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

STATEM	ENT OF ACCOUNT	FOR COPYRIG	GHT OFFICE USE ONLY	by email to:
	ary Transmissions by	DATE RECEIVED	AMOUNT	-
General instru	ems (Short Form) uctions are located of this workbook	03/01/2021	\$ ALLOCATION NUMBER	coplicsoa@copyright.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCOUNTING PERIOD COVERED	) BY THIS STATEMENT: (Y	YYY/(Period))	
	2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		Barcode Data Filing Period (option	al - see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of of the subsidiary, not that of the parent		sidiary of another corporation, give the full co	rporate title
Owner	List any other name or names under wh	nich the owner conducts the business of	the cable system.	
	_	ne accounting period, only the owner on fee payment covering the entire account	the last day of the accounting period should anting period.	submit a
	Check here if this is the system's first fil	ing. If not, enter the system's ID numbe	r assigned by the Licensing Division.	63362
	LEGAL NAME OF OWNER/MAILI	NG ADDRESS OF CABLE SYSTEN	1	
	PALAU NATIONAL COMMUNICAT	IONS CORPORATION		
	BUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFEREN	T)	
	MAILING ADDRESS OF OWNER C P.O. BOX 99	OF CABLE SYSTEM		
	(Number, street, rural route, apartment, or suit	e number)		
	(City, town, state, zip)			
С	<b>INSTRUCTIONS:</b> In line 1, give any bus names already appear in space B. In lin			
System	1 IDENTIFICATION OF CABLE SYSTEM			
	MAILING ADDRESS OF CABLE SYST	EM:		
	2 (Number, street, rural route, apartment, or suit	e 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 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:
Name	PALAU NATIONAL COMMUNICATIONS CORPORATION	63362
D	Instructions: List each separate community served by the cable system. A "co "a separate and distinct community or municipal entity (including unincorpo- discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future fi	rated communities within unincorporated areas and including single, at you list will serve as a form of system identification hereafter knowr lings.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or identified city.	mobile home parks should be reported in parentheses below the
First	CITY OR TOWN KOROR	STATE REPUBLIC OF PALAU
Community		
-		
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:						1-2E. PAG
Name	PALAU NATIONAL COM			ORPORAT	ION			U.	633
	SECONDARY TRANSMISSION				ATES				
E	In General: The information in s					ry transmission	service of t	he cable	
	system, that is, the retransmission	on of television	and rac	lio broadcasts	by your sy	/stem to subscri	bers. Give	information	
Secondary	about other services (including p						hose exist	ing on the	
Fransmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						ble system	broken	
scribers and	down by categories of secondar	-					•		
Rates	each category by counting the n							charged	
	separately for the particular server Rate: Give the standard rate of							no and the	
	unit in which it is generally billed								
	category, but do not include disc								
	Block 1: In the left-hand block	•		•					
	systems most commonly provide that applies to your system. <b>Not</b>								
	categories, that person or entity			0		•			
	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.		og						
	BLC	OCK 1 NO. OF					BLOCK	X 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT
	Residential:								
	Service to first set		394	5.00					
	<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				s				
-	In General: Space F calls for ra					ll your cable sys	stem's serv	vices that were	
F	not covered in space E, that is, t					,	,		
Comilana	service for a single fee. There and	•			•		• • •		
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		acaany	Sincut it ally it			anio hei h	egiani zacio,	
ransmissions:	Block 1: Give the standard rat								
	BIOCK 7. Liet any convices the	• •			-	-			
Rates	Block 2: List any services that		je was n						
Rates	listed in block 1 and for which a brief (two- or three-word) descrip		de the ra		ISHEU. LISU	inese other ser			
Rates	listed in block 1 and for which a	ption and inclue				these other ser			
Rates	listed in block 1 and for which a		CK 1			RATE	CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a brief (two- or three-word) descrip	ption and inclue BLO	CK 1 CATEG	ate for each.	VICE		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	ption and inclue BLO	CK 1 CATEG Installa	ate for each. ORY OF SER	VICE		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	ption and inclue BLO	CK 1 CATEG Installa • Mot	ate for each. ORY OF SER ttion: Non-res	VICE		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con	ate for each. GORY OF SER ation: Non-res	VICE		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay	ate for each. CORY OF SER Ition: Non-res el, hotel nmercial	VICE idential		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay	ate for each. ORY OF SER ation: Non-res el, hotel nmercial r cable	VICE idential		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire	ate for each. ORY OF SER Ition: Non-res el, hotel nmercial r cable r cable-add'l ch	VICE idential		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	CORY OF SER CORY OF SER tition: Non-res el, hotel nmercial cable cable cable-add'l ch protection	VICE idential		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a 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)	ption and inclue BLO	CK 1 CATEG Installa • Mot • Pay • Pay • Fire • Bur Other s • Rec	CORY OF SER CORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection services: connect	VICE idential		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a 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)	ption and inclue BLO	CK 1 CATEG Installa • Mot • Pay • Pay • Fire • Bur Other s • Rec	ate for each. CORY OF SER tion: Non-res el, hotel nmercial cable cable cable-add'l ch protection glar protection services:	VICE idential		CATEGO	BLOCK 2	E RAT
Rates	listed in block 1 and for which a 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)	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burn Other s • Rec • Disc	CORY OF SER CORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection services: connect	VICE idential		CATEGO	BLOCK 2	E RAT

	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEI
Name	PALAU NATIONAL C	OMMUNICATIONS CORPORATI	ION	63
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ansmitters: Felevision	In General: In space G, idicarried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a Substitute Basis Stations basis under specific FCC rm • Do <i>not</i> list the station here, station was carried <i>only</i> or • List the station here, and basis. For further informatic 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 each educational station, by ente (for independent multicast) For the meaning of these to	entify every television station (including t em during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.67 as explained in the next paragraph. <b>s:</b> With respect to any distant stations ca- ules, regulations, or authorizations: re in space G—but do list it in space I (the n a substitute basis. also in space I, if the station was carried on concerning substitute basis stations, in 's call sign. <i>Do not</i> report origination pind d with a station according to its over-the- the form. lel number the FCC assigned to the televity WRC is channel 4 in Washington, D.C. h case whether the station is a network s ering the letter "N" (for network), "N-M" (for "F" (for noncommercial educational), of erms, see page (iv) of the general instruc-	(1) stations carried only on a part the carriage of certain network prog 1(e)(2) and (4))]; and (2) certain st arried by your cable system on a su the Special Statement and Program d both on a substitute basis and als see page (v) of the general instruct 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.	-time basis under rams [sections ations carried on a ubstitute program a Log)—if the so on some other tions. SPN, etc. Identify each bort multistream r the air in its community a noncommercial bendent), "I-M" tional multicast).
		on of each station. For U.S. stations, list adian stations, if any, give the name of th           2. B'CAST CHANNEL NUMBER	-	-
	KTTV	48	Ν	
	KTTV	48	<u>N</u>	PORTLAND, OR
lours of Nocoscopy	KNBC	50	N	PORTLAND, OR
ows as Necessary	KNBC KCBS	50 51	N	PORTLAND, OR PORTLAND, OR
ows as Necessary	KNBC KCBS KABC	50 51 49	N N N	PORTLAND, OR PORTLAND, OR PORTLAND, OR
ows as Necessary	KNBC KCBS KABC KOCE-TV	50 51 49 52	N N N E	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
ows as Necessary	KNBC KCBS KABC KOCE-TV CW	50 51 49 52 53	N N N E N	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
ows as Necessary	KNBC KCBS KABC KOCE-TV	50 51 49 52	N N N E	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
ows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2	50 51 49 52 53 6	N N N E N N	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
lows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N N	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
₹ows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N N	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
lows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N N	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
ows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N N	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
tows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N N	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
Rows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N	PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR PORTLAND, OR
Rows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N	PORTLAND, OR
Rows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N	PORTLAND, OR
Rows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N	PORTLAND, OR
Rows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N	PORTLAND, OR
Rows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N	PORTLAND, OR
Rows as Necessary	KNBC KCBS KABC KOCE-TV CW ABC2 NBC2	50 51 49 52 53 6 18	N N N E N N N	PORTLAND, OR

PALAU NAT	IONAL CO	MMUN	ICATIONS CORPORATI	ON				SYSTEM   633
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) in the basis of for detailed info aper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation about rm. dentify the call tate whether to the radio stat this by placing Sive the station	y the sys be recei at the Co l sign of o the static ion's sign g a checl 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 par ed by the cable s le station is licens	adend, and (2 enna, during c ge (v) of the g ystem as a se sed by the FC	?) it can ertain st eneral in 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	
ONLE OIOIN		0,0		O/ LE OIGIN		0/0		
		1	·	[				
						·		

Accounting Perio	od: 2020/2						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	PALAU NATIONAL CO	OMMUNIC	ATIONS CO	RPORATION				63362
	SUBSTITUTE CARRIAG				<u> </u>			
					-			
I I	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the programm							
Carriage:					no gonorar in			
Special	1. SPECIAL STATEMEN	-				a a truce el chal	ovicion nrog	10.00
Statement and	During the accounting per		ur cable syster	n carry, on a substitute ba	sis, any noni	ietwork ter	evision prog	
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No	o". leave the	e rest of this pa	age blank. If vour answer is	s "Yes." vou i	must comp	lete the proc	aram
	log in block 2.	,		5 5	, <b>,</b>			,
	2. LOG OF SUBSTITUTI		MS					
	In General: List each subs			ate line. Use abbreviations	s wherever p	ossible, if t	heir meanin	a is
	clear. If you need more spa					,		5
				vision program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general categor "NBA Basketball: 76ers vs.		DVIES OF DASK	etball. List specific progra	in lues, for e	example, i	Love Lucy	or
			dcast live, ent	er "Yes." Otherwise enter '	'No."			
				asting the substitute progr				
				the community to which th			the FCC or,	in
	the case of Mexican or Car							
			when your sy	stem carried the substitute	e program. U	se numera	ls, with the r	nonth
	first. Example: for May 7 gi		e substitute nr	ogram was carried by you	r cable syste	m Listthe	times accur	ately
	to the nearest five minutes.							atory
	stated as "6:00-6:30 p.m."							
				n was substituted for prog				
	to delete under FCC rules							ogram
	was substituted for programe ffect on October 19, 1976		your system w	as permitted to delete und	ler FCC rules	s and regul	ations in	
		•						
					WHE	N SUBST	ITUTE	
	S	UBSTITUT	E PROGRAM	1		AGE OCC		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. 1	TIMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то	
							_	
							<u> </u>	
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Accounting Period:	2020/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: PALAU NATIONAL COMMUNICATIONS CORPORATION	SI	STEM ID# 63362
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 transi (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 service amount, se	,798.65
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 1 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60( See page (vi) of the general instructions located in the paper SA1-2 form for more information.	\$263,80(	
	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 t accounting period is \$52.00	his 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 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1		52.00
	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	1 319 00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8		
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	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
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2020/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: PALAU NATIONAL COMMUNICATIONS CORPORATION	SYSTEM ID# 63362
<b>M</b> Channels	CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period.         1. Enter the total number of channels on which the cable system carried television broadcast stations         2. Enter the total number of activated channels on which the cable system carried television broadcast stations         on which the cable system carried television broadcast stations and nonbroadcast services	9 73
N Individual to Be Contacted for Further Information	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.) Name Telephone	
momaton	Address (Number, street, rural route, apartment, or suite number) (City, town, state, zip) Email Fax (optional)	
O Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) <ul> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow in line 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained hereir are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]</li> </ul>	system as identified ner of the cable system
	Typed or printed name:       LEOBEN TERIONG         Title:       CHIEF EXECUTIVE OFFICER         (Title of official position held in corporation or partnership)	
	Date: Mar. 01, 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 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.

ounting Period: 2020/2	FORM SA1-2E. PAG
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
LAU NATIONAL COMMUNICATIONS CORPORATION	633
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 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 s scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	sub- Special Statemen
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 transmission made by satellite carriers to satellite dish owners?	ns
NO	
YES. Enter the total here and list the satellite carrier(s) below	
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 underpayme For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form	
	Interest Assessm
Line 1 Enter the amount of late payment or underpayment	
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
Line 1 Enter the amount of late payment or underpayment	
Line 1 Enter the amount of late payment or underpayment	Interest Assessm
Line 1 Enter the amount of late payment or underpayment	Interest Assessm
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