q Interest Assessmen
For an explanation of Line 1 Enter the am	interest assessment, see page (viii) of the ount of late payment or underpayment	general instructions loo	cated in the paper SA1-2 form.	Q Interest Assessmen
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For an explanation of Line 1 Enter the and Line 2 Multiply line 1 Line 3 Multiply line 2	interest assessment, see page (viii) of the ount of late payment or underpayment I by the interest rate* and enter the sum her	general instructions loo	xdays	Q Interest Assessmen
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For an explanation of Line 1 Enter the and Line 2 Multiply line 1 Line 3 Multiply line 2 Line 4 Multiply line 3 in space L, (p	interest assessment, see page (viii) of the ount of late payment or underpayment I by the interest rate* and enter the sum her 2 by the number of days late and enter the s 3 by 0.00274** and enter here	general instructions loo re	x	Q Interest Assessment
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