# THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2017

If you are filing for a prior accounting period, contact the Licensing Section for the correct form.

### SA3 Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are at the end of this form [pages i-viii].

FFICE USE ONLY
AMOUNT
\$ ALLOCATION NUMBER

Return to: Library of Congress Copyright Office-LS 101 Independence Avenue SE Washington, DC 20557-6400 (202) 707-8150

For courier deliveries, see page ii of the general instructions.

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (Check one of the boxes and fill in the year date.)							
Accounting Period	■ January 1–June 30 2023 July 1–[	December 31(Year)						
Bowner	INSTRUCTIONS: Give the full legal name of the owner of the cable system in line 1. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.  In line 2, list any other 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 Section. 30845  LEGAL NAME OF OWNER OF CABLE SYSTEM:  Conway Corporation 30845  BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT):							
	3 MAILING ADDRESS OF OWNER OF CABLE SYSTEM: P.O.Box 99 (Number, street, rural route, apartment, or suite number) Conway, AR 72033 (City, town, state, zip)							
C System	INSTRUCTIONS: In line 1, give any business or trade names used to identify the names already appear in space B. In line 2, give the mailing address of the system	e business and operation of the system unless these em, if different from the address given in space B.						
System	1 IDENTIFICATION OF CABLE SYSTEM: Conway Corp							
	MAILING ADDRESS OF CABLE SYSTEM: P.O. Box 99 (Number, street, rural route, apartment, or suite number) Conway, AR 72033 (City, town, state, zip code)							
D Area	<b>Instructions:</b> For complete space D instructions, see page 1b. Identify only the first all communities.	st community served below and relist on page 1b with						
Served	CITY OR TOWN	STATE						
First ▶	Conway	AR						
Community	Below is a sample for reporting communities if you report multiple channel line-up	s in Space G.						
	CITY OR TOWN (SAMPLE)	STATE CH LINE UP SUB GRP#						
Sample ▶	Alda							

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:								
Conway Corporation		30	845	Name				
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated								
areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.								
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile the identified city or town.	home parks sh	ould be reported in	parentheses below	Served				
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).								
When reporting the carriage of television broadcast stations on a community-by-channel line-up designated by an alpha-letter(s) (based on your Space G reporting (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	ng) and a subse	sis, associate eacl criber group desig	n community with a nated by a number					
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#					
Conway	AR			✓ First				
				Community				
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Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
Conway Corporation 30845

## E

Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

**Number of Subscribers:** Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

**Block 2:** If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLOCK	1	BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
Residential:	4,427	\$99.95	IPTV Basic IPTV Conway Corp TV	576 109	\$35.95 \$91.95	
Motel, hotel	1,163 570	\$34.50				
Commercial Converter						
Residential     Non-residential						

## F

Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

**Block 2:** List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

BLOCK 1				BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
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) Converter	\$16.00 \$3.45 \$50.00 \$20.00	Installation: Non-residential  · Motel, hotel  · Commercial  · Pay cable  · Pay cable—add'l channel  · Fire protection  · Burglar protection  Other services:  · Reconnect  · Disconnect  · Outlet relocation  · Move to new address		Premium Svcs: Cinemax HBO Showtime Starz	\$14.45 \$14.95 \$18.90 \$9.00

FORM SA3, PAGE 3. LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 30845 **Conway Corporation** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections Primary 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Transmitters: substitute program basis, as explained in the next paragraph. Television Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G-but do list it in space I (the Special Statement and Program Log)-if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately: for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). Channel For the meaning of these terms, see page (v) of the general instructions. Line-Up Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified. Note: If you are utilizing multiple channel line-ups, identify the line-up in the far right column here in Space G based on your channel line-up reported in Space D. Use a separate space G for each channel line-up. 6. LOCATION OF STATION 3. TYPE 4. DISTANT? 5. BASIS OF 2. B'CAST 1. CALL CARRIAGE (Yes or No) CHANNEL OF SIGN (If Distant) STATION NUMBER Conway, AR 2 **KETN** E Little Rock/Pine Bluff, AR **KARK** 4 N Little Rock/Pine Bluff, AR 7 **KATV** N Little Rock/Pine Bluff, AR N **KTHV** 11 Little Rock/Pine Bluff,AR **KLRT** 16 1 Little Rock/Pine Bluff, AR **KVTN** 25 1 Little Rock/Pine Bluff, AR 24 I KASN

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:								
Name	Conway Corp	ooration						30845	
Primary Transmitters: Radio	PRIMARY TRANSMITTERS: RADIO In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.  Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions.  Column 1: Identify the call sign of each station carried.  Column 2: State whether the station is AM or FM.  Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete								
	signal, indicate this by placing a check mark in the "S/D" column.  Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).								
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
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OHIVI SAS. FAGE 5.								
LEGAL NAME OF OWNER OF CABLE SYSTE	M:							Name
Conway Corporation						30845		
SUBSTITUTE CARRIAGE: In General: In space I, identify e carried on a substitute basis du authorizations. For a further expinstructions.	very nonnering the ac	etwork televisio counting perio	n program broadcast by d, under specific prese	a distant s	ner FCC ru	ıles, regu	ulations, or	Substitute Carriage:
<ol> <li>SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE</li> <li>During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?</li> <li>Yes</li> <li>No</li> <li>Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.</li> </ol>								
2. LOG OF SUBSTITUTE PRO In General: List each substitut clear. If you need more space, Column 1: Give the title of operiod, was broadcast by a di station under certain FCC rule information. Do not use genera Love Lucy" or "NBA Basketbal Column 2: If the program wa Column 3: Give the call sign Column 4: Give the broadca the case of Mexican or Canadi Column 5: Give the month a first. Example: for May 7 give " Column 6: State the times wa to the nearest five minutes. Es stated as "6:00-6:30 p.m." Column 7: Enter the letter "F to delete under FCC rules and gram was substituted for proge effect on October 19, 1976.	e program please atta every nonrestant statices, regulation at categorial categorial categorial station an station an stations and day who solve the succession of the succession and stations and day who solve the succession at t	ach additional actwork televison and that young ons, or authores like "movies. Bulls." ast live, enter "tion broadcasts location (the standard of the standard	pages.  ion program (substitute our cable system substitute our cable system substitute or "basketball." List "Yes." Otherwise enter "ting the substitute programmunity to which the carried the substitute of the carried the substitute of the substituted for programmant of the substituted for	e program) ituted for to of the ger specific profession in the station is estation is program. Ucable systems amming the pot; enter the station of the systems is the systems in the systems in the systems in the systems is the systems in the systems in the systems in the systems is the systems in the syste	that, dur he programeral instroogram tities s licensed identified se numer em. List that to 6:28: at your syne letter "	ing the amming ructions es, for ed by the di). als, with the times 30 p.m. wstem wa P" if the	accounting of another for further example, "I FCC or, in the month accurately should be as required listed pro-	
	STITUTE	PROGRAM			I SUBSTI		7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIN FROM -		FOR DELETION	
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FORM SA3. PAGE 6. LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 30845 Conway Corporation PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Part-Time Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Carriage column 5 of space G. Log Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." · State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.-3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN** HOURS **HOURS** TO DATE **FROM** TO **FROM** DATE

TOTTO	SAD. FAGE /.	
LEGAL	NAME OF OWNER OF CABLE SYSTEM:	Nome
Conv	way Corporation 30845	Name
Instr all ar (as ic page G	Consider the description of the general instructions. The general instructions of the general instructions.  The general instructions of the general instructions.  The general instructions of the general instructions of the general instructions.  The general instructions of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions.  The general instruction of the general instructions of the general instructions of the general instructions.  The general instruction of the general instructions of t	K Gross Receipts
	PYRIGHT ROYALTY AND FILING FEES	
· Co	ructions: Use the blocks in this space L to determine the royalty fee you owe: omplete block 1, showing your minimum fee. omplete block 2, showing whether your system carried any distant television stations. your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum e from block 1 on line 1 of block 4, and calculate the total royalty fee. your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.	Copyright Royalty Fee
	part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of lock 3 below.	
3	part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block below.	
	part 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be entered on line in block 4 below.	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K  Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.  This is your minimum fee.  \$19,005.97	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.	
Block	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or	
3	4, or part 9, block A of the DSE schedule. If none, enter zero	
	Line 3. Add lines 1 and 2 and enter here	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee/3.75 fee from block 3, line 3, whichever is larger	
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero	Cable systems submitting additional deposits under
	Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) \$ 0.00	Section 111(d)(7) should contact the Licensing
	Line 4. <b>FILING FEE:</b> \$ 725.00	Section for the appropriate
	TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add Lines 1, 2, 3 and 4 of block 4 and enter total here	form for submitting the additional fees.
	Remit this amount via electronic payment payable to Register of Copyrights. (See page (i) of the general instructions for more information.)	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:
Name	Conway Corporation Name 30845
M 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 and nonbroadcast services  87
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)  Cassie Francisco  501-504-6432
information	Address  (Number, street, rural route, apartment, or suite number)
	(City, town, state, zip)  Cassie.Francisco@conwaycorp.com  Email (optional) Fax (optional)
<b>C</b> ertification	<ul> <li>CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations, as explained in the general instructions.)</li> <li>I, the undersigned, hereby certify that (Check one, but only one, 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 B; or</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or</li> </ul>
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system 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 herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C. sec. 1001]  Handwritten signature.  Cassie Francisco  Typed or printed name:  Cassie Francisco  (Title of official position held in corporation or partnership)  Date:

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LEGAL NAME OF OWNER OF CABLE SYSTEM:		
Conway Corporation	30845	Name
SPECIAL STATEMENT CONCERNING GROSS RECOMENTATION TO THE Satellite Home Viewer Act of 1988 amended Title 17, so lowing sentence:  "In determining the total number of subscribers and the service of providing secondary transmissions of primary be scribers and amounts collected from subscribers received.  For more information on when to exclude these amounts, so During the accounting period did the cable system exclude a made by satellite carriers to satellite dish owners?  NO  YES. Enter the total here and list the satellite carrier(s) be	ection 111(d)(1)(A), of the Copyright Act by adding the fol- e gross amounts paid to the cable system for the basic proadcast transmitters, the system shall not include sub- ing secondary transmissions pursuant to section 119." see the note on page (vii) of the general instructions.	P Special Statement Concerning Gross Receipts Exclusions
Name	Name	
Mailing address	Mailing address	
INTEREST ASSESSMENT  You must complete this worksheet for those royalty payment For an explanation of interest assessment, see page (viii) of	ts submitted as a result of a late payment or underpayment.  f the general instructions.  \$	Q Interest Assessment
Line 1 Enter the amount of late payment or underpaymen	nt	
Line 2 Multiply line 1 by the interest rate* and enter the state.  Line 3 Multiply line 2 by the number of days late and enter	x days	
Line 4 Multiply line 3 by 0.00274** enter here and on line space L, (page 7)	<b>3</b>	
	ov/licensing/interest-rate.pdf. For further assistance please	
** This is the decimal equivalent of 1/365, which is the inte	erest assessment for one day late.	
NOTE: If you are filing this worksheet covering a stateme please list below the owner, address, first community served filing.  Owner ————————————————————————————————————	d, accounting period, and ID number as given in the original	
First community served Accounting period ID number		

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Library of Congress Copyright Office-LS 101 Independence Avenue SE Washington, DC 20557-6400

#### Official Business

Penalty for Private Use \$300

Forwarding Service Requested

OFFICIAL BUSINESS
UNITED STATES COPYRIGHT OFFICE
STATEMENT OF ACCOUNT
SA3 (LONG FORM)

#### IMPORTANT NOTICE ABOUT THIS STATEMENT OF ACCOUNT

**Statutory Changes:** Congress passed the STELA Reauthorization Act of 2014 ("STELARA"), which the President signed into law on December 4, 2014, as Public Law 113-200. Read the law at <a href="http://copyright.gov/legislation/pl113-200.pdf">http://copyright.gov/legislation/pl113-200.pdf</a>. For more information on this law (H.R. 5728), visit the FAQ page on the Copyright Office website at <a href="http://copyright.gov/licensing/stelara.html">http://copyright.gov/licensing/stelara.html</a>.

Filing Fees: Effective January 1, 2014, pursuant to the Satellite Television Extension and Localism Act of 2010 (STELA), which granted authority to the Copyright Office to establish fees for the filing of statements of account (SOAs) under the section 111, 119, and 122 statutory licenses, the Office now assesses filing fees for *all* SOAs for current, past, and future accounting periods. For details, see the *Federal Register*, November 29, 2013 (78 FR 71498 <a href="http://www.copyright.gov/fedreg/2013/78fr71498.pdf">http://www.copyright.gov/fedreg/2013/78fr71498.pdf</a>). Please be advised that the filing fee is deducted <a href="https://www.copyright.gov/fedreg/2013/78fr71498.pdf">https://www.copyright.gov/fedreg/2013/78fr71498.pdf</a>). Please be advised that the filing fee is deducted <a href="https://www.copyright.gov/fedreg/2013/78fr71498.pdf">https://www.copyright.gov/fedreg/2013/78fr71498.pdf</a>). (SOA3 filing fee will result in an underpayment of royalty fees. Please remit the royalty fee and filing fee in one EFT payment. (SOA3 filing fee: \$725).

**Low Power Television Stations:** STELARA expanded the definition of a "local market" for low power television stations beginning with the January 1–June 30, 2015, accounting period. See page iv of the General Instructions.

**Multicast versus Simulcast:** *Multicast* is a digital stream of programming that is transmitted by a television broadcast station and is not the station's primary stream. *Simulcast* is a multicast stream of a television broadcast station that duplicates the programming transmitted by the primary stream or another multicast stream of such station.

Photocopy Required (Paper Filings Only): A legible copy of the semiannual statement of account must be submitted together with the original statement of account to the Copyright Office. Note: If replying to Licensing Section correspondence or if submitting revisions or amendments to your original SOA, please do not include extra photocopies of the SOA pages affected. Only one original version of revised SOA pages is required with your reply letter, together with a single copy of any Licensing Section correspondence.

**Fillable SOAs Available Online:** Access the fill-in statement of account form at www.copyright.gov/forms/sa3.pdf. Complete it on a personal computer and print it out. Or print out the form and complete it by hand in dark ink. Give all the required information.

Electronic Payment of Royalty and Filing Fees Required: Effective July 1, 2022, the Copyright Office moved to a single EFT payment method and strongly encourages the use of Pay.gov for current, past, and future royalty and filing fee payments. For detailed instructions, see Circular 74 at <a href="https://www.copyright.gov/circs/circ74.pdf">www.copyright.gov/circs/circ74.pdf</a>. Your remittance, which must include the royalty payment and appropriate filing fee, should be made payable to <a href="https://www.copyrights">Register of Copyrights</a>. Contact your bank to determine if your account will accept an Automated Clearing House (ACH) debit.

Remittance Advice Required: Federal regulations [37 CFR 201.17(k)] require you to attached a remittance advice to your statement(s) of account. A copy of this remittance advice must be sent by email or fax to the Licensing Section. The Office uses this remittance information to ensure the funds received by EFT are correctly allocated to each statement of account. Access a remittance advice form at www.copyright.gov/licensing/remittance-advice.pdf.

Ceased Operations Procedures: If your cable system completely shut down operations during the accounting period, report the facts as they existed on the last day of operations and submit the SOA with the associated royalty and filing fee payments and a cover letter informing the Licensing Section of ceased operations. If your cable system had no subscribers or gross receipts during the entire accounting period, do not submit the SOA or any fees. You do not need to notify us in this case.

**Important: Review Filings:** Please review all elements of your filing(s) before submitting them. Filing properly, including an accurate advice, facilitates processing of your statement(s) of account and payments, minimizes the need for us to contact you with questions, and reduces administrative and other costs.

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