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 COPYRIGH	IT OFFICE USE ONLY	by email to:
for Secondary Transmissions by		DATE RECEIVED	AMOUNT	- coplicsoa@loc.gov
Cable Systems (Short Form) General instructions are located in the first tab of this workbook		tions are located 7/14/21		For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Δ				
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))	
	2021/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional	- see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of title of the subsidiary, not that of the pa		sidiary of another corporation, give the full c	corporate
Owner	List any other name or names under wh	ich 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.	35309

LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM

		BENKELMAN TELEPHONE CO INC.
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		PO BOX 645 (Number, street, rural route, apartment, or suite number)
		BENKELMAN NE 69021 (City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1	IDENTIFICATION OF CABLE SYSTEM:
		MAILING ADDRESS OF CABLE SYSTEM:
	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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
Name	BENKELMAN TELEPHONE CO INC.	3530
D	Instructions: List each separate community served by the cable system. A "comu "a separate and distinct community or municipal entity (including unincorporate 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	d communities within unincorporated areas and including single ou list will serve as a form of system identification hereafter kno
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or molidentified city.	
	CITY OR TOWN	STATE
First	WAUNETA	NE
Community		
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ARI E SVSTEMA						FORM SA1	TEM ID
Name								313	3530
	BENKELMAN TELEPHO	DNE CO INC	•						0000
-	SECONDARY TRANSMISSION	SERVICE: SL	JBSCR	RIBERS AND R	ATES				
E	In General: The information in s								
Secondary	system, that is, the retransmission about other services (including p								
Transmission	last day of the accounting period							g on the	
Service: Sub-	Number of Subscribers: Both	-					•		
scribers and Rates	down by categories of secondary each category by counting the n	,		0 / 3					
nutoo	separately for the particular serv			•••				onargou	
	Rate: Give the standard rate c								
	unit in which it is generally billed category, but do not include disc					ard rate variation	s within a	particular rate	
	Block 1: In the left-hand block					condary transmis	sion servi	ce that cable	
	systems most commonly provide								
	that applies to your system. <b>Not</b> categories, that person or entity			•		0			
	subscriber who pays extra for ca					0,	•		
	first set" and would be counted of	0			( )				
	<b>Block 2:</b> If your cable system printed in block 1 (for example, t	-		•					
	with the number of subscribers a						,.		
	sufficient.		Ũ		- <b>-</b>	•			
	BLC	DCK 1 NO. OF		1			BLOCK	C2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIBI		RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT
	Residential:								
	<ul> <li>Service to first set</li> </ul>		0	\$78.05	EXTEN	DED CABLE		-	\$27.6
	<ul> <li>Service to additional set(s)</li> </ul>		0	\$2.00	HBO			-	\$20.8
	• FM radio (if separate rate)				SHOW	TIME/MOVIE		-	\$19.8
	Motel, hotel								
	Commercial Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMI	SSIONS: RATE	S				
F	In General: Space F calls for rat		,		-				
•	not covered in space E, that is, t service for a single fee. There ar						-		
Services	furnished at cost or (2) services	or facilities furr	nished	to nonsubscribe	ers. Rate i	nformation shou	Id include	both the	
Other Than	amount of the charge and the un		usuall	y billed. If any r	ates are cl	harged on a vari	able per-p	rogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rat		he cab	le system for e	ach of the	applicable servi	ces listed.		
Rates	<b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed. <b>Block 2:</b> 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 brief (two- or three-word) description				lished. List	these other ser	vices in the	e form of a	
		BLOO						BLOCK 2 DRY OF SERVICE	
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SER ation: Non-res		RATE	CATEGO	DRT OF SERVICE	RATI
	• Pay cable			otel, hotel	laonna	\$29.85			
	• Pay cable—add'l channel	\$8.95		ommercial		\$29.85			
	Fire protection		• Pa	y cable					
	<ul> <li>Burglar protection</li> </ul>		•Pa	iy cable-add'l cl	hannel	\$8.95			
	Installation: Residential		• Fir	e protection					
	• First set	\$29.85		rglar protection	1				
	• Additional set(s)			services:					
	FM radio (if separate rate)			econnect		\$34.50			
	Converter			sconnect utlet relocation		\$72.95			
			- 01	INGLIGIOCALION		\$12.90			I
			• M/c	ove to new add	ress	\$24.95			

<u> </u>	2021/1				RM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER O				SYSTEM ID
	BENKELMAN TELEP				3530
G		TELEVISION entify every television station (including t m during the accounting period, <i>except</i>			
Primary Insmitters:	FCC rules and regulations 76.59(d)(2) and (4), 76.61(	in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6° is explained in the next paragraph.	e carriage of certain network prog	rams [sections	
elevision	Substitute Basis Stations basis under specific FCC r	<b>::</b> With respect to any distant stations ca ules, regulations, or authorizations:			
	station was carried only or	e in space G—but do list it in space I (th a substitute basis. also in space I, if the station was carried	· · ·	0,	
	Column 1: List each statio multicast stream associate	on concerning substitute basis stations, in s call sign. <i>Do not</i> report origination p d with a station according to its over-the	rogram services such as HBO, ES	PN, etc. Identify each	
	of license. For example, W	el number the FCC assigned to the telev /RC is channel 4 in Washington, D.C.	-	-	
	educational station, by ente (for independent multicast)	n case whether the station is a network s ering the letter "N" (for network), "N-M" (f , "E" (for noncommercial educational), o	for network multicast), "I" (for inder r "E-M" (for noncommercial educa	pendent), "I-M"	
	Column 4: Give the location	erms, see page (iv) of the general instruction of each station. For U.S. stations, list addan stations, if any, give the name of the	the community to which the station		
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF S	STATION
	KWNB	6	N	HAYES CENTER, NE	
	KSNK	8	N	MCCOOK, NE	
as Necessary	KCNC	9	<u>N</u>	DENVER, CO	
	KBSL	10	<b>N</b>	GOODLAND, KS	
	KPNE	11	E	NORTH PLATTE, NE	
	KWGN	47	N	DENVER, CO	
		47	N		
		47	N		
		47	N		
		47	N		
		47	N		
		47	N		
		47	N		
		47	N		
		47	N		
		47	N		
		47	N		
		47			
		47			
		47			
		47			
		47			

BENKELMA	N TELEPHO	ONE C	O INC.						SYSTEM 35
	every radio s	tation ca	arried on a separate and discr nerally receivable by your cab						н
eceivable if (1) n the basis of a or detailed info aper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abou rm. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Co sign of e he static ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the pyright Office regulations on each station carried. In 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	ati sy th se	the system's he ystem's FM ante is point, see pag d by the cable s e station is licens	adend, and (2 nna, during cr ge (v) of the g ystem as a se sed by the FC	!) it can ertain st eneral ii eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	П	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
CALL SIGN	AIV OF FM	3/0	LOCATION OF STATION	H	CALL SIGN	AIV OF FIM	3/D	LOCATION OF STATION	
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				11			<b> </b>		

Accounting Perio	Ju. 2021/1					FOR	M SA1-2E. PAGE 5		
Name	LEGAL NAME OF OWNER OF						SYSTEM ID#		
	BENKELMAN TELEPH	IONE CO INC.					35309		
_	SUBSTITUTE CARRIAG	E: SPECIAL STAT	EMENT AND PROGRAM LC	)G					
			television program, broadcast b						
Substitute			ler specific present and former F uded in this log_see page (v) of t						
Carriage:	explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. <b>1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE</b>								
Special Statement and				asis, any noni	network tele	vision prog	Iram		
Program Log	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program     broadcast by a distant station?     The system carry of a substitute basis, any nonnetwork television program     YES X								
	Note: If your answer is "No	o", leave the rest of t	nis page blank. If your answer i	s "Yes," you ı	must comple	ete the prog			
	log in block 2.			-			-		
	period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. <b>Column 2:</b> If the prograt <b>Column 3:</b> Give the call <b>Column 4:</b> Give the broot the case of Mexican or Cat <b>Column 5:</b> Give the mon first. Example: for May 7 gi <b>Column 6:</b> State the tim to the nearest five minutes stated as "6:00–6:30 p.m." <b>Column 7:</b> Enter the lett to delete under FCC rules	e of every nonnetwor a distant station and egulations, or author ries like "movies" or . Bulls." m was broadcast live sign of the station b adcast station's loca nadian stations, if an nth and day when yo we "5/7." les when the substitu . Example: a program	television program ("substitut hat your cable system substitut zations. See page (v) of the ge basketball." List specific progra- e, enter "Yes." Otherwise enter roadcasting the substitute prog ion (the community to which th y, the community with which th ur system carried the substitut te program was carried by you n carried by a system from 6:0 ogram was substituted for prog	ted for the pro- eneral instruct am titles, for e "No." ram. e station is live e station is live e program. U rr cable syste 1:15 p.m. to 6 gramming that	ogramming ions for furt example, "I lentified). se numerals m. List the t 5:28:30 p.m. t your syste	of another her informa Love Lucy" he FCC or, s, with the r imes accur should be m was <i>requ</i>	station ation. or in month ately <i>uired</i>		
			em was permitted to delete uno				ogram		
	effect on October 19, 1976	). 	em was permitted to delete und	der FCC rules	s and regula	TUTE			
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES			
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	der FCC rules WHE CARRI	N SUBSTI	TUTE JRRED	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
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	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		
	effect on October 19, 1976	UBSTITUTE PROG	em was permitted to delete und RAM DN'S	WHE CARRI 5. MONTH	N SUBSTI AGE OCCI	TUTE JRRED IMES	7. REASON FOR		

Accounting Period:	2021/1		FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: BENKELMAN TELEPHONE CO INC.		SI	STEM ID# 35309
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount y all amounts (gross receipts) paid to your cable system by subscribers for the system's second (as identified in space E) during the accounting period. For a further explanation of how to co 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.	dary transmis mpute this ar	sion service	
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 oi • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$ See page (vi) of the general instructions located in the paper SA1-2 form for more information.		63,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LES	S		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you n accounting period is \$52.00	nust pay for th	nis six-mon	
	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 t		-	
	1. Base amount under statutory formula	63,800.00		
	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	· · · · · · · · · · - <u>-</u>		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less	than \$527,6	600)	
	1. Enter the amount of gross receipts from space K			
	2. Base amount under statutory formula	53,800.00		
	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	· · · · · · · · · · - <u>-</u>		
	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 t See page i of the general instructions in the paper SA1-2 form for mo	-		nts!

Accounting Period:	2021/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: BENKELMAN TELEPHONE CO INC.	SYSTEM ID# 35309
M Channels	<ul> <li>CHANNELS</li> <li>Instructions: You must give (1) the number of channels on which the cable to its subscribers, and (2) the cable system's total number of activated channels.</li> <li>1. Enter the total number of channels on which the cable system carried television broadcast stations</li></ul>	6
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEED we can contact about this statement of account.)	
for Further Information	Name         JENNA BURRELL           Address         607 CHIEF STREET (Number, street, rural route, apartment, or suite number)           BENKELMAN NE 69021	Telephone 308-423-2000
	(City, town, state, zip) Email jenna@bwtelcom.net	Fax (optional)
O Certification	in line 1 of space B and that the owner is not a corporation or p X (Officer or partner) I am an officer (if a corporation) or a partner (i in line 1 of space B. • I have examined the statement of account and hereby declare under penalty are true, complete, and correct to the best of my knowledge, information, and [18 U.S.C., Section 1001(1986)] X /s/ Kacey L. F Enter an electronic signature of	.) f the cable system as identified in line 1 of space B; or e duly authorized agent of the owner of the cable system as identified artnership; or f a partnership) of the legal entity identified as owner of the cable system of law that all statements of fact contained herein belief, and are made in good faith.
	Typed or printed name: KACEY L. FF Title: VICE-PRESIDENT (Title of official position held in corporation or	
	Date:	07-14-2021

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

inting Period: 2021/1	FORM SA1-2E. PAGE
NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
KELMAN TELEPHONE CO INC.	3530
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 sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross
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.	Receipts Exclusion
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Name Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-
Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ -	
(interest charge)	-
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** 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.	
Owner	
Address	
Address	

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