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

		OFFICE USE ONLY	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	09/06/2018	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at Tel: (202) 707-8150

A	ACCO	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	
D		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.	
		т	
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		Zito Alabama 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:	
	-	Zito Media - Thorsby	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or sulte number)	
		(City, town, state, zip code)	
I			

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.

.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Zito Alabama LLC Instructions: List each separate community served by the cable system. A "comm	37096
D	"a separate and distinct community or municipal entity (including unincorporated discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that yeas the "first community." Please use it as the first community on all future filings	d communities within unincorporated areas and including single, ou list will serve as a form of system identification hereafter known
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mob	ile home parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	STATE
First	Thorsby	AL
Community	Jemison	AL
	Chilton County	AL
ld Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ARI E SYSTEM						FORM SA1	TEM I
Name	Zito Alabama LLC	ADEL OTOTEM.						010	370
Е	SECONDARY TRANSMISSION			-	-				
-	In General: The information in s system, that is, the retransmission								
Secondary	about other services (including p								
Transmission	last day of the accounting period							hashes	
Service: Sub- scribers and	Number of Subscribers: Both down by categories of secondary								
Rates	each category by counting the n	umber of billings	s in that	category (the	number of	f persons or orga	anizations		
	separately for the particular serv Rate: Give the standard rate c							e and the	
	unit in which it is generally billed								
	category, but do not include disc	ounts allowed for	or advar	nce payment.					
	Block 1: In the left-hand block systems most commonly provide								
	that applies to your system. Note								
	categories, that person or entity	should be coun	ted as a	subscriber in	each appl	icable category.	Example:	a residential	
	subscriber who pays extra for ca first set" and would be counted of					in the count une	der "Servic	e to the	
	Block 2: If your cable system					service that are	different fr	om those	
	printed in block 1 (for example, t								
	with the number of subscribers a sufficient.	and rates, in the	right-ha	ind block. A tv	o- or three	e-word description	on of the se	ervice is	
		OCK 1					BLOCK	(2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	RS	RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RA
	Residential:	CODCONIDE		TUTE	0,111			ODDODITIDEITO	101
	Service to first set		29	24.49					
	<ul> <li>Service to additional set(s)</li> </ul>								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter     Residential								
	Non-residential								
	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	oilled. If any ra	tes are ch	arged on a varia	able per-pro	ogram basis,	
ransmissions:	Block 1: Give the standard rat	te charged by th							
	Block 2: List any services that listed in block 1 and for which a								
Rates	I listed in block I and for which a			ade of establis	sneu. List	linese oliner serv	ices in the	IOTTI OF A	
		otion and include		e for each.					
	brief (two- or three-word) descrip			e for each.					
		BLOC	K 1		VICE	RATE	CATEGO	BLOCK 2 DRY OF SERVICE	RA
	brief (two- or three-word) descrip	BLOC RATE	K 1 CATEG	e for each. ORY OF SER tion: Non-res		RATE	CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	BLOC RATE	CATEG	ORY OF SER		RATE	CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	BLOC RATE	CATEG Installat • Mote • Com	ORY OF SER tion: Non-res el, hotel imercial		RATE	CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	BLOC RATE	CATEG Installat • Mote • Com • Pay	ORY OF SER tion: Non-res el, hotel imercial cable	idential	RATE	CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection	BLOC RATE	CK 1 CATEGO Installar • Mote • Com • Pay • Pay	ORY OF SER tion: Non-res el, hotel imercial cable cable-add'l ch	idential	RATE	CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	BLOC RATE 17.50	CK 1 CATEGI Installat • Mote • Com • Pay • Pay • Fire	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection	idential	RATE	CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	BLOC RATE 17.50	K 1 CATEG Installar • Mote • Corr • Pay • Pay • Fire • Burg	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection	idential	RATE	CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	BLOC RATE 17.50	K 1 CATEGO Installat • Mote • Com • Pay • Pay • Fire • Burg Other s	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection	idential	RATE	CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	BLOC RATE 17.50	K 1 CATEGO Installat • Com • Pay • Pay • Fire • Burg Other s • Rec	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection ervices:	idential		CATEGO		RA
	brief (two- or three-word) descrip CATEGORY OF SERVICE 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)	BLOC RATE 17.50	K 1 CATEG Installat • Mote • Com • Pay • Pay • Fire • Burg Other s • Reco • Disc	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection ervices: ponnect	idential		CATEGO		RA

	LEGAL NAME OF OWNER OF			SYSTEM ID
ne	Zito Alabama LLC	CABLE STOTEM.		3709
	PRIMARY TRANSMITTERS:			~
ary tters: sion	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, an <b>Substitute Basis Stations</b> 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 informatic <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on the <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 ter <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 d with a station according to its over-the	<i>bt</i> (1) stations carried only on a part-tin the carriage of certain network program 61(e)(2) and (4))]; and (2) certain static carried 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 ter-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 ructions in the paper SA1-2 form. at the community to which the station is	ne basis under ns [sections ons carried on a stitute program og)—if the on some other ons. N, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WVUA	7.1		Tuscaloosa AL
		~~	_	
	WAIQ	26	E	Montgomery AL
sary	WAIQ WVTM	13.1	E N	Montgomery AL Birmingham AL
sary				
sary	WVTM	13.1	N	Birmingham AL
sary	WVTM WABM	13.1 68.1	N I	Birmingham AL Birmingham AL
sary	WVTM WABM WBRC	13.1 68.1 6.1	N I N	Birmingham AL Birmingham AL Birmingham AL
sary	WVTM WABM WBRC WIAT	13.1 68.1 6.1 42.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL
essary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
essary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
essary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
cessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
cessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
cessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
ccessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
ccessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
ecessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
ccessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
ecessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
ecessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
Necessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL
Necessary	WVTM WABM WBRC WIAT WTTO	13.1 68.1 6.1 42.1 21.1	N I N	Birmingham AL Birmingham AL Birmingham AL Birmingham AL Birmingham AL

Accounting P			(STEM <sup>.</sup>					I SA1-2E. PAGE
Zito Alabam		01						373121011
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) on the basis of i For detailed info paper SA1-2 for <b>Column 1:</b> lo <b>Column 2:</b> S <b>Column 3:</b> If signal, indicate <b>Column 4:</b> G	it is carried b monitoring, to prmation abour m. dentify the call tate whether f the radio stat this by placing tive the station	y the sys be recein the Co sign of e the static ion's sign g a chech n's locati	I-Band FM Carriage: Under ( stem whenever it is received a ved 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 pa sed by the cable s ne station is licen:	eadend, and (2 enna, during o ge (v) of the g system as a se sed by the FC	2) it can certain si general i eparate	be expected, ated 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	
UALL OIGH		010		UALL OIGN		010	LOGATION OF STATION	
						+		
						+		

Accounting Perio	od: 2018/1						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	Zito Alabama LLC							37096
	SUBSTITUTE CARRIAGI				<b>^</b>			
I	In General: In space I, identi substitute basis during the a							
Cubatituta	explanation of the programm							
Substitute Carriage:					s general mat			2 101111.
Special	1. SPECIAL STATEMEN							
Statement and	<ul> <li>During the accounting per</li> </ul>	-	r cable system	carry, on a substitute basi	s, any nonne	work televisio	n program	
Program Log	broadcast by a distant star	tion?					YES	X NO
	Note: If your answer is "No'	. leave the	rest of this pad	e blank. If vour answer is	"Yes." vou mu	ist complete th	ne progran	n
	log in block 2.	,		<b>, ,</b>	, <b>,</b>		1 3	
	2. LOG OF SUBSTITUTE		MS					
	In General: List each subst			te line. Use abbreviations	wherever pos	sible, if their n	neaning is	
	clear. If you need more spa							
	Column 1: Give the title	of every no	nnetwork televi	sion program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re							l.
	Do not use general categori "NBA Basketball: 76ers vs.		vies or baske	tball." List specific program	n titles, for exa	ample, "I Love	LUCY OF	
			dcast live enter	r "Yes." Otherwise enter "N	lo "			
				sting the substitute progra				
				e community to which the			CC or, in	
	the case of Mexican or Can							
			when your sys	tem carried the substitute	program. Use	numerals, wit	h the mon	th
	first. Example: for May 7 giv		substituto pro	gram was carried by your	cablo svetom	List the times	accuratel	N .
	to the nearest five minutes.							у
	stated as "6:00–6:30 p.m."		i program oann		· • p · · · · • • • -			
				was substituted for progra				
	to delete under FCC rules a							am
	was substituted for program	ming that y	our system wa	s permitted to delete unde	r FCC rules a	nd regulations	sin	
	effect on October 19, 1976.							
					WHE	N SUBSTITU	JTE	
	S	UBSTITUT	E PROGRAM	I		AGE OCCUP		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIM	ES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	TO	
						_		
						_		
						_		
						_		
1	1	, <b></b>			1 1			

Accounting Period:	2018/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito Alabama LLC	S	YSTEM ID#
			37096
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. If 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.	smission servic s amount, see	e ),313.06
	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</li> <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>	\$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 \$ 263,800.00	_	
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1	-	
	4. Enter the amount of gross receipts from space K	-	
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$52)	7,600)	
	1. Enter the amount of gross receipts from space K	-	
	2. Base amount under statutory formula	-	
	3. Subtract line 2 from line 1	-	
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		hts!

Accounting Period:	2018/1		FORM SA1-2E. PAGE 7
Name	LEGAL NAME O Zito Alabam	DF OWNER OF CABLE SYSTEM: Na LLC	SYSTEM ID# 37096
M Channels	<ol> <li>to its subscrib</li> <li>1. Enter the to system carri</li> <li>2. Enter the to on which the</li> </ol>	: You must give (1) the number of channels on which the cable system carried television broadcast stations bers, and (2) the cable system's total number of activated channels during the accounting period.  otal number of channels on which the cable ied television broadcast stations  otal number of activated channels e cable system carried television broadcast stations adcast services	8 106
<b>N</b> Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom ot about this statement of account.)	
for Further Information	Name	Teri McMullen Telephone 814-	260-0434
	Address	PO Box 665 (Number, street, rural route, apartment, or suite number) Coudersport PA 16915 (City, town, state, zip)	
	Email	teri.mcmullen@zitomedia.com Fax (optional)	
O Certification	I, the undersi     (Ow     (Ag     X     (Of     I have examinare true, comp	ON (This statement of account must be certified and signed in accordance with Copyright Office regulations) igned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) wher other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or gent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as in line 1 of space B and that the owner is not a corporation or partnership; or fficer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the in line 1 of space B. ned the statement of account and hereby declare under penalty of law that all statements of fact contained herein blete, and correct to the best of my knowledge, information, and belief, and are made in good faith. A /s/James Rigas	
		Enter an electronic signature on the line above to certify this statement.         Enter signature using an "/s/ signature" (e.g., /s/ John Smith)         Typed or printed name:       James Rigas         Title:       President (Title of official position held in corporation or partnership)         Date:       08/27/2018	

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 its placement in t 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 lay

unting Period: 2018/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
Alabama LLC	3709
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: <ul> <li>"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."</li> </ul> </li> <li>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.</li> <li>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?</li> <li>X NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below</li></ul>	P Special Statement Concerning Gross Receipts Exclusion
Name     Mailing Address     Name       Mailing Address     Mailing Address     Mailing Address	
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 Assessmen
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 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	

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.