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.

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

SA1-2E Short Form

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α					
~	ACCO	OUNTING PERIOD COVERED BY THIS	STATEMENT: (YYY)	f/(Period))	
		2020/2 Period 1 = J	January 1 - June 30	Period 2 = July 1 - December 31	
		Barcode Da	ta Filing Period (optional - se	ee instructions)	
Accounting Period					
		Instructions:			
В		Give the full legal name of the owner of the cable syste of the subsidiary, not that of the parent corporation.	m. If the owner is a subsidiar	y of another corporation, give the full corp	orate title
Owner		List any other name or names under which the owner of	conducts the business of the c	able system.	
		If there were different owners during the accounting possingle statement of account and royalty fee payment of			bmit a
		Check here if this is the system's first filing. If not, ente	r the system's ID number assig	gned by the Licensing Division.	25643
		_			
		LEGAL NAME OF OWNER/MAILING ADDRESS	OF CABLE SYSTEM		
		MCC Illinois, LLC (Neoga, IL)			
		BUSINESS NAME(S) OF OWNER OF CABLE SY	STEM (IF DIFFERENT)		
		MAILING ADDRESS OF OWNER OF CABLE SY	STEM		
		ONE MEDIACOM WAY (Number, street, rural route, apartment, or suite number)			
		MEDIACOM PARK, NY 10918			
		(City, town, state, zip)			
С		RUCTIONS: In line 1, give any business or trad s already appear in space B. In line 2, give the			
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		MAILING ADDRESS OF CABLE SYSTEM:			
	2	(Number, street, rural route, apartment, or suite number)			
		(City, town, state, zip code)			
Privacy Act Notice	: Section	n 111 of title 17 of the United States Code authorizes the C	copyright Offce to collect the pe	rsonally identifying information (PII) request	ed on this

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

3/1/2021

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
Name	MCC Illinois, LLC (Neoga, IL)	2564
	Instructions: List each separate community served by the cable system. A "communi	
D	"a separate and distinct community or municipal entity (including unincorporated co	
D	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you li	st will serve as a form of system identification hereafter know
	as the "first community." Please use it as the first community on all future filings.	
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	ome parks should be reported in parentheses below the
Served	identified city.	
Gerveu		
	CITY OR TOWN	STATE
First	Neoga	IL
Community	STEWARDSON	
-	STRASBURG	
dd Rows as Necessary	WINDSOR	

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM						FORM SA1	TEM ID	
Name	MCC Illinois, LLC (Neog							0.0	2564	
		· ·								
Е	SECONDARY TRANSMISSION In General: The information in s					v transmission	service of	the cable		
_	system, that is, the retransmission	-		-		•				
Secondary	about other services (including p	, , ,	,		,		those exist	ting on the		
Transmission	last day of the accounting period						e cable system broken			
Service: Sub- scribers and	Number of Subscribers: Both 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	· · ·		,	ny standa	ro rate variation	is within a	particular rate		
	Block 1: In the left-hand block				ries of sec	ondary transmi	ssion servi	ce that cable		
	systems most commonly provide									
	that applies to your system. Not 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					,		, 0		
	sufficient.	ind rates, in th	e ngnt-	nanu biock. A li	vo- or the	e-word descrip		Service is		
		DCK 1					BLOCK	ζ2		
		NO. OF		DATE	0.4.7			NO. OF		
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT	
	Service to first set		271	29.95-61.54						
	Service to additional set(s)		211	29.93-01.34						
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		1	29.95-61.54						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC		NSMIS		s					
-	In General: Space F calls for ra					Il your cable sy	stem's serv	vices that were		
F	not covered in space E, that is, t									
Services	service for a single fee. There ar furnished at cost or (2) services									
Other Than	amount of the charge and the ur									
Secondary	enter only the letters "PP" in the	rate column.		-		-		0		
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.									
Rates	Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a									
	brief (two- or three-word) description and include the rate for each.									
		BLO	CK 1					BLOCK 2		
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RATI	
	Continuing Services:		Install	ation: Non-res	idential					
	• Pay cable	PP	• Mo	otel, hotel			Family	Cable	84.9	
	 Pay cable—add'l channel 	PP	• Co	mmercial						
	Fire protection		•Pa	y cable						
	 Burglar protection 		•Pa	y cable-add'l ch	nannel					
	Installation: Residential			e protection						
	• First set	99.99		rglar protection						
	Additional set(s)	15.00-49.00		services:						
	• FM radio (if separate rate)			connect		49.00				
	Converter	10.50		sconnect						
				tlet relocation		15.00-49.00				

	LEGAL NAME OF OWNER O	E CABLE SYSTEM		SYSTEM II	
Name	MCC Illinois, LLC (Ne			2564	
	PRIMARY TRANSMITTERS:				
G Primary Transmitters: Television	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 statior 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	also in space I, if the station was carri n concerning substitute basis station: s call sign. <i>Do not</i> report origination with a station according to its over-th	<i>t</i> (1) stations carried only on a part-t the carriage of certain network progr .61(e)(2) and (4))]; and (2) certain stat carried by your cable system on a su (the Special Statement and Program ed both on a substitute basis and als s, see page (v) of the general instruc program services such as HBO, ESI ne-air designation. For example, rep levision station for broadcasting over k station, an independent station, or ' (for network multicast), "I" (for indep or "E-M" (for noncommercial educat ructions in the paper SA1-2 form st the community to which the station	ime basis under rams [section: ations carried on ; bstitute program Log)—if the so on some othe tions PN, etc. Identify each ort multistream the air in its community a noncommercia pendent), "I-M ional multicast) n is licensed by the	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION	
	WAND/WAND(HD) NBC	17	N	Decatur, IL	
	WAND-DT2 COZI TV	17.2	I-M	Decatur, IL	
Add Rows as Necessary	WBUI/WBUI(HD) CW	22	I	Decatur, IL	
	WBUI-DT2 DABL	22.2	I-M	Decatur, IL	
	WBUI-DT3 Stadium	22.3	I-M	Decatur, IL	
	WCCU/WCCU(HD) FOX	26	I	Urbana, IL	
	WCCU-DT2 MeTV	26.2	I-M	Urbana, IL	
	WCCU-DT3 Antenna TV	26.3	I-M	Urbana, IL	
	WCIA/WCIA(HD) CBS	48	N	Champaign, IL	
	WCIA-DT3 Bounce TV	48.3	I-M	Champaign, IL	
	WCIA-DT4 Grit	48.4	I-M	Champaign, IL	
	WCIX-DT/WCIX (HD) MYNET	13	I	Springfield, IL	
	WCIX-DT3 Escape	13.3	I-M	Springfield, IL	
	WCIX-DT4 Laff	13.4	I-M	Springfield, IL	
	WEIU/WEIU(HD) PBS	50	E	Charleston, IL	
	WEIU-DT2 MHz Worldwide	50.2	I-M	Charleston, IL	
	WICD/WICD(HD) ABC	41	N	Champaign, IL	
	WICD-DT2 COMET	41.2	I-M	Champaign, IL	
	WICD-DT3 TBD	41.3	I-M	Champaign, IL	
			1-141	onampaign, ic	
			IM	Champaign II	
	WICD-DT4 Charge	41.4	I-M	Champaign, IL	
	WICD-DT4 Charge WILL/WILL(HD) PBS	41.4 9	E	Champaign, IL	
	WICD-DT4 Charge WILL/WILL(HD) PBS WILL-DT2 PBS World	41.4 9 9.2	E E-M	Champaign, IL Champaign, IL	
	WICD-DT4 Charge WILL/WILL(HD) PBS	41.4 9	E	Champaign, IL	

counting Period:	2020/2			FORM SA1-2E. PAGE				
Name	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM ID				
Name	MCC Illinois, LLC (Ne	oga, IL)		2564				
	PRIMARY TRANSMITTERS:	TELEVISION						
G	carried by your cable syster	n during the accounting period except	g translator stations and low power tele t (1) stations carried only on a part-tim the carriage of certain network program	e basis under				
Primary	U	, , , , , , , , , , , , , , , , , , , ,	61(e)(2) and (4))]; and (2) certain stati					
Transmitters:	1 0 /	s explained in the next paragraph						
Television			arried by your cable system on a subs	stitute program				
		les, regulations, or authorizations:	the Special Statement and Program L	oa)—if the				
	station was carried only on							
	List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe							
	basis. For further information concerning substitute basis stations, see page (v) of the general instructions							
	Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each							
	multicast stream associated with a station according to its over-the-air designation. For example, report multistream							
	"WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community							
	of license. For example, WRC is channel 4 in Washington, D.C.							
	Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia							
	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M							
	(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast)							
	For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form							
	Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified							
	TCC. FOI MEXICAN OF CANA	dian stations, if any, give the name of	the community with which the station i	sidentined				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	WUSI-DT3 PBS Create	19.3	E-M	Olney, IL				
	WUSI-DT4 PBS KIDS							

MCC Illinois	OWNER OF C		ISIEM:					SYSTEM I 256
	every radio s	tation ca	rried on a separate and discre nerally receivable by your cabl					н
eceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to rmation abou m. entify the call tate whether t the radio stati this by placing ive the station	/ the sys be recei t the Co sign of e he statio on's sign a check i's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. In is AM or FM. hal was electronically processes (mark in the "S/D" column. on (the community to which the the community with which the	the system's he ystem's FM ante- nis point, see pa ed by the cable s e 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 eneral ii eparate :	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		5,5				5,6		
						 		
						 		
						<u> </u>		
								
						<u> </u>		
						<u> </u>		
						<u> </u>		
						 		
						 		
						<u> </u>		
						 		

Accounting Perio	od: 2020/2						FORM	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF		STEM:					SYSTEM ID#
Name	MCC Illinois, LLC (Neo	oga, IL)						25643
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	ENT AND PROGRAM LC	G			
	In General: In space I, ident	tify every no	onnetwork telev	<i>ision program,</i> broadcast b	y a <i>distant</i> sta	tion, that yo	our cable sys	tem carried on a
	3	stitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further anation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.						
Substitute Carriage:	· · · ·	•			ne general ins		i trie paper 5	A 1-2 10111.
Special	 SPECIAL STATEMEN During the accounting period 	-			eie anv nonr	network tel	evision prog	ram
Statement and	broadcast by a distant sta		ui cable system	in carry, on a substitute be	1515, ariy 11011		· •	NO
Program Log	-					L	YES	
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you r	must comp	lete the proc	gram
	log in block 2. 2. LOG OF SUBSTITUT		AMS					
	In General: List each subs			ate line. Use abbreviation	s wherever p	ossible, if t	heir meaning	g is
	clear. If you need more spa							-
	Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting							
		od, was broadcast by a distant station and that your cable system substituted for the programming of another station er certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information.						
	Do not use general catego		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I	Love Lucy"	or
	"NBA Basketball: 76ers vs. Column 2: If the program		adcast live ent	er "Yes." Otherwise enter	"No "			
				casting the substitute prog				
				the community to which th			the FCC or,	in
	the case of Mexican or Car Column 5: Give the more			stem carried the substitute			ls, with the n	nonth
	first. Example: for May 7 gi	ve "5/7."						
	Column 6: State the tim to the nearest five minutes			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."		a program car	fied by a system from 0.0	1. 15 p.m. to o	.20.30 p.n		
				n was substituted for prog				
	to delete under FCC rules was substituted for program							ogram
	effect on October 19, 1976	0	your oyotonn n			, and rogai		
					WHE	N SUBST	ITUTE	
	s		E PROGRAM			AGE OCC	URRED	7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES — TO	DELETION
							_	
							—	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	

Accounting Period:	2020/2	FORM SA	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
	MCC Illinois, LLC (Neoga, IL)		25643
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. End all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ission service amount, see	7,373.39 pss receipts)
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 \$2 • Use block 3 if the amount of gross receipts in space K is more than \$137,100 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	this six-mon	
	accounting period is \$52.00		
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	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 \$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 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:	2020/2		FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF C MCC Illinois, L	DWNER OF CABLE SYSTEM: LC (Neoga, IL)	SYSTEM ID# 25643
M Channels	to its subscribers 1. Enter the total system carried	ou must give (1) the number of channels on which the cable system carried television broadcast stations s, and (2) the cable system's total number of activated channels during the accounting period. number of channels on which the cable television broadcast stations	36
	on which the ca	number of activated channels able system carried television broadcast stations ast services	78
N Individual to Be Contacted		BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Kenneth J. Kohrs Telephone	845-443-2762
	Address	One Mediacom Way (Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip)	
	Email	Copyrights@mediacomcc.com Fax (optional)	
O Certification	I, the undersigned (Ownee X (Agentian) (Offician) I have examined	(This statement of account must be certified and signed in accordance with Copyright Office regulations) ad, hereby certify that (Check one, <i>but only one</i> , of the boxes.) ar other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space t of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable line 1 of space B and that the owner is not a corporation or partnership; or er or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow line 1 of space B. If the statement of account and hereby declare under penalty of law that all statements of fact contained herein e, and correct to the best of my knowledge, information, and belief, and are made in good faith. on 1001(1986)]	system as identified /ner of the cable system
		X /s/ Kenneth J. Kohrs 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: Kenneth J. Kohrs	
		Typed or printed name: Kenneth J. Kohrs Title: Vice President, Financial Reporting (Title of official position held in corporation or partnership)	
		Date: 2/15/2021	

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 it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.

256 CL IIInois, LLC (Neoga, IL) 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 folious 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 carrier(s) below. \$ Mame Maing Address Matters Maing Address During the tooplete 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	ounting Period: 2020/2	FORM SA1-2E. PAGE 8
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Never Act of 1988 amended The 17, section 111(d)(1)(A), of the Capyright Act by adding the following secondary transmissions of pirmary incadeata transmitters. The system shall not include sub- scribers and amounts coloration on when to exclude these amounts, see the note on page (vil) of the general instructions located in the paper SA1-2 form. Using the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite did owners? Norm Norm Norm Norm Norm Norm Norm Nor	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
The Statilite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: P "In determining the bial number of ablacribers and the gross amounts paid to the cable system of the basic societrs and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." P 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? S No	C Illinois, LLC (Neoga, IL)	2564
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: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions to made payment. Image: Comparison of the payment or underpayment. Image: Comparison of the payment or underpayment. Image: Comparison of the payers for the paper SA1-2 form. Image: Comparison of the payers for the system exclude any amount of the paper SA1-2 form. Image: Comparison of the payers for the secand enter the sum here . Image: Compari	The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing 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 sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
Wess. Enter the total here and list the satellite carrier(s) below. \$ Name Marine Maling Address Maling Address Marine Maling 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. Interest Assessment Line 1 Enter the amount of late payment or underpayment. x Line 2 Multiply line 1 by the interest rate* and enter the sum here x	During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions	
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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	-
To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	-
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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.