This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

## SA1-2E Short Form

| STATEMENT OF ACCOUNT   | FOR COPYRIGH                         | HT OFFICE USE ONLY                                      | Return completed workbook by email to:  |
|--|--------------------------------------|---|---|
| for Secondary Transmissions by<br>Cable Systems (Short Form)       | DATE RECEIVED                        | AMOUNT  | <u>coplicsoa@loc.gov</u>  |
| General instructions are located in the first tab of this workbook | 08/11/2021                           | \$ ALLOCATION NUMBER                                    | For additional information,<br>contact the U.S. Copyright<br>Office Licensing Division at:<br>Tel: (202) 707-8150 |
| A ACCOUNTING PERIOD COVER  | ED BY THIS STATEMENT: (YY            | <b>YYY/(Period))</b><br>Period 2 = July 1 - December 31 |   |
|  | Barcode Data Filing Period (optional | - see instructions)                                     |   |

|                      |   | Barcode Data Filing Period (optional - see instructions)  |
|----------------------|---|---|
| Accounting<br>Period |   |   |
|                      |   | Instructions:   |
| В                    |   | 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.   |
|                      |   |   |
|                      |   | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM   |
|                      |   | MID-RIVERS TELEPHONE COOPERATIVE, INC.  |
|                      |   | BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)  |
|                      |   |   |
|                      |   | MAILING ADDRESS OF OWNER OF CABLE SYSTEM  |
|                      |   | P.O. BOX 280  |
|                      |   | (Number, street, rural route, apartment, or suite number)   |
|                      |   | CIRCLE, MT 59215  |
|                      |   | (City, town, state, zip)  |
| С                    |   | <b>RUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these 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:   |
|                      |   |   |
|                      |   | MAILING ADDRESS OF CABLE SYSTEM:  |
|                      | 2 |   |
|                      | 2 | (Number, street, rural route, apartment, or suite number)   |
|                      |   | (City, town, state, zip code)   |
|                      |   |   |

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

| Norse                | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID   |
|----------------------|---|---|
| Name                 | MID-RIVERS TELEPHONE COOPERATIVE, INC.  | 1462  |
|                      | Instructions: List each separate community served by the cable system. A "com       |   |
| -                    | "a separate and distinct community or municipal entity (including unincorporate     |   |
| D                    | discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that y     |   |
|                      | as the "first community." Please use it as the first community on all future filing |   |
|                      | Note: Entities and properties such as hotels, apartments, condominiums, or mol      |   |
| Area                 |   | me nome parks should be reported in parentneses below the |
| Served               | identified city.  |   |
|                      |   |   |
|                      |   |   |
|                      | CITY OR TOWN  | STATE   |
| First                | LEWISTOWN   | МТ  |
| Community            |   |   |
|                      |   |   |
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| dd Rows as Necessary |   |   |
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|                               | LEGAL NAME OF OWNER OF C  | ABLE SYSTEM        | :  |   |             |                   |                         | FORM SA1-             | TEM ID                |
|-------------------------------|---|--------------------|--|---|-------------|-------------------|-------------------------|-----------------------|-----------------------|
| Name                          | MID-RIVERS TELEPHO  |                    |  | E, INC.   |             |                   |                         |                       | 1462                  |
|                               | SECONDARY TRANSMISSION  |                    | IBSCRI   |   | ATES        |                   |                         |                       |                       |
| E                             | In General: The information in s  |                    |  |   |             | y transmission    | service of              | the cable             |                       |
|                               | system, that is, the retransmission   | on of television   | and rad  | io broadcasts   | by your sy  | /stem to subscr   | ibers. Give             | information           |                       |
| Secondary                     | about other services (including p   | , , ,              | ,  |   | ,           |                   | those exist             | ting on the           |                       |
| Transmission<br>Service: Sub- | last day of the accounting period<br>Number of Subscribers: Both  | •                  |  |   |             | ,                 | hla svetam              | broken                |                       |
| scribers and                  | down by categories of secondary   | •                  |  |   |             |                   |                         |                       |                       |
| 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<br>category, but do not include disc   | • •                | ,  |   | ny standa   | ro rate variation | is within a             | particular rate       |                       |
|                               | Block 1: In the left-hand block   |                    |  |   | ies 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   |                    |  |   |             | service that are  | e different f           | rom those             |                       |
|                               | printed in block 1 (for example, t  |                    |  |   |             | -                 |                         |                       |                       |
|                               | with the number of subscribers a<br>sufficient.   | and rates, in th   | e right-h  | and block. A t  | vo- or thre | e-word descrip    | tion of the s           | service is            |                       |
|                               |   | DCK 1              |  |   |             |                   | BLOCK                   | (2                    |                       |
|                               | CATEGORY OF SERVICE   | NO. OF<br>SUBSCRIB |  | RATE  | САТІ        | EGORY OF SE       | RVICE                   | NO. OF<br>SUBSCRIBERS | RATE                  |
|                               | Residential:  | CODOCIAD           | LIKO   | TUTE  | 0/11        |                   |                         | CODOCITIDENCO         | 10112                 |
|                               | Service to first set  |                    | 1.095  | 43.95   |             |                   |                         |                       |                       |
|                               | Service to additional set(s)  |                    |  |   |             |                   |                         |                       |                       |
|                               | • FM radio (if separate rate)   |                    |  |   |             |                   |                         |                       |                       |
|                               | Motel, hotel  |                    | 32   | 12.80   |             |                   |                         |                       |                       |
|                               | Commercial  |                    |  |   |             |                   |                         |                       |                       |
|                               | Converter   |                    |  |   |             |                   |                         |                       |                       |
|                               | Residential   |                    |  |   |             |                   |                         |                       |                       |
|                               | Non-residential   |                    |  |   |             |                   |                         |                       |                       |
|                               | SERVICES OTHER THAN SEC   | ONDARY TRA         |  | SIONS: RATE   | s           |                   |                         |                       |                       |
| F                             | In General: Space F calls for rat   |                    |  |   |             |                   |                         |                       |                       |
| •                             | not covered in space E, that is, t<br>service for a single fee. There ar  |                    |  |   |             |                   |                         |                       |                       |
| Services                      | furnished at cost or (2) services   |                    |  |   |             |                   |                         |                       |                       |
| Other Than                    | amount of the charge and the ur   |                    |  |   |             |                   |                         |                       |                       |
| Secondary                     | enter only the letters "PP" in the  |                    |  |   |             |                   |                         |                       |                       |
| Fransmissions:<br>Rates       | Block 1: Give the standard rat<br>Block 2: List any services that   |                    |  |   |             |                   |                         | were not              |                       |
| Nates                         | listed in block 1 and for which a   | • •                |  |   | -           | -                 |                         |                       |                       |
|                               | brief (two- or three-word) descrip  | otion and inclue   | ,<br>de the ra   | te for each.  |             |                   |                         |                       |                       |
|                               |   | BLO                | CK 1   |   |             |                   |                         | BLOCK 2               |                       |
|                               | CATEGORY OF SERVICE   | RATE               |  | ORY OF SER  | VICE        | RATE              | CATEGO                  | DRY OF SERVICE        | RATE                  |
|                               | ONTEOONT OF DERVICE   |                    | Installa   | tion: Non-res   | idential    |                   |                         |                       |                       |
|                               | Continuing Services:  |                    |  |   |             |                   | CHOIC                   | F                     |                       |
|                               |   |                    | • Mote   | el, hotel   |             |                   |                         | -                     | 138.9                 |
|                               | Continuing Services:  |                    |  | el, hotel<br>nmercial   |             |                   | ULTIM                   | ΔТЕ                   | 153.9                 |
|                               | Continuing Services:<br>• Pay cable   |                    | • Com  | ,   |             |                   | ULTIMA<br>STARZ         | ATE<br>/ENCORE        | 153.9<br>17.9         |
|                               | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel  |                    | • Com<br>• Pay   | nmercial  | annel       |                   | ULTIMA<br>STARZ<br>SHOW | ΔТЕ                   | 153.9<br>17.9<br>19.9 |
|                               | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection   |                    | • Com<br>• Pay<br>• Pay  | nmercial<br>cable   | annel       |                   | ULTIMA<br>STARZ         | ATE<br>/ENCORE        | 153.9<br>17.9         |
|                               | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>•Burglar protection  | 25.00              | • Con<br>• Pay<br>• Pay<br>• Fire  | nmercial<br>cable<br>cable-add'l ch   | annel       |                   | ULTIMA<br>STARZ<br>SHOW | ATE<br>/ENCORE        | 153.9<br>17.9<br>19.9 |
|                               | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential  | 25.00              | • Con<br>• Pay<br>• Pay<br>• Fire<br>• Burg                                      | nmercial<br>cable<br>cable-add'l ch<br>protection   | annel       |                   | ULTIMA<br>STARZ<br>SHOW | ATE<br>/ENCORE        | 153.9<br>17.9<br>19.9 |
|                               | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set   | 25.00              | • Com<br>• Pay<br>• Pay<br>• Fire<br>• Burg<br><b>Other s</b>                    | nmercial<br>cable<br>cable-add'l ch<br>protection<br>glar protection                              | annel       | 25.00             | ULTIMA<br>STARZ<br>SHOW | ATE<br>/ENCORE        | 153.9<br>17.9<br>19.9 |
|                               | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)                                  | 25.00              | • Com<br>• Pay<br>• Pay<br>• Fire<br>• Burg<br><b>Other s</b><br>• Rec           | nmercial<br>cable<br>cable-add'l ch<br>protection<br>glar protection<br><b>ervices:</b>           | annel       | 25.00             | ULTIMA<br>STARZ<br>SHOW | ATE<br>/ENCORE        | 153.9<br>17.9<br>19.9 |
|                               | Continuing Services:<br>• Pay cable<br>• Pay cable—add'l channel<br>• Fire protection<br>• Burglar protection<br>Installation: Residential<br>• First set<br>• Additional set(s)<br>• FM radio (if separate rate) | 25.00              | • Com<br>• Pay<br>• Pay<br>• Fire<br>• Burç<br><b>Other s</b><br>• Rec<br>• Disc | nmercial<br>cable<br>cable-add'l ch<br>protection<br>glar protection<br><b>ervices:</b><br>onnect | annel       | 25.00             | ULTIMA<br>STARZ<br>SHOW | ATE<br>/ENCORE        | 153.9<br>17.9<br>19.9 |

| N-ma                                  | LEGAL NAME OF OWNER OF   | F CABLE SYSTEM:   |   |  | SYSTEM  |
|---------------------------------------|--|---|---|--|---------|
| Name                                  | MID-RIVERS TELEPH  | IONE COOPERATIVE, INC.  |   |  | 140     |
|                                       | PRIMARY TRANSMITTERS:  | TELEVISION  |   |  |         |
| G                                     | carried by your cable syste<br>FCC rules and regulations   | entify every television station (including tem during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th  | (1) stations carried only on a part-<br>ne carriage of certain network progr                          | -time basis under<br>rams [sections  |         |
| Primary<br>ransmitters:<br>Television | substitute program basis, a Substitute Basis Stations  | e)(2) and (4), or 76.63 (referring to 76.6<br>as explained in the next paragraph.<br>s: With respect to any distant stations ca<br>ules, regulations, or authorizations:  |   |  |         |
|                                       | • Do <i>not</i> list the station her station was carried <i>only</i> on                          | re in space G—but do list it in space I (th   | ·   |  |         |
|                                       | basis. For further information <b>Column 1:</b> List each station                                | on concerning substitute basis stations,<br>n's call sign. <i>Do not</i> report origination p<br>d with a station according to its over-the   | see page (v) of the general instruc<br>program services such as HBO, ES                               | tions.<br>PN, etc. Identify each   |         |
|                                       | Column 2: Give the chann<br>of license. For example, W<br>Column 3: Indicate in each             | el number the FCC assigned to the telev<br>VRC is channel 4 in Washington, D.C.<br>h case whether the station is a network s  | station, an independent station, or   | a noncommercial  |         |
|                                       | (for independent multicast)<br>For the meaning of these te<br><b>Column 4:</b> Give the location | ering the letter "N" (for network), "N-M" (f<br>), "E" (for noncommercial educational), o<br>erms, see page (iv) of the general instru-<br>on of each station. For U.S. stations, list<br>adian stations, if any, give the name of th | or "E-M" (for noncommercial educations in the paper SA1-2 form.<br>the community to which the station | tional multicast).<br>n is licensed by the   |         |
|                                       | 1. CALL SIGN   | 2. B'CAST CHANNEL NUMBER  | 3. TYPE OF STATION  | 4. LOCATION OF S   | STATION |
|                                       | KRTV   | 3.1   | N   | Great Falls, MT  |         |
|                                       | KUSM   | 9   | E   | Bozeman, MT  |         |
| d Rows as Necessary                   | KFBB   | 5   | N   | Great Falls, MT  |         |
|                                       | KFBB2  | 5.2   | N   | Great Falls, MT  |         |
|                                       | KBGF   | 13  | Ν   | Great Falls, MT  |         |
|                                       | KRTV-CW  | 3.2   | N-M   | Great Falls, MT  |         |
|                                       | -  |   |   |  |         |
|                                       | KTGF-Me.TV   | 14  | N-M   | Great Falls, MT  |         |
|                                       | KTGF-Me.TV<br>KRTV-HD  | 14<br>3.1   | N-M<br>N  | Great Falls, MT  |         |
|                                       |  |   |   |  |         |
|                                       | KRTV-HD  | 3.1   | N   | Great Falls, MT  |         |
|                                       | KRTV-HD<br>KFBB2-HD  | 3.1<br>5  | N<br>N  | Great Falls, MT<br>Great Falls, MT   |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD   | 3.1<br>5<br>6   | N<br>N<br>N   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT  |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD   | 3.1<br>5<br>6<br>3.2  | N<br>N<br>N<br>N-M  | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT                                   |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD  | 3.1<br>5<br>6<br>3.2<br>16  | N<br>N<br>N<br>N-M<br>N   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT                    |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD<br>KFBB3-SWX                             | 3.1<br>5<br>6<br>3.2<br>16<br>5.3   | N<br>N<br>N<br>N-M<br>N-M   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT<br>Great Falls, MT |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD<br>KFBB3-SWX                             | 3.1<br>5<br>6<br>3.2<br>16<br>5.3   | N<br>N<br>N<br>N-M<br>N-M   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT<br>Great Falls, MT |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD<br>KFBB3-SWX                             | 3.1<br>5<br>6<br>3.2<br>16<br>5.3   | N<br>N<br>N<br>N-M<br>N-M   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT<br>Great Falls, MT |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD<br>KFBB3-SWX                             | 3.1<br>5<br>6<br>3.2<br>16<br>5.3   | N<br>N<br>N<br>N-M<br>N-M   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT<br>Great Falls, MT |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD<br>KFBB3-SWX                             | 3.1<br>5<br>6<br>3.2<br>16<br>5.3   | N<br>N<br>N<br>N-M<br>N-M   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT<br>Great Falls, MT |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD<br>KFBB3-SWX                             | 3.1<br>5<br>6<br>3.2<br>16<br>5.3   | N<br>N<br>N<br>N-M<br>N-M   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT<br>Great Falls, MT |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD<br>KFBB3-SWX                             | 3.1<br>5<br>6<br>3.2<br>16<br>5.3   | N<br>N<br>N<br>N-M<br>N-M   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT<br>Great Falls, MT |         |
|                                       | KRTV-HD<br>KFBB2-HD<br>KBGF-HD<br>KRTV-CW HD<br>KUSM-HD<br>KFBB3-SWX                             | 3.1<br>5<br>6<br>3.2<br>16<br>5.3   | N<br>N<br>N<br>N-M<br>N-M   | Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Great Falls, MT<br>Bozeman, MT<br>Great Falls, MT |         |

| .EGAL NAME OF<br>MID-RIVERS   |   |   | YSTEM:<br>OPERATIVE, INC.  |  |   |                                     |   | SYSTEM I<br>146                  |
|---|---|---|--|--|---|-------------------------------------|---|----------------------------------|
|   |   | 00  |  |  |   |                                     |   | 140                              |
|   | every radio s   | tation ca   | rried on a separate and discre<br>nerally receivable by your cabl  |  |   |                                     |   | н                                |
| eceivable if (1)<br>on the basis of r<br>for detailed info<br>paper SA1-2 for<br><b>Column 1:</b> Id<br><b>Column 2:</b> Si<br><b>Column 3:</b> If<br>ignal, indicate t<br><b>Column 4:</b> G | it is carried by<br>monitoring, to<br>mation abou<br>m.<br>entify the call<br>tate whether t<br>the radio stati<br>this by placing<br>ive the statior | y the sys<br>be recei<br>t the Co<br>sign of e<br>he statio<br>ion's sign<br>g a check<br>h's locatio | I-Band FM Carriage: Under C<br>tem whenever it is received at<br>ved at the headend, with the s<br>pyright Office regulations on th<br>each station carried.<br>In is AM or FM.<br>hal was electronically processes<br>mark in the "S/D" column.<br>on (the community to which the | the system's he<br>system's FM ante<br>his point, see pa<br>ed by the cable s<br>e station is licens | adend, and (2<br>enna, during c<br>ge (v) of the g<br>system as a se<br>sed by the FC | ertain st<br>eneral ir<br>eneral ir | be expected,<br>ated intervals.<br>Instructions in the. | Primary<br>Transmitters<br>Radio |
|   |   | -   |  |  | -   | 8/D                                 |   |                                  |
| CALL SIGN   | AM or FM  | S/D   | LOCATION OF STATION  | CALL SIGN  | AM or FM  | S/D                                 | LOCATION OF STATION                                     |                                  |
|   |   |   |  |  |   |                                     |   |                                  |
|   |   |   |  |  |   |                                     |   |                                  |
|   |   |   |  |  |   |                                     |   |                                  |
|   |   |   |  |  |   |                                     |   |                                  |
|   |   |   |  |  |   |                                     |   |                                  |
|   |   |   |  |  |   |                                     |   |                                  |
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| Accounting Perio | od: 2021/1  |                                       |   |  |  |  | FO   | RM SA1-2E. PAGE 5. |
|------------------|---|---------------------------------------|---|--|--|--|--|--------------------|
|                  | LEGAL NAME OF OWNER OF  | CABLE SYS                             | STEM:   |  |  |  |  | SYSTEM ID#         |
| Name             | MID-RIVERS TELEPH   |                                       | PERATIVE.   | INC.   |  |  |  | 14629              |
|                  |   |                                       | ,   |  |  |  |  | 11020              |
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| Statement and    | <ul> <li>During the accounting pe</li> </ul>  | riod, did yoi                         | ur cable syster   | m carry, on a substitute ba                                | asis, any noni                                 | network te                                       | levision pro                               | -                  |
| Program Log      | broadcast by a distant sta  | ition?                                |   |  |  |  | YES  | × NO               |
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|                  | log in block 2.   |                                       |   |  |  |  |  |                    |
|                  | 2. LOG OF SUBSTITUT   |                                       |   |  |  |  |  |                    |
|                  | In General: List each subs  | titute progra                         | am on a separ   | ate line. Use abbreviation                                 | s wherever p                                   | ossible, if                                      | their meani                                | ng is              |
|                  | clear. If you need more spa   |                                       |   |  |  |  |  |                    |
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|                  | period, was broadcast by a<br>under certain FCC rules, re   |                                       |   |  |  |  |  |                    |
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|                  | "NBA Basketball: 76ers vs.  |                                       |   | List specific progre                                       |  | example,   | I LOVE LUO                                 |                    |
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|                  | the case of Mexican or Ca   |                                       |   |  |  |  |  |                    |
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|                  | to the nearest five minutes<br>stated as "6:00–6:30 p.m."   | . Example:                            | a program car   | ned by a system from 6.0                                   | 1:15 p.m. to e                                 | 5.26:30 p.r                                      | n. snouid b                                | e                  |
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| Nume         Lists Lawser of Water OF OLD STRING         SYSTEM IDF           INDERVICES TELEPHONE COOPERATVE, INC.         14629           GROSS RECEIPTS         Interpretation (Interpretation (Interpretati  | Accounting Period: | 2021/1   |                                      | FORM                                   | 6. SA1-2E. PAGE 6.  |
|--|--------------------|--|--------------------------------------|--|---------------------|
| Korse Recept         Instructions: The figure you give in this space determines the form you field and the amount you gave. Enter the stately determines the form you have the second you have the | Name               |  |                                      | ę                                      | 8YSTEM ID#<br>14629 |
| Letter         Instructions: To compute the Typethy fee you ove:           Copyright Fee         - Compute block 1f the amount of gross receipts in space K is 137,100 or less:           • Use block 2 ff the amount of gross receipts in space K is more than \$137,100 or less:         - Use block 2 ff the amount of gross receipts in space K is note than \$137,100 or less:           • Use block 2 ff the amount of gross receipts in space K is note than \$137,100 or less:         - Use block 2 ff the amount of gross receipts of \$137,100 or less:           • Isotuctor:: As a cable system with gross neceipts of \$137,100 or less:         - Use 523,800           • Isotuctor:: As a cable system with gross neceipts of \$137,100 or less:         - Use 5137,100 or less:           • Instructor:: As a cable system with gross neceipts of \$137,100 or less:         - Use 5137,100 or less:           • Instructor:: As a cable system with gross neceipts of \$137,100 or less:         - Use 5137,100 or less:           • Instructor::::::::::::::::::::::::::::::::::::  |                    | Instructions: The figure you give in this space determines the form you file and the and<br>all amounts (gross receipts) paid to your cable system by subscribers for the system's s<br>(as identified in space E) during the accounting period. For a further explanation of how<br>page (vii) of the general instructions located in the paper SA1-2 form.<br>Gross receipts from subscribers for secondary transmission service(s)<br>during the accounting period. | econdary transm<br>to compute this a | ission service<br>amount, see<br>\$ 30 | 00,661.95           |
| Instructions: As a cable system with gross receipts of \$137,100 or less, the royality fee that you must pay for this six-mon accounting period is \$23.00         Line 1. Royalty fee for accounting period         Line 2. Interest charge. Enter the amount from line 4, space Q, page 8         BLOCK 2: GROSS RECEIPTS OF \$283,800 OR LESS (but more than \$137,100)         1. Base amount under statutory formula         Subtract line 2 from line 1         4. Enter the amount of gross receipts from space K         5. Enter the amount form line 4         7. Multiply line 5 by .005 (enter figure here)         8. Interest charge. Enter the amount from line 4, space Q, page 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. Subtract line 2 from line 1       \$ 300,661.95         9. Base amount under statutory formula       \$ 263,800.00         10. Enter the amount form line 4, space Q, page 8  |                    | <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 th</li> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less th</li> </ul>   | an \$527,600                         | 263,800                                |                     |
| accounting period is \$52.00         Line 1. Royalty fee for accounting period.         Line 2. Interest charge. Enter the amount from line 4, space Q, page 8         BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)         1. Base amount under statutory formula         2. Enter amount of gross receipts from space K.         3. Subtract line 2 from line 1.         4. Enter the amount of gross receipts from space K.         5. Enter the amount of gross receipts from space K.         6. Subtract line 2 from line 4         7. Multipy line 6 by .005 (enter figure here).         8. Interest charge. Enter the amount from line 4, space Q, page 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8         9. Subtract line 2 from line 1       \$ 300,661.95         9. Bace amount under statutory formula       \$ 263,800.00         9. Subtract line 2 from line 1       \$ 368.62         9. Royalty due on  |                    | BLOCK 1: GROSS RECEIPTS OF \$137,100 OR  | LESS                                 |  |                     |
| 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   |                    |  | you must pay for                     | this six-mon                           |                     |
| Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2  |                    | Line 1. Royalty fee for accounting period  |                                      |  |                     |
| 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  |                    | Line 2. Interest charge. Enter the amount from line 4, space Q, page 8   |                                      |  | 0.00                |
| 1. Base amount under statutory formula       \$ 263,800.00         2. Enter amount of gross receipts from space K.   |                    | Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and  | 2                                    |  |                     |
| 2. Enter amount of gross receipts from space K   |                    | BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but m  | ore than \$137,1                     | 00)                                    |                     |
| 3. Subtract line 2 from line 1   |                    | 1. Base amount under statutory formula   | 263,800.00                           |  |                     |
| 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         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       \$ 300,661.95         2. Base amount under statutory formula       \$ 263,800.00         3. Subtract line 2 from line 1       \$ 36,681.95         4. Multiply line 3 by .01       \$ 36,861.95         4. 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       \$ 1,687.62         FILING FEE AND TOTAL REMITTANCE DUE         FILING FEE AND TOTAL REMITTANCE DUE         FILING FEE AND TOTAL REMITTANCE DUE         Internet fore Accounting Period (from Block 1, 2, or 3, above)       \$ 1,687.62         2. Filing Fee Gese the instructions for more information on filing fee calculations)       \$ 1,707.   |                    | 2. Enter amount of gross receipts from space K   |                                      |  |                     |
| 5. Enter the amount from line 3.   |                    | 3. Subtract line 2 from line 1   |                                      |  |                     |
| 6. Subtract line 5 from line 4   |                    | 4. Enter the amount of gross receipts from space K   |                                      |  |                     |
| 7. Multiply line 6 by .005 (enter figure here)   |                    | 5. Enter the amount from line 3  |                                      |  |                     |
| 8. Interest charge. Enter the amount from line 4, space Q, page 8  |                    | 6. Subtract line 5 from line 4   |                                      |  |                     |
| 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8  |                    | 7. Multiply line 6 by .005 (enter figure here)   |                                      |  |                     |
| BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)         1. Enter the amount of gross receipts from space K  |                    | 8. Interest charge. Enter the amount from line 4, space Q, page 8  |                                      |  | 0.00                |
| 1. Enter the amount of gross receipts from space K   |                    | 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8  |                                      |  |                     |
| 2. Base amount under statutory formula       \$ 263,800.00         3. Subtract line 2 from line 1       \$ 36,861.95         4. Multiply line 3 by .01       \$ 368.62         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       \$ 1,687.62         FILING FEE AND TOTAL REMITTANCE DUE         S 1,687.62         Due         3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3         S 1,707.62         Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights!  |                    | BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but  | less than \$527                      | ,600)                                  |                     |
| 3. Subtract line 2 from line 1       \$ 36,861.95         4. Multiply line 3 by .01       \$ 368.62         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       \$ 1,687.62         FILING FEE AND TOTAL REMITTANCE DUE         Filing Fee and Total Remittance Due         Due         1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)         2. Filing Fee (See the instructions for more information on filing fee calculations)       \$ 20.00         3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3       \$ 1,707.62         Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights!   |                    | 1. Enter the amount of gross receipts from space K   | 300,661.95                           |  |                     |
| 4. Multiply line 3 by .01  |                    | 2. Base amount under statutory formula   | 263,800.00                           |  |                     |
| 4. Multiply line 3 by .01  |                    | 3. Subtract line 2 from line 1 \$  | 36,861.95                            |  |                     |
| 6. Interest charge. Enter the amount from line 4, space Q, page 8  |                    | 4. Multiply line 3 by .01  | \$                                   | 368.62                                 |                     |
| 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6       \$ 1,687.62         FILING FEE AND TOTAL REMITTANCE DUE         Filing Fee and Total Remittance Due         1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)         \$ 1,687.62         2. Filing Fee (See the instructions for more information on filing fee calculations)         \$ 20.00         3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3         Mathematica in the form of an electronic payment payable to the Register of Copyrights!   |                    | 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)  | . \$                                 | 1,319.00                               |                     |
| FILING FEE AND TOTAL REMITTANCE DUE         FILING FEE AND TOTAL REMITTANCE DUE         Filing Fee and<br>Total Remittance<br>Due       \$ 1,687.62         2. Filing Fee (See the instructions for more information on filing fee calculations)       \$ 20.00         3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3       \$ 1,707.62         Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights!  |                    | 6. Interest charge. Enter the amount from line 4, space Q, page 8  |                                      | 0.00                                   |                     |
| Filing Fee and<br>Total Remittance<br>Due       1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)  |                    | 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6  |                                      | \$                                     | 1,687.62            |
| Total Remittance<br>Due       1. Royalty Fee Payable for Accounting Period (infinit Block 1, 2, 013, above)  |                    | FILING FEE AND TOTAL REMITTANCE DUE  |                                      |  |                     |
| Total Remittance<br>Due       1. Royalty Fee Payable for Accounting Period (infinit Block 1, 2, 013, above)  |                    |  |                                      |  |                     |
| 2. Filing Fee (See the instructions for more information on filing fee calculations)   | Total Remittance   | 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)  | . \$                                 | 1,687.62                               |                     |
| Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights!   | Due                | 2. Filing Fee (See the instructions for more information on filing fee calculations)   | . \$                                 | 20.00                                  |                     |
|  |                    | 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3   |                                      | \$                                     | 1,707.62            |
|  |                    |  | -                                    |  | ghts!               |

| Accounting Period:                 | 2021/1   | FORM SA1-2E. PAGE 7.                             |
|------------------------------------|--|--|
| Name                               | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>MID-RIVERS TELEPHONE COOPERATIVE, INC.   | SYSTEM ID#<br>14629                              |
| M<br>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 .  | 14<br>14   |
| N<br>Individual to<br>Be Contacted | <b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> (Identify an individual to whom we can contact about this statement of account.)  |  |
| for Further<br>Information         | Name Annie Edwards Telephone   | 406-485-3301                                     |
|                                    | Address PO Box 280<br>(Number, street, rural route, apartment, or suite number)<br>Circle, MT 59215<br>(City, town, state, zip)<br>Email mrtcreg@midrivers.coop Fax (optional)   |  |
| <b>O</b><br>Certification          | CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) + 1, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) (Cowner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space (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) of the legal entity identified as ov in line 1 of space B. (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ov in line 1 of space B. (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ov in line 1 of space B. (I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained hereis are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. (I & U.S.C., Section 1001(1986)) | system as identified<br>vner of the cable system |
|                                    | Date: 7/27/2021  |  |

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.

| unting Period: 2021/1  |   | FORM SA1-2E. PAG   |
|--|---|--|
| L NAME OF OWNER OF CABLE SYSTEM:   |   | SYSTEM   |
| -RIVERS TELEPHONE COOPERATIVE, INC.  |   | 146  |
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUS<br>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the<br>lowing sentence:<br>"In determining the total number of subscribers and the gross amounts paid to<br>service of providing secondary transmissions of primary broadcast transmitters<br>scribers and amounts collected from subscribers receiving secondary transmis<br>For more information on when to exclude these amounts, see the note on page (vii) of<br>located in the paper SA1-2 form.<br>During the accounting period, did the cable system exclude any amounts of gross received<br>made by satellite carriers to satellite dish owners?<br>NO  | e Copyright Act by adding the fol-<br>o the cable system for the basic<br>s, the system shall not include sub-<br>ssions pursuant to section 119."<br>of the general instructions<br>ceipts for secondary transmissions | P<br>Special Statemen<br>Concerning Gross<br>Receipts Exclusio |
| YES. Enter the total here and list the satellite carrier(s) below  | \$  |  |
| Name<br>Mailing Address Name<br>Mailing Address  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |
| You must complete this worksheet for those royalty payments submitted as a result of<br>For an explanation of interest assessment, see page (viii) of the general instructions lo<br>Line 1 Enter the amount of late payment or underpayment   | ocated in the paper SA1-2 form.   | Q<br>Interest Assessme   |
|  | ocated in the paper SA1-2 form.   | Q<br>Interest Assessme   |
| For an explanation of interest assessment, see page (viii) of the general instructions lo<br>Line 1 Enter the amount of late payment or underpayment   | x   | Q<br>Interest Assessme   |
| For an explanation of interest assessment, see page (viii) of the general instructions lo  | x   | Q<br>Interest Assessme   |
| For an explanation of interest assessment, see page (viii) of the general instructions lo<br>Line 1 Enter the amount of late payment or underpayment   | x   |  |
| For an explanation of interest assessment, see page (viii) of the general instructions lo<br>Line 1 Enter the amount of late payment or underpayment   | xdays   |  |
| For an explanation of interest assessment, see page (viii) of the general instructions lo<br>Line 1 Enter the amount of late payment or underpayment   | xdays   |  |
| For an explanation of interest assessment, see page (viii) of the general instructions lo<br>Line 1 Enter the amount of late payment or underpayment   | xdays   |  |
| For an explanation of interest assessment, see page (viii) of the general instructions lo         Line 1       Enter the amount of late payment or underpayment  | x   |  |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions location interest assessment, see page (viii) of the general instructions location interest in the amount of late payment or underpayment.</li> <li>Line 1 Enter the amount of late payment or underpayment.</li> <li>Line 2 Multiply line 1 by the interest rate* and enter the sum here .</li> <li>Line 3 Multiply line 2 by the number of days late and enter the sum here .</li> <li>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 .</li> <li>* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate</i>.</li> </ul>  | x days<br>x days<br>x days<br>x 0.00274<br>(interest charge)  |  |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions lo</li> <li>Line 1 Enter the amount of late payment or underpayment</li></ul>  | x days<br>x days<br>x days<br>x 0.00274<br>(interest charge)  |  |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions location interest assessment, see page (viii) of the general instructions location interest in the amount of late payment or underpayment.</li> <li>Line 1 Enter the amount of late payment or underpayment.</li> <li>Line 2 Multiply line 1 by the interest rate* and enter the sum here .</li> <li>Line 3 Multiply line 2 by the number of days late and enter the sum here .</li> <li>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 .</li> <li>* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate</i>.</li> </ul>  | x days<br>x days<br>x 0.00274<br>\$<br>(interest charge)<br>e.pdf. For further assistance please  |  |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions location interest assessment, see page (viii) of the general instructions location interest in the amount of late payment or underpayment.</li> <li>Line 1 Enter the amount of late payment or underpayment.</li> <li>Line 2 Multiply line 1 by the interest rate* and enter the sum here .</li> <li>Line 3 Multiply line 2 by the number of days late and enter the sum here .</li> <li>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 .</li> <li>* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.</i> contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.</li> </ul>   | x   |  |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions lot Line 1 Enter the amount of late payment or underpayment</li></ul>  | x   |  |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions location interest assessment or underpayment</li></ul>   | x   |  |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions to Line 1 Enter the amount of late payment or underpayment.</li> <li>Line 2 Multiply line 1 by the interest rate* and enter the sum here .</li> <li>Line 3 Multiply line 2 by the number of days late and enter the sum here .</li> <li>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</li> <li>* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.</i> contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.</li> <li>** This is the decimal equivalent of 1/365, which is the interest assessment for one NOTE: If you are filing this worksheet covering a statement of account already submit list below the owner, address, first community served, ID number, and accounting per Owner</li> </ul> | x   |  |
| For an explanation of interest assessment, see page (viii) of the general instructions to<br>Line 1 Enter the amount of late payment or underpayment   | x   |  |
| <ul> <li>For an explanation of interest assessment, see page (viii) of the general instructions to Line 1 Enter the amount of late payment or underpayment</li></ul>   | x   |  |

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