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.

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

## SA1-2E Short Form

Return completed workbook by email to:

## coplicsoa@loc.gov

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

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		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)
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 Notic	ce: Section	n 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

8/14/2024

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.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name	NEX-TECH LLC	615
D	Instructions: List each separate community served by the cable system. A "comr "a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that ye as the "first community." Please use it as the first community on all future filings	nunity" is the same as a "community unit" as defined in FCC rul d communities within unincorporated areas and including sing ou list will serve as a form of system identification hereafter kno
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobilidentified city.	
Served		
	CITY OR TOWN	STATE
First	ALMENA	KS
Community	NORTON	KS
ld Rows as Necessary		
iu nows as necessary		

	LEGAL NAME OF OWNER OF C	ABI E SYSTEM						FORM SA1-	TEM I
Name	NEX-TECH LLC	ADLE STOTEM	•					010	615
Е	SECONDARY TRANSMISSION								
E	In General: The information in s	•		•		•			
Secondary	system, that is, the retransmissi about other services (including provide the services)								
Transmission	last day of the accounting period	• •			•			sting off the	
Service: Sub-	Number of Subscribers: Bot	•					•		
scribers and	down by categories of secondar	•				•			
Rates	each category by counting the n separately for the particular serv		-	•••		•	•	s charged	
	<b>Rate:</b> Give the standard rate of							rge and the	
	unit in which it is generally billed	· ·		,	•	ard rate variatio	ns within a	particular rate	
	category, but do not include disc					andan, tranam	ingion con	ice that apple	
	<b>Block 1:</b> In the left-hand block systems most commonly provide	•		0					
	that applies to your system. Not								
	categories, that person or entity					•			
	subscriber who pays extra for ca						nder "Serv	ice to the	
	first set" and would be counted of Block 2: If your cable system						e different	from those	
	printed in block 1 (for example, t	•		•					
	with the number of subscribers a					•			
	sufficient.				<u> </u>		BLOCK	( )	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RA
	Residential:		400			-		407	
	Service to first set		489	30.00	DELUX	E		407	96
	• Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC		NSMIS	SIONS: RATE	S				
F	In General: Space F calls for ra	te (not subscri	ber) inf	ormation with re	espect to a	all your cable sy	vstem's ser	vices that were	
Г	not covered in space E, that is,					•			
Services	service for a single fee. There a furnished at cost or (2) services		-		-				
Other Than	amount of the charge and the u								
Secondary	enter only the letters "PP" in the	rate column.				-		-	
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha			•					
Rates	listed in block 1 and for which a	• •			-	-	•		
	brief (two- or three-word) descrip	•	-						
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEG	DRY OF SERVICE	RA
	Continuing Services:			ation: Non-res			0,1120		
	• Pay cable	96.00	• Mc	otel, hotel			Sports	& Entertain.	13
	• Pay cable—add'l channel			mmercial			Cinema		11
	Fire protection		•Pa	y cable			НВО		17
	•Burglar protection		•Pa	y cable-add'l cł	nannel		Showti	me & TMC	10
	Installation: Residential		• Fir	e protection			Starz!	SuperPak	8
	• First set	99.00	• Bu	rglar protection			NFL Re	edZone	49
	<ul> <li>Additional set(s)</li> </ul>	130.00	Other	services:					
						00.00			
	• FM radio (if separate rate)		• Re	connect		20.00			
	• FM radio (if separate rate) • Converter			connect sconnect		20.00			
	, , , ,		• Dis			130.00			

	LEGAL NAME OF OWNER OF			SYSTEM ID
Name	NEX-TECH LLC	CADLE STSTEM.		6151
	PRIMARY TRANSMITTERS:	TELEVISION		
G	In General: In space G, ide carried by your cable system	entify every television station (including m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th	(1) stations carried only on a part	-time basis under
Primary		(2) and $(4)$ , or 76.63 (referring to 76.6	1(e)(2) and (4))]; and (2) certain st	ations carried on a
ransmitters: Television	Substitute Basis Stations basis under specific FCC re	s explained in the next paragraph. : With respect to any distant stations ca ules, regulations, or authorizations: e in space G—but do list it in space I (t a substitute basis.		
	basis. For further information <b>Column 1:</b> List each station	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	see page (v) of the general instru program services such as HBO, ES	ctions. SPN, etc. Identify each
	"WETA-2" as the same on <b>Column 2:</b> Give the channed of license. For example, W	el number the FCC assigned to the tele /RC is channel 4 in Washington, D.C.	vision station for broadcasting over	er the air in its community
	educational station, by enter (for independent multicast) For the meaning of these ter <b>Column 4:</b> Give the location	a case whether the station is a network a ering the letter "N" (for network), "N-M" ( , "E" (for noncommercial educational), o erms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of t	for network multicast), "I" (for indep or "E-M" (for noncommercial educa actions in the paper SA1-2 form. the community to which the statio	pendent), "I-M" tional multicast). n is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KSNC	2	N	GREAT BEND, KS
	KLNE	3	Е	LEXINGTON, NE
Rows as Necessary	KLBY	4	Ν	COLBY, KS
	KBSH	7	N	HAYS, KS
	KSNK	8	N	McCOOK, NE
	KOOD	9	E	HAYS, KS
	KAKE	10	N	WICHITA, KS
	KGIN	11	N	GRAND ISLAND, NE
	KHGI			·······
		13	<u>N</u>	KEARNEY, NE
	KSAS-DT2	13 17	N N-M	KEARNEY, NE WICHITA, KS
	KSAS-DT2 KSCW	13 17 23		
				WICHITA, KS
	KSCW	23	N-M I	WICHITA, KS WICHITA, KS
	KSCW KSAS	23 24	N-M I N	WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2	23 24 110	N-M I N N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2	23 24 110 180	N-M I N-M N-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2	23 24 110 180 181	N-M I N-M N-M I-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KWCH-DT4	23 24 110 180 181 182	N-M I N-M N-M I-M I-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS

KSAS-DT3	185	N-M	WICHITA, KS
KMTW-DT3	186	I-M	WICHITA, KS
KMTW-DT4	187	I-M	WICHITA, KS
KOOD-DT2	189	E-M	HAYS, KS
KSCW-DT4	190	I-M	WICHITA, KS
KSNC-DT2.4	191	N-M	GREAT BEND, KS
KMTW-DT1	193	I-M	WICHITA, KS
КWCH-DT3	194	N-M	WICHITA, KS
KSNC-DT2.2	195	N-M	GREAT BEND, KS

LEGAL NAME O		CABLE S	YSTEM:					SYSTEM I 615
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					Н
eceivable if (1) on the basis of or detailed info 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 l sign of the static ion's sig g a chec n's locati	I-Band FM Carriage: Under ( stem whenever it is received a ived at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. ion (the community to which the the community with which the	at the system's he system's FM ante this point, see pa sed by the cable s ne station is licen	eadend, and (2 enna, during o ge (v) of the g system as a se sed by the FC	2) it can eertain 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	
						0,0		
KQNK KKDT	FM FM		NORTON, KS BURDETT, KS					
		<b>-</b>						
						·=		
		<b>-</b>						
						·		

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							61519
	SUBSTITUTE CARRIAGE	E: SPECIA		NT AND PROGRAM LO	G			
Substitute	<b>In General:</b> In space I, ident substitute basis during the a explanation of the programm	ccounting p	eriod, under sp	ecific present and former F	CC rules, reg	ulations, or	authorization	is. For a further
Carriage:	1. SPECIAL STATEMEN	-			ie general me			
Special	During the accounting per				eis anv nonr	natwork tal	levision prog	ram
Statement and	broadcast by a distant sta	•		n ourry, on a substitute be	lolo, any nom			
Program Log	-						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	gram
	log in block 2.							
	2. LOG OF SUBSTITUTE In General: List each subs			ate line. Lise abbreviation	s wherever n	ossible if	their meaning	a ie
	clear. If you need more spa				s wherever p			y 15
				vision program ("substitute				
	period, was broadcast by a under certain FCC rules, re			5		<u> </u>	0	
	Do not use general categor	•						
	"NBA Basketball: 76ers vs.	Bulls."				• •	,	
				er "Yes." Otherwise enter asting the substitute prog				
		•		the community to which th		censed by	the FCC or,	in
	the case of Mexican or Car	nadian stati	ons, if any, the	community with which the	e station is id	entified).		
	<b>Column 5:</b> Give the mor first. Example: for May 7 gives the first of		when your sy	stem carried the substitute	e program. U	se numera	als, with the n	nonth
			e substitute pr	ogram was carried by you	r cable syste	m. List the	times accura	ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:0	1:15 p.m. to 6	6:28:30 p.n	n. should be	-
	stated as "6:00–6:30 p.m."	er "R" if the	listed program	n was substituted for prog	ramming that	t vour evet	em was <i>rea</i> u	uired
	to delete under FCC rules a							
	was substituted for program	nming that						
	effect on October 19, 1976							
	S	UBSTITUT	E PROGRAM	1		N SUBST	CURRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. FROM	TIMES — TO	DELETION
					·			
							_	
					·			
							_	
							_	
							_	
							_	
							_	
							_	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	
Name	NEX-TECH LLC		6151
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (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.	mission service amount, see \$ 82	2,022.57
	<b>IMPORTANT:</b> You must complete a statement in space P concerning gross receipts.	(Amount of gro	oss receipts)
L Copyright Royalty Fee	<ul> <li>COPYRIGHT ROYALTY FEE 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 \$ 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 t 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,	100)	
	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
		<u>.</u>	
	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 informat		ts!

EX-TECH LLC HANNELS Instructions: You its subscribers, a . Enter the total nu system carried te . Enter the total nu on which the cabl and nonbroadcas IDIVIDUAL TO B e can contact abo	NER OF CABLE SYSTEM: must give (1) the number of channels on which the ca nd (2) the cable system's total number of activated c umber of channels on which the cable evision broadcast stations	channels during the accounting period.	SYSTEM ID# 61519 27 335
estructions: You bits subscribers, a content the total nu system carried tel con which the cabl and nonbroadcas IDIVIDUAL TO B e can contact abo	nd (2) the cable system's total number of activated c umber of channels on which the cable evision broadcast stations	channels during the accounting period.	
e can contact abo	out this statement of account.)	EDED (Identify an individual to whom	
Name	Soott Doo		
	Scott Roe	Telephone 785-6	625-7070
(	2418 Vine Street         Number, street, rural route, apartment, or suite number)         Hays, KS 67601         City, town, state, zip)         sroe@nex-tech.com	Fax (optional)	
, the undersigned, (Owner of (Agent of in line) X (Officer in line) have examined th	hereby certify that (Check one, <i>but only one</i> , of the box other than corporation or partnership) I am the owner f owner other than corporation or partnership) I am 1 of space B and that the owner is not a corporation or or partner) I am an officer (if a corporation) or a partne 1 of space B. e statement of account and hereby declare under penal	kes.) r of the cable system as identified in line 1 of space B; or the duly authorized agent of the owner of the cable system a partnership; or er (if a partnership) of the legal entity identified as owner of the lty of law that all statements of fact contained herein	
RT , th X	IFICATION (The undersigned, (Owner of (Agent of in line (Officer in line ve examined the rue, complete, a	<ul> <li>IFICATION (This statement of account must be certified and signed e undersigned, hereby certify that (Check one, <i>but only one</i>, of the box</li> <li>(Owner other than corporation or partnership)   am the owner</li> <li>(Agent of owner other than corporation or partnership)   am the owner</li> <li>in line 1 of space B and that the owner is not a corporation or a partner in line 1 of space B.</li> <li>ve examined the statement of account and hereby declare under penal</li> </ul>	<ul> <li>IFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)</li> <li>e undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space 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 in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>(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 in line 1 of space B.</li> <li>ve examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein ue, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.</li> </ul>

	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
(-TECH LLC	615 <sup>-</sup>
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 Exclusior
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?	
X       NO         YES. Enter the total here and list the satellite carrier(s) below.       \$	
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
	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.         Line 1       Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme

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.