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

Return completed workbook FOR COPYRIGHT OFFICE USE ONLY by email to: STATEMENT OF ACCOUNT for Secondary Transmissions by DATE RECEIVED AMOUNT coplicsoa@loc.gov Cable Systems (Short Form) \$ For additional information, contact the U.S. Copyright General instructions are located Office Licensing Division at: 8-20-19 Tel: (202) 707-8150 in the first tab of this workbook ALLOCATION NUMBER

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		20191 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.	31078
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		NEX-TECH LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		BUSINESS NAME(S) OF OWNER OF CABLE STSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		145 N MAIN	
		(Number, street, rural route, apartment, or suite number)	
		LENORA, KS 67645 (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 us already appear in space B. In line 2, give the mailing address of the system, if different from the address given in	
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)	
L			

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#
	NEX-TECH LLC	31078
D	Instructions: List each separate community served by the cable system. A "commu "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,
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobilidentified city.	home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	NORCATUR	KS
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM						FORM SA1	TEM I
Name	NEX-TECH LLC	BLE OF OF LIM.						0.0	310
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmissic about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the n separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block systems most commonly provide	pace E should on of television way cable) in sp I (June 30 or D n blocks in space y transmission umber of billing ice at the rate i harged for eac . (Example: "\$2 counts allowed in space E, the	cover all ca and radio b ace F, not h ecember 31 ce E call for service. In <u>c</u> is in that cal ndicated—r h category c 20/mth"). Su for advance e form lists t	tegories of se roadcasts by ere. All the f , as the case the number general, you tegory (the numb of the numb of service. In mmarize any payment. he categorie	econdary your sys acts you e may be) of subscr can comp umber of er of sets clude bot y standard s of seco	tem to subscril state must be t bers to the cat bute the numbe persons or org receiving serv h the amount o d rate variations	bers. Give i hose existin ole system, or of subscri- anizations ice). f the charg s within a p sion service	nformation ng on the broken ibers in charged e and the articular rate e that cable	
	that applies to your system. Note categories, that person or entity subscriber who pays extra for ca first set" and would be counted or Block 2: If your cable system I printed in block 1 (for example, ti with the number of subscribers a sufficient.	Where an ind should be cour able service to a proce again und has rate catego iers of services and rates, in the	dividual or o nted as a su additional se er "Service to pries for sec that include	rganization is bscriber in ea ets would be to additional ondary trans e one or more	s receivin ach appli included set(s)." mission s e second	g service that f cable category in the count un service that are ary transmissic	alls under of Example: der "Servic different frons), list the on of the se	different a residential e to the om those em, together ervice is	
	BLC	OCK 1 NO. OF					BLOCK	2 NO. OF	1
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	GORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential: • Service to first set		33	30.00 F	PREMIE	RE		22	46.
	Service to additional set(s) FM radio (if separate rate)								
	Motel, hotel Commercial								
	Converter								
	Residential Non-residential								
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	te (not subscrib hose services t re two exceptio or facilities furm hit in which it is rate column. te charged by th t your cable sys separate charg	er) informat that are not ns: you do r nished to non usually bille he cable sys stem furnish e was made	ion with resp offered in co not need to g nsubscribers d. If any rate stem for each ed or offered e or establish	mbinatior ive rate ir . Rate inf es are cha n of the a I during th	n with any secon offormation con- formation shoul arged on a varia pplicable servio ne accounting p	ndary trans cerning (1) d include b able per-pro ces listed. period that	smission services oth the ogram basis, were not	
		BLO				DATE	0.475.00	BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE		Y OF SERVI n: Non-resid		RATE	CATEGO	DRY OF SERVICE	RAT
	• Pay cable	76.00	• Motel, ł				Sports	& Entertain.	13.
	Pay cable—add'l channel		• Comme				Cinema	X	11.
	Fire protection		• Pay cal				HBO		17.
	•Burglar protection Installation: Residential		,	ole-add'l chai	nnel		Showtin Starz! E	me & TMC	14. 12.
			Fire pro						12.
		99 00	• BUILDING	protection					
	First set	99.00 110.00	• Burgian Other serv	protection ices:					
			0	ices:		30.00			
	First setAdditional set(s)		Other serv	ices: lect		30.00			

					SA1-2E. PAG
Name	LEGAL NAME OF OWNER C	F CABLE SYSTEM:		S	SYSTEM
	NEX-TECH LLC				310
G Primary ansmitters: elevision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, a Substitute Basis Station basis under specific FCC r • Do <i>not</i> list the station he station was carried <i>only</i> o • List the station here, and basis. For further informati Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these the Column 4: Give the location	lentify every television station (including t em during the accounting period, <i>except</i> in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph. s: With respect to any distant stations ca rules, regulations, or authorizations: re in space G—but do list it in space I (th n a substitute basis. also in space I, if the station was carried ion concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pre- ed with a station according to its over-the-	(1) stations carried only on a part e carriage of certain network prog 1(e)(2) and (4))]; and (2) certain st urried by your cable system on a su e Special Statement and Program I both on a substitute basis and als see page (v) of the general instruc- rogram services such as HBO, ES -air designation. For example, rep vision station for broadcasting ove station, an independent station, or for network multicast), "I" (for indep r "E-M" (for noncommercial educa- ctions in the paper SA1-2 form. the community to which the station	-time basis under rams [sections ations carried on a ubstitute program a Log)—if the so on some other ctions. SPN, etc. Identify each bort multistream r the air in its community a noncommercial pendent), "I-M" tional multicast). n is licensed by the	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STAT	
	KSNC	2	N	GREAT BEND, KS	
	KLBY	4	Ν	WICHITA, KS	
ws as Necessary	KBSH	7	Ν	HAYS, KS	
	KSNK	8	Ν	McCOOK, NE	
	KOOD	9	E	HAYS, KS	
		10	Ν		
	KAKE	10		WICHITA, KS	
	KAKE KMTW	10	I	WICHITA, KS	
	KMTW	17		WICHITA, KS	
	KMTW KSCW	17 23	l 1	WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS	17 23 24	 	WICHITA, KS WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2	17 23 24 110	I I N N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2	17 23 24 110 180	I I N N-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2	17 23 24 110 180 181	I I N N-M N-M I-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3	17 23 24 110 180 181 182	I I N N-M N-M I-M I-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4	17 23 24 110 180 181 182 183	I I N N-M N-M I-M I-M E-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2	17 23 24 110 180 181 181 182 183 183 184	I I N N-M N-M I-M I-M E-M I-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3	17 23 24 110 180 181 182 183 183 184 185	I I N N-M N-M I-M E-M I-M I-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3	17 23 24 110 180 181 182 183 184 185 186	I I N N-M N-M I-M I-M E-M I-M I-M I-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3 KSAS-DT2	17 23 24 110 180 181 182 183 184 185 186 187	I I N N-M N-M I-M E-M I-M I-M I-M N-M I-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3 KSAS-DT2 KOOD-DT3	17 23 24 110 180 181 182 183 184 185 186 187 189	I I N N-M N-M I-M I-M E-M I-M N-M I-M N-M E-M	WICHITA, KS WICHITA, KS	
	KMTW KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3 KSAS-DT2 KOOD-DT3	17 23 24 110 180 181 182 183 184 185 186 187 189	I I N N-M N-M I-M I-M E-M I-M N-M I-M N-M E-M	WICHITA, KS WICHITA, KS	

-	Period: 2019						FORM	I SA1-2E. PAGE
		ABLE S	YSTEM:					SYSTEM I
NEX-TECH	LLC						I	3107
PRIMARY TR	ANSMITTERS:							
n General: Lis	st every radio s	tation ca	arried on a separate and discre nerally receivable by your cab					н
Special Instru	ctions Conce	rning Al	II-Band FM Carriage: Under (Copyright Office I	regulations, ar	n FM sig	nal is generally	Primary
eceivable if (1) it is carried by	the sys	stem whenever it is received a ived at the headend, with the s	t the system's he	adend, and (2	2) it can	be expected,	Transmitters: Radio
or detailed inf	formation abou		opyright Office regulations on t	•	-			
aper SA1-2 fo Column 1: I		sign of	each station carried.					
Column 2: S	State whether t	he statio	on is AM or FM.					
		-	nal was electronically process k mark in the "S/D" column.	ed by the cable s	system as a se	eparate	and discrete	
			ion (the community to which th	e station is licen	sed by the FC	C or, in	the case of	
Aexican or Ca	nadian stations	s, if any,	the community with which the	station is identifi	ed).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
KQY	FM		HILL CITY, KS					
KDT	FM		BURDETT, KS					
	+							
	+							
	+							
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Accounting Perio	od: 2019/1						FORM	M SA1-2E. PAGE 5.
-	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	NEX-TECH LLC							31078
					•			
	SUBSTITUTE CARRIAGE							
I	In General: In space I, identi							
	substitute basis during the ac explanation of the programm							
Substitute					e general insu			2 101111.
Carriage: Special	1. SPECIAL STATEMENT							
Statement and	 During the accounting period 	-	r cable system	carry, on a substitute basi	s, any nonne	twork televisio	n program	
Program Log	broadcast by a distant stat	tion?					YES	× 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.	,		, ,	, j	····	1 3	
	2. LOG OF SUBSTITUTE		MS					
	In General: List each subst			te line. Use abbreviations	wherever pos	sible. if their m	neaning is	
	clear. If you need more spa					,	J	
				sion program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, reg Do not use general categori							l.
	"NBA Basketball: 76ers vs.		vies of Daske	toali. List specific program		ampie, i Love	LUCY OF	
			dcast live, enter	r "Yes." Otherwise enter "N	lo."			
	Column 3: Give the call s	sign of the s	station broadca	sting the substitute progra	m.			
				e community to which the			CC or, in	
	the case of Mexican or Can			community with which the tem carried the substitute			h tha man	th
	first. Example: for May 7 giv	,	when your sys		program. Use	numerais, wit	in the mon	ui
			e substitute pro	gram was carried by your	cable system.	List the times	accuratel	v
	to the nearest five minutes.							,
	stated as "6:00–6:30 p.m."	-						
				was substituted for progra				
	to delete under FCC rules a was substituted for program							am
	effect on October 19, 1976.	inning that y	our system wa			nu regulations	5 11 1	
					WHE	N SUBSTITU	JTE	
	S	UBSTITUT	E PROGRAM		CARR	AGE OCCUF	RRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIM		DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	TO	
						_		
						_		
						_		
						_		
						_		
						_		

Accounting Period:	2019/1	FORM S	A1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: NEX-TECH LLC	S	YSTEM ID: 31078
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. I 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 the 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 servio is amount, see	5,681.67
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 \$ 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 Regi See page i of the general instructions in the paper SA1-2 form for more informa		jhts!

Accounting Period:	2019/1					FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF NEX-TECH L	F OWNER OF CABLE SYSTEM: LC				SYSTEM ID# 31078
M Channels	 to its subscribe 1. Enter the to system carrie 2. Enter the to on which the 	ers, and (2) the cable system's tal number of channels on whic ed television broadcast stations tal number of activated channe cable system carried television	s total number ich the cable s els on broadcast	er of activated channels durin		20
N Individual to	INDIVIDUAL 1	TO BE CONTACTED IF FURT	HER INFOR			·
Be Contacted for Further Information	Name	Scott Roe			Telephon	e 785-625-7070
	Address	2418 Vine Street (Number, street, rural route, apar Hays, KS 67601 (City, town, state, zip)	artment, or suite	e number)		
	Email	sroe@nex-tecl	ch.com		Fax (optional)	
O Certification	I, the undersig (Own (Age (X (Off)	ned, hereby certify that (Check of ner other than corporation or p ent of owner other than corpor in line 1 of space B and that the ficer or partner) I am an officer in line 1 of space B.	one, but only partnership; ration or par owner is not (if a corporat d hereby decl ny knowledge	tone, of the boxes.) I am the owner of the cable sy tnership) I am the duly author a corporation or partnership; o ion) or a partner (if a partnersh are under penalty of law that a , information, and belief, and a	nip) of the legal entity identified as ow Ill statements of fact contained hereir re made in good faith.	B; or system as identified /ner of the cable system
		Typed or printe	Enter an e Enter sign	/s/ Rhonda S. Goddan lectronic signature on the line a ature using an "/s/ signature" (e Rhonda S. Goddard	above to certify this statement.	
		Title: (Title of		Financial Officer)	
		Date:			08/26/2019	

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 telephon 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 fing, a determination that would be made by a court of law

	FORM SA1-2E. PAG
IL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
K-TECH LLC	310
 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? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statemen Concerning Gross Receipts Exclusio
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	-
Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	-
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 3 by 0.00274** and enter here - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - - in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ - (interest charge) * * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	-
x	
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	
x	
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.