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 by email to:

## STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
8/14/2024	\$
	ALLOCATION NUMBER

## coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
	2024/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting	20241 Barcode Data Filing Period (optional - see instructions)
Period	
В	Instructions: 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
	NEX-TECH LLC
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM
	145 N MAIN
	(Number, street, rural route, apartment, or suite number) LENORA, KS 67645 (City, town, state, zip)
	NSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
С	ames 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	IDENTIFICATION OF CABLE SYSTEM:
	1
	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 suffciency of the fling, a determination that would be made by a court of law.

		FORM SA1-2E. PAG
Nomo	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name	NEX-TECH LLC	240
	Instructions: List each separate community served by the cable system. A "commun	
D	"a separate and distinct community or municipal entity (including unincorporated c discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you as the "first community." Please use it as the first community on all future filings.	ommunities within unincorporated areas and including sing
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile	home parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	STATE
First	GRAINFIELD	KS
Community	COLLYER	KS
	GOVE	KS
d Rows as Necessary	PARK	KS
	QUINTER	KS

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					FORM SA1	TEM I
Name	NEX-TECH LLC							010	240
Е	SECONDARY TRANSMISSION								
<b>L</b>	In General: The information in s system, that is, the retransmissi	•		•		•			
Secondary	about other services (including)								
Transmission	last day of the accounting period	d (June 30 or E	Decembe	r 31, as the ca	se may b	e).		C	
Service: Sub-	Number of Subscribers: Bot	•					•		
scribers and Rates	down by categories of secondar each category by counting the n	•				•			
Rates	separately for the particular serv		-			•	-	scharged	
	Rate: Give the standard rate of							ge and the	
	unit in which it is generally billed	· ·	,		ny standa	ard rate variation	ns within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				ies of se	condary transm	ission serv	ice that cable	
	systems most commonly provid	•		•		•			
	that applies to your system. Not								
	categories, that person or entity					•	• •		
	subscriber who pays extra for ca					d in the count u	nder "Serv	ice to the	
	Block 2: If your cable system					n service that ar	e different	from those	
	printed in block 1 (for example,	-		-					
	with the number of subscribers	and rates, in th	e right-h	and block. A tw	o- or thre	ee-word descrip	tion of the	service is	
	sufficient.	JCK 1		П			BLOCK	(2	
		NO. OF			0.4.7			NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RA
	Service to first set		236	30.00	DELUX	Ē		198	96
	Service to additional set(s)		230	30.00	DELOA	<b></b>		130	
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	<ul> <li>Non-residential</li> </ul>								
	SERVICES OTHER THAN SEC								
F	In General: Space F calls for ra	•			•	• •			
•	not covered in space E, that is, service for a single fee. There a					•			
Services	furnished at cost or (2) services		-		-				
Other Than	amount of the charge and the u		s usually	billed. If any ra	tes are c	harged on a va	riable per-p	orogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard ra		the coble	avetem for on	ch of tho	applicable con	vices listed		
Rates	Block 2: List any services that			•					
	listed in block 1 and for which a	• •			-	-	•		
	brief (two- or three-word) descri	otion and inclu	de the ra	te for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SERV	/ICE	RATE	CATEGO	DRY OF SERVICE	RA
	Continuing Services:		Installa	tion: Non-resi	dential				
	• Pay cable	96.00		el, hotel			•••••••	& Entertain.	13
	<ul> <li>Pay cable—add'l channel</li> </ul>			mercial			Cinema	ax	11
	<ul> <li>Fire protection</li> </ul>		• Pay				НВО		17
	<ul> <li>Burglar protection</li> </ul>		· ·	cable-add'l cha	annel			me & TMC	10
	Installation: Residential			protection				SuperPak	8
	• First set	99.00	-	lar protection			NFL Re	a∠one	49
	• Additional set(s)	130.00		ervices:					
	<ul> <li>FM radio (if separate rate)</li> </ul>			onnect		20.00			
	0								
	• Converter		-	onnect		400.00			
	• Converter		• Outl	onnect et relocation e to new addre		130.00 99.00			

Inting Period: 2	2024/1			FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID
	NEX-TECH LLC			2400
Primary ansmitters: Felevision	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as <b>Substitute Basis Stations:</b> basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on t <b>Column 2:</b> Give the channel of license. For example, W <b>Column 3:</b> Indicate in each educational station, by ente (for independent multicast), For the meaning of these te <b>Column 4:</b> Give the location	entify every television station (including m during the accounting period, <i>except</i> n effect on June 24, 1981, permitting t e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations of ules, regulations, or authorizations: e in space G—but do list it in space I (if a substitute basis. also in space I, if the station was carrie on concerning substitute basis stations n's call sign. <i>Do not</i> report origination p d with a station according to its over-th	t (1) stations carried only on a part- he carriage of certain network progr 51(e)(2) and (4))]; and (2) certain sta arried by your cable system on a su the Special Statement and Program ed both on a substitute basis and als , see page (v) of the general instruc- torogram services such as HBO, ES e-air designation. For example, rep evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep or "E-M" (for noncommercial educat uctions in the paper SA1-2 form. t the community to which the station	time basis under rams [sections ations carried on a ubstitute program Log)—if the so on some other ctions. PN, etc. Identify each bort multistream r the air in its community a noncommercial bendent), "I-M" cional multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KSNC	2. B CAST CHANNEL NUMBER	N	GREAT BEND, KS
	KLBY	4	N	WICHITA, KS
as Necessary	KBSH	7	N	HAYS, KS
us necessary	KSNK	8	N	McCOOK, NE
	KOOD	9	E	HAYS, KS
	KAKE	10	Ν	WICHITA, KS
	KSAS-DT2	17	N-M	WICHITA, KS
	KSCW	23		WICHITA, KS
	KSAS	24	Ν	WICHITA, KS
	KWCH-DT2	110	N-M	WICHITA, KS
	KAKE-DT2	180	N-M	WICHITA, KS
	KMTW-DT2	181	I-M	WICHITA, KS
	KWCH-DT4	182	N-M	WICHITA, KS
	KOOD-DT3	183	E-M	HAYS, KS
	KSCW-DT2	184	I-M	WICHITA, KS
	KSAS-DT3	185	N-M	WICHITA, KS
	KMTW-DT3	186	I-M	WICHITA, KS
		I		
	KMTW-DT4	187	I-M	WICHITA, KS
	KMTW-DT4 KOOD-DT2	187 189	I-M E-M	WICHITA, KS HAYS, KS
	KOOD-DT2	189	E-M	HAYS, KS
	KOOD-DT2 KSCW-DT4	189 190	E-M I-M	HAYS, KS WICHITA, KS
	KOOD-DT2 KSCW-DT4 KSNC-DT2.4	189 190 191	E-M I-M N-M	HAYS, KS WICHITA, KS GREAT BEND, KS

LEGAL NAME O NEX-TECH I								SYSTEM
	t every radio s	station ca	arried on a separate and discro nerally receivable by your cab					н
Teceivable if (1) on the basis of For detailed infi- paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: C	) it is carried b monitoring, to ormation abou rm. dentify the call State whether t f the radio stat this by placing Give the station	y the sys be rece it the Co sign of the static ion's sig g a chec n's locati	I-Band FM Carriage: Under C stem whenever it is received a ived at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	it the system's he system's FM ante this point, see pa sed by the cable s ne station is licent	eadend, and (2 enna, during o ge (v) of the g system as a se sed by the FC	2) it can certain st general i eparate	be expected, tated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
KKQY	FM		HILL CITY, KS					
KKQT KKDT	FM FM		BURDETT, KS					
						·		
		1						
						·		
						·		

Accounting Perio	od: 2024/1						FOR	VI SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	NEX-TECH LLC							24008
	SUBSTITUTE CARRIAGE	E: SPECIA		NT AND PROGRAM LO	G			
Substitute	<b>In General:</b> In space I, ident <i>substitute basis</i> during the a explanation of the programm	ify every no.	<i>nnetwork televi</i> eriod, under sp	<i>sion program,</i> broadcast by ecific present and former F	y a <i>distant</i> sta CC rules, regi	ulations, or	authorization	is. For a further
Substitute Carriage:		-			le general ins			
Special	1. SPECIAL STATEMEN					notwork to	lovision prog	rom
Statement and	During the accounting per	•	ul cable syster	il carry, on a substitute ba	1515, any noni			
Program Log	broadcast by a distant sta	luon?					YES	NO
	Note: If your answer is "No	o", leave the	e rest of this pa	ige blank. If your answer i	s "Yes," you r	must comp	plete the prog	jram
	log in block 2.							
	2. LOG OF SUBSTITUTE			ata lina. I laa ah hua siatian		aasibla ifu	the star as series .	- 1-
	In General: List each subs clear. If you need more spa		•		s wnerever p	ossidie, if	their meaning	g is
				vision program ("substitute	e program") t	hat, during	g the account	ing
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor	•						
	"NBA Basketball: 76ers vs.					example,	I LOVE LUCY	01
				er "Yes." Otherwise enter				
		•		asting the substitute prog the community to which th		censed by	the ECC or	in
	the case of Mexican or Car		,			•		
	Column 5: Give the mor	nth and day		stem carried the substitute		,	als, with the n	nonth
	first. Example: for May 7 giv		a aubatituta pr		r aabla avata	m list the	time of a court	-t-h/
	to the nearest five minutes.			ogram was carried by you ried by a system from 6:0:	•			atery
	stated as "6:00–6:30 p.m."				·	·		
				n was substituted for prog				
	to delete under FCC rules a was substituted for program							ogram
	effect on October 19, 1976	•	your system w			s and regu		
	S	UBSTITUT	E PROGRAM	1		N SUBST		7. REASON FOR
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH		TIMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то	
							_	
					· ·			
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	
Name	NEX-TECH LLC		2400
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Er all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transr (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	nission service amount, see <b>\$4</b> 3	3,162.93
	<b>IMPORTANT:</b> You must complete a statement in space P concerning gross receipts.	(Amount of gro	ss receipts)
L Copyright Royalty Fee	<ul> <li>COPYRIGHT ROYALTY FEE</li> <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 than or equal to \$</li> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.</li> </ul>	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for th accounting period is \$52.00	nis six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
			0100
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2		52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	1. Base amount under statutory formula         \$         263,800.00	-	
	2. Enter amount of gross receipts from space K	-	
	3. Subtract line 2 from line 1	-	
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527)	,600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and otal Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informati		ι <b>3</b> :

2024/1		FORMS	SA1-2E. PAGE 7
			SYSTEM ID# 24008
to its subscribers 1. Enter the tota system carried 2. Enter the tota on which the ca	s, and (2) the cable system's total number of activated cha I number of channels on which the cable television broadcast stations	nnels during the accounting period.	
		<b>)ED</b> (Identify an individual to whom	
Name	Scott Roe	Telephone 785-625-7070	
Address 	2418 Vine Street         (Number, street, rural route, apartment, or suite number)         Hays, KS 67601         (City, town, state, zip)         sroe@nex-tech.com	Fax (optional)	
<ul> <li>I, the undersigned (Owned)</li> <li>(Owned)</li> <li>(Agen in in</li></ul>	ed, hereby certify that (Check one, <i>but only one</i> , of the boxes er other than corporation or partnership) I am the owner of t of owner other than corporation or partnership) I am the line 1 of space B and that the owner is not a corporation or partner er or partner) I am an officer (if a corporation) or a partner ( line 1 of space B. d the statement of account and hereby declare under penalty e, and correct to the best of my knowledge, information, and	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 if a partnership) of the legal entity identified as owner of the cable system of law that all statements of fact contained herein	
	LEGAL NAME OF C NEX-TECH LLC CHANNELS Instructions: Yo to its subscribers 1. Enter the total system carried 2. Enter the total on which the ca and nonbroadd INDIVIDUAL TO we can contact a Name Address Email CERTIFICATION • I, the undersigned Interview (Owned (Owned) (Owned) (Owned) (Interview (Completed)	LEGAL NAME OF OWNER OF CABLE SYSTEM:         NEX-TECH LLC         CHANNELS         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         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         INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEED we can contact about this statement of account.)         Name       Scott Roe         Address       2418 Vine Street (Number, street, rural route, apartment, or suite number)         Hays, KS 67601       (City, town, state, zip)         Email       sroe@nex-tech.com         CERTIFICATION (This statement of account must be certified and signed in + 1, the undersigned, hereby certify that (Check one, but only one, of the boxes         (Owner other than corporation or partnership) I am the owner of         (Agent of owner other than corporation or partnership) I am the owner of in line 1 of space B and that the owner is not a corporation or partner (in line 1 of space B.         * I have examined the statement of account and hereby declare under penalty of	LEGAL NAME OF OWNER OF CABLE SYSTEM:         NEX-TECH LLC         CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subsorbers, 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 on which the cable system carried television broadcast stations.       24         2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast stations and nonbroadcast stations and nonbroadcast services.       333         INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)       Telephone 785-625-7070         Name       Scott Roe       Telephone 785-625-7070         Address       2418 Vine Street (Number, itset, rual route, perment, or subte number)       Hays, KS 57601         (Cay, num, subt, rual carr, rule)       Email       stree@nextech.com       Fex (optionat)         CERTIFICATION (This stalement of account must be certified and signed in accordance with Copyright Office regulations)

	X /s/ Rhonda S. Goddard
	Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)
Typed or printed	name: Rhonda S. Goddard
	Chief Financial Officer icial position held in corporation or partnership)
Date:	08/15/2024

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: 2024/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
C-TECH LLC	2400
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 Receipts Exclusion
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.	
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
YES. Enter the total here and list the satellite carrier(s) below	
Name     Name       Mailing Address     Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or 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 emount of late neument or underneument	Interest Assessme
Line 1 Enter the amount of late payment or underpayment	_
X	_
X	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
xdays	_
	_
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	-
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	
x	_
Line 3       Multiply line 2 by the number of days late and enter the sum here	
x	
x	
x	
x	
x	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x	

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.