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 COPYRIGH | IT OFFICE USE ONLY | Return completed workbook by email to: |
|--|---------------|----------------------|---|
| for Secondary Transmissions by Cable Systems (Short Form) | DATE RECEIVED | AMOUNT | <u>coplicsoa@loc.gov</u> |
| General instructions are located in the first tab of this workbook | 08/27/2018 | \$ ALLOCATION NUMBER | For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150 |
| | | | |

| A | ACC | OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period)) | |
|----------------------|-----|---|--|
| | | 2018/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31 | |
| Accounting Period | | Barcode Data Filing Period (optional - see instructions) | |
| 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. | |
| | | Τ | |
| | | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM | |
| | | Zito Midwest LLC | |
| | | BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT) | |
| | | Zito Media | |
| | | MAILING ADDRESS OF OWNER OF CABLE SYSTEM | |
| | | PO Box 665 (Number, street, rural route, apartment, or suite number) | |
| | | Coudersport, PA 16915 (City, town, state, zip) | |
| С | | RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s 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: | |
| | 1 | Zito Media - Clay Center | |
| | | 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 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# |
|-------------------|--|---|
| | Zito Midwest LLC | 1263 |
| D | Instructions: List each separate community served by the cable system. A "comm "a separate and distinct community or municipal entity (including unincorporated discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you as the "first community." Please use it as the first community on all future filings. | communities within unincorporated areas and including single, I list will serve as a form of system identification hereafter known |
| Area Served | Note: Entities and properties such as hotels, apartments, condominiums, or mobil identified city. | e home parks should be reported in parentheses below the |
| | CITY OR TOWN | STATE |
| First | Clay Center | NE |
| Community | Sutton | NE |
| | Fairfield | NE |
| Rows as Necessary | Harvard | NE |
| | Edgar | NE |
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| | LEGAL NAME OF OWNER OF C | ARI E SYSTEM | | | | | | FORM SA1 | TEM I |
|-------------------------|---|-------------------|---|--|-------------|-------------------|--------------|----------------|-------|
| Name | Zito Midwest LLC | ADEE OTOTEM. | | | | | | 010 | 12 |
| | | | | | | | | | |
| Е | SECONDARY TRANSMISSION In General: The information in s | pace E should | cover all | categories of | secondary | | | | |
| Secondary | system, that is, the retransmission about other services (including p | | | | | | | | |
| Transmission | last day of the accounting period | | | | | | | | |
| Service: Sub- | Number of Subscribers: Both | | | | | | | | |
| scribers and Rates | down by categories of secondar each category by counting the n | | | | | | | | |
| Rates | separately for the particular serv | | | | | | | charged | |
| | Rate: Give the standard rate c | harged for eac | h catego | ry of service. | nclude bo | th the amount o | f the charg | | |
| | unit in which it is generally billed category, but do not include disc | · · · | , | | ny standai | d rate variations | s within a p | articular rate | |
| | Block 1: In the left-hand block | | | | ies of seco | ondary transmis | sion servic | e that cable | |
| | systems most commonly provide | e to their subsci | ribers. G | ive the numbe | r of subsc | ribers and rate f | or each lis | ted category | |
| | that applies to your system. Note | | | | | | | | |
| | categories, that person or entity subscriber who pays extra for ca | | | | | | | | |
| | first set" and would be counted of | | | | | | | | |
| | Block 2: If your cable system | | | | | | | | |
| | printed in block 1 (for example, t with the number of subscribers a | | | | | | | | |
| | sufficient. | | , ngnt-ne | | | | | | |
| | BL | OCK 1 NO. OF | · | | | | BLOCK | C2 NO. OF | |
| | CATEGORY OF SERVICE | SUBSCRIBI | | RATE | CATI | EGORY OF SEF | RVICE | SUBSCRIBERS | RA |
| | Residential: | | | | | | | | |
| | Service to first set | | 152 | 21.00 | | | | | |
| | Service to additional set(s) | | | | | | | | |
| | • FM radio (if separate rate) | | | | | | | | |
| | Motel, hotel Commercial | | | | | | | | |
| | Converter | | | | | | | | |
| | Residential | | | | | | | | |
| | Non-residential | | | | | | | | |
| | <u></u> | | | | | | | | |
| | SERVICES OTHER THAN SEC | | | | | | | | |
| F | In General: Space F calls for rat not covered in space E, that is, t | • | , | | • | , , | | | |
| - | service for a single fee. There ar | | | | | , | , | | |
| Services | furnished at cost or (2) services | | | | | | | | |
| Other Than Secondary | amount of the charge and the un enter only the letters "PP" in the | | usually t | billed. If any ra | tes are ch | arged on a varia | able per-pro | ogram basis, | |
| ransmissions: | | | he cable | system for ea | ch of the a | applicable servic | es listed. | | |
| Rates | Block 2: List any services that | | | | | | | | |
| | listed in block 1 and for which a brief (two- or three-word) descrip | | | | sneu. Lisi | unese other serv | nces in the | IOTTI OF A | |
| | | BLO | | | | | | BLOCK 2 | |
| | | DLO | | | | | CATEG | DRY OF SERVICE | |
| | CATEGORY OF SERVICE | RATE | CATEG | ORY OF SER | VICE | RATE | 0 | JRT OF SERVICE | RA |
| | Continuing Services: | RATE | Installa | tion: Non-res | | RATE | 0,1120 | JRT OF SERVICE | RA |
| | Continuing Services: • Pay cable | RATE 17.50 | Installa • Mote | t ion: Non-res el, hotel | | RATE | | JRT OF SERVICE | RA |
| | Continuing Services: • Pay cable • Pay cable—add'l channel | | Installa • Mote • Com | t ion: Non-res el, hotel imercial | | RATE | | JRT OF SERVICE | RA |
| | Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection | | Installa • Mote • Com • Pay | t ion: Non-res el, hotel mercial cable | idential | RATE | | JRT OF SERVICE | RA |
| | Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection | | Installa • Mote • Com • Pay • Pay | tion: Non-res el, hotel mercial cable cable-add'l ch | idential | RATE | | JRT OF SERVICE | RA |
| | Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential | 17.50 | Installa • Mote • Corr • Pay • Pay • Fire | tion: Non-res el, hotel nmercial cable cable-add'l ch protection | idential | RATE | | | RA |
| | Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set | | Installa • Mote • Com • Pay • Pay • Fire • Burg | tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection | idential | RATE | | | RA |
| | Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) | 17.50 | Installa • Mote • Com • Pay • Pay • Fire • Burg | tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection ervices: | idential | | | | RA |
| | Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate) | 17.50 | Installa • Mote • Com • Pay • Pay • Fire • Burg Other s • Rec | tion: Non-res bel, hotel mmercial cable cable-add'l ch protection glar protection ervices: ponnect | idential | RATE | | | RA |
| | Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) | 17.50 | Installar • Mote • Corr • Pay • Pay • Fire • Burg Other s • Rec • Disc | tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection ervices: | idential | | | | RA |

| nting Period: 2 | - | | | FORM SA1-2E. PAGE 3. |
|------------------------------------|--|---|---|--|
| Name | LEGAL NAME OF OWNER OF | CABLE SYSTEM: | | SYSTEM ID# 1263 |
| | Zito Midwest LLC | | | 1203 |
| G imary smitters: evision | carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location | n during the accounting period, except n effect on June 24, 1981, permitting t e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. E With respect to any distant stations of les, regulations, or authorizations: a in space G—but do list it in space I (f a substitute basis. also in space I, if the station was carried n concerning substitute basis stations i's call sign. <i>Do not</i> report origination I with a station according to its over-th he form. el number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instri- n of each station. For U.S. stations, lis | translator stations and low power tele t (1) stations carried only on a part-tin he carriage of certain network program 51(e)(2) and (4))]; and (2) certain static arried by your cable system on a subs the Special Statement and Program Lo ed both on a substitute basis and also by see page (v) of the general instruction program services such as HBO, ESPN e-air designation. For example, report evision station for broadcasting over the station, an independent station, or a r (for network multicast), "I" (for indepen- or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is the community with which the station is | ne basis under ns [sections ons carried on a titute program og)—if the on some other ns. J, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast). |
| | 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. LOCATION OF STATION |
| | KXFL | 51.1 | Ν | Lincoln NE |
| | KSNB | 4 | N | Lincoln NE |
| ecessary | KSNB | 4.1 | | Lincoln NE |
| Rows as Necessary | KLKN | 8.1 | Ν | Lincoln NE |
| | KOLN | 10.1 | Ν | Lincoln NE |
| | KUON | 12.1 | Ε | Lincoln NE |
| | κχνο | 15.1 | | Omaha NE |
| | WATM | 23.3 | | Altoona PA |
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| Accounting P | | | /STEM· | | | | | I SA1-2E. PAGE |
|---|--|---|---|--|---|--|---|-----------------------------------|
| Zito Midwes | | ABLE 31 | | | | | | 3131EM IL 126 |
| | t every radio s | station ca | arried on a separate and discr nerally receivable by your cab | | | | | н |
| receivable if (1) on the basis of if For detailed info paper SA1-2 for Column 1: Io Column 2: S Column 3: If signal, indicate Column 4: G | it is carried by monitoring, to prmation about m. lentify the call tate whether to the radio stat this by placing tive the station | y the sys be recein at the Co sign of e the static ion's sign g a chech n's locati | I-Band FM Carriage: Under C stem 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 pa ed by the cable s ne station is licens | adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC | 2) it can ertain st general i eparate | be expected, tated intervals. nstructions in the. and discrete | Primary Transmitters: Radio |
| CALL SIGN | AM or FM | S/D | LOCATION OF STATION | CALL SIGN | AM or FM | S/D | LOCATION OF STATION | |
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| Accounting Perio | od: 2018/1 | | | | | | FOR | M SA1-2E. PAGE 5 |
|------------------------------|--|-----------------------|---------------------------|------------------------------|---------------------|------------------|----------------|------------------|
| | LEGAL NAME OF OWNER OF | CABLE SYST | EM: | | | | | SYSTEM ID# |
| Name | Zito Midwest LLC | | | | | | | 1263 |
| | SUBSTITUTE CARRIAGI | : SPECIA | | NT AND PROGRAM I O | G | | | |
| | In General: In space I, identi | | - | | - | ion that you | ır cable syste | m carried on a |
| - | substitute basis during the a | | | | | | | |
| Substitute | explanation of the programm | | | | | | | |
| Carriage: | 1. SPECIAL STATEMEN | CONCER | NING SUBST | TITUTE CARRIAGE | | | | |
| Special | • During the accounting per | iod, did your | cable system | carry, on a substitute basi | s, any nonne | twork televi | sion progran | n |
| Statement and Program Log | broadcast by a distant stat | tion? | | | | | YES | × NO |
| Frogram Log | | | cost of this non | a blank. If your anowar is ' | Waa " wax mu | ⊔ st complete | - | |
| | Note: If your answer is "No' | , leave the f | lest of this pag | e blank. Il your answer is | res, you mu | ist complete | e the program | |
| | log in block 2. 2. LOG OF SUBSTITUTE | | Me | | | | | |
| | In General: List each subst | | | te line. Use abbreviations v | wherever nos | sible if thei | r meaning is | |
| | clear. If you need more spa | | | | | | r mouning ie | |
| | Column 1: Give the title | of every nor | nnetwork televi | sion program ("substitute | | | | |
| | period, was broadcast by a | | | | | | | |
| | under certain FCC rules, re Do not use general categor | | | | | | | n. |
| | "NBA Basketball: 76ers vs. | | | | | | | |
| | | | | "Yes." Otherwise enter "N | | | | |
| | | | | sting the substitute progra | | | | |
| | the case of Mexican or Can | | | e community to which the | | | e FCC or, in | |
| | | | | tem carried the substitute | | | with the mor | nth |
| | first. Example: for May 7 giv | 'e "5/7." | | | _ | | | |
| | | | | gram was carried by your of | | | | ly |
| | to the nearest five minutes. stated as "6:00–6:30 p.m." | Example: a | program carrie | ed by a system from 6:01:7 | 15 p.m. to 6:2 | 8:30 p.m. s | hould be | |
| | | er "R" if the I | listed program | was substituted for progra | imming that v | our svstem | was require | ed |
| | to delete under FCC rules a | nd regulatio | ons in effect du | ring the accounting period | ; enter the let | ter "P" if the | e listed progr | |
| | was substituted for program | | our system wa | s permitted to delete unde | r FCC rules a | nd regulation | ons in | |
| | effect on October 19, 1976. | | | | | | | |
| | | | | | WHE | N SUBSTI | TUTE | |
| | S | UBSTITUT | E PROGRAM | | CARR | AGE OCC | URRED | 7. REASON FOR |
| | 1. TITLE OF PROGRAM | 2. LIVE? Yes or No | 3. STATION'S CALL SIGN | 4. STATION'S LOCATION | 5. MONTH AND DAY | 6. 1 FROM | TIMES — TO | DELETION |
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| Accounting Period: | 2018/1 | FORM S | A1-2E. PAGE 6. |
|-------------------------------|---|---------------------------------|----------------|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | S | YSTEM ID# |
| | Zito Midwest LLC | | 1263 |
| 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 trans (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. | mission servic s amount, see | 0,034.20 |
| L Copyright Royalty Fee | COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. | \$263,800 | |
| | BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS | | |
| | Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00 | this six-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, | 100) | |
| | 1. Base amount under statutory formula | | |
| | 2. Enter amount of gross receipts from space K | | |
| | 3. Subtract line 2 from line 1 | | |
| | 4. Enter the amount of gross receipts from space K | | |
| | 5. Enter the amount from line 3 | | |
| | 6. Subtract line 5 from line 4 | | |
| | 7. Multiply line 6 by .005 (enter figure here) | | |
| | 8. Interest charge. Enter the amount from line 4, space Q, page 8 | | 0.00 |
| | 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8 | | |
| | BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527 | (,600) | |
| | 1. Enter the amount of gross receipts from space K | | |
| | 2. Base amount under statutory formula | | |
| | 3. Subtract line 2 from line 1 | | |
| | 4. Multiply line 3 by .01 | | |
| | 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) | 1,319.00 | |
| | 6. Interest charge. Enter the amount from line 4, space Q, page 8 | 0.00 | |
| | 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 | | |
| | FILING FEE AND TOTAL REMITTANCE DUE | | |
| Filing Fee and | 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$ | 52.00 | |
| Total Remittance 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 | | jhts! |
| | | | |

| Accounting Period: | 2018/1 | | | FORM SA1-2E. PAGE 7 |
|------------------------------------|---|--|---|---------------------|
| Name | LEGAL NAME O Zito Midwes | FOWNER OF CABLE SYSTEM: LLC | | SYSTEM ID# 1263 |
| M Channels | to its subscrib 1. Enter the to system carri 2. Enter the to on which the | ers, and (2) the cable system's total number of tal number of channels on which the cable ed television broadcast stations | which the cable system carried television broadcast stations of activated channels during the accounting period. | 8 |
| N Individual to Be Contacted | | O BE CONTACTED IF FURTHER INFORMA t about this statement of account.) | ATION IS NEEDED (Identify an individual to whom | |
| for Further Information | Name | Teri McMullen | Telephone 8 | 14-260-0434 |
| | Address | PO Box 665 (Number, street, rural route, apartment, or suite nur Coudersport PA 16915 | mber) | |
| | Email | (City, town, state, zip) | Fax (optional) | |
| O Certification | (Ow (Ag X (Of • I have examinare true, comp | ent of owner other than corporation or partner in line 1 of space B and that the owner is not a c incer or partner) I am an officer (if a corporation) in line 1 of space B. ed the statement of account and hereby declare ete, and correct to the best of my knowledge, inf stion 1001(1986)] $\underbrace{X / s_{i}}_{Enter an elect}$ Enter an elect Enter signature | am the owner of the cable system as identified in line 1 of space B; or ership) I am the duly authorized agent of the owner of the cable syste | em as identified |
| | | | | |
| | | Title: President (Title of official position he | t Id in corporation or partnership) | |

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 the 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 telephoi 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 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 it may affect the legal sufficiency of the fling, a determination that would be made by a court of lay

| Midwest LLC 12 Midwest LLC Second Sec | unting Period: 2018/1 | FORM SA1-2E. PAGE |
|---|---|--|
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Salellite Home Viewer Act of 1988 amended Tille 17, section 111(0)(1)(A), of the Copyright Act by adding the following sentence: In observe to dat number of subscribers and the gross amounts pail to the cable system for the basic scribers and amounts callected from subscribers receiving secondary transmissions pursuant to section 118. ¹ 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 dario overs? INTEREST ASSESSMENT You must complete this worksheet for these royalty payments submitted as a result of a late payment or underpayment. For more systemation of interest rate' and enter the sum here | L NAME OF OWNER OF CABLE SYSTEM: | SYSTEM II |
| The Satellite Home Viewer Act of 1988 amended Tile 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 serbers 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? Image Name Mame Mame optication 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. For on explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 2 Multiply line 1 by the interest rate* and enter the sum here x x x y with a stable derived block 1, line 2, or block 2 line 8, or block 3 line 6 x | Midwest LLC | 126 |
| Maiing Address Maiing Address Image: Addres Image: Address Image: | The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO | P Special Statement Concerning Gross Receipts Exclusion |
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| Line 2 Multiply line 1 by the interest rate* and enter the sum here | | Interest Assessmen |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | | - |
| in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 | aveb x | |
| 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 | Line 3 Multiply line 2 by the number of days late and enter the sum here | |
| 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. | Line 3 Multiply line 2 by the number of days late and enter the sum here | |
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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.