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

STATEME	NT	OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	by email to:
		ansmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov
Cable Systems (Short Form) General instructions are located in the first tab of this workbook			08/22/2018	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCO	DUNTING PERIOD COVERED E	BY THIS STATEMENT: (Y	YYY/(Period))	
		2018/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		20181	Barcode Data Filing Period (optiona	I - see instructions)	
Accounting Period					
В		Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent co		idiary of another corporation, give the full co	rporate title
Owner		List any other name or names under which	n the owner conducts the business of t	he cable system.	
		If there were different owners during the a single statement of account and royalty fee		the last day of the accounting period should s ting period.	submit a
		Check here if this is the system's first filing	;. If not, enter the system's ID number	assigned by the Licensing Division.	24008
		LEGAL NAME OF OWNER/MAILING	GADDRESS OF CABLE SYSTEM		
		NEX-TECH LLC			
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
		(Number, street, rural route, apartment, or suite nu	umber)		
		LENORA, KS 67645 (City, town, state, zip)			
С				ntify the business and operation of the e system, if different from the address	
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		MAILING ADDRESS OF CABLE SYSTEM	:		
	2	(Number, street, rural route, apartment, or suite nu	umber)		
		(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
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
	NEX-TECH LLC	240
	Instructions: List each separate community served by the cable system. A "commu	nity" is the same as a "community unit" as defined in FCC rul
D	"a separate and distinct community or municipal entity (including unincorporated of 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.	communities within unincorporated areas and including singl list will serve as a form of system identification hereafter kn
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile identified city.	home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	GRAINFIELD	KS
Community	COLLYER	KS
	GOVE	KS
ld Rows as Necessary	PARK	KS
	QUINTER	KS

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					FORM SA1-	
Name	NEX-TECH LLC								240
E Secondary Transmission	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period	pace E should on of television bay cable) in sp I (June 30 or D	l cover a and rac bace F, r becembe	Il categories of lio broadcasts b not here. All the er 31, as the cas	secondar y your sy facts you e may be	vstem to subscri u state must be e).	ibers. Give those exis	information ting on the	
Service: Sub- scribers and Rates	Number of Subscribers: Both down by categories of secondary each category by counting the n separately for the particular serv Rate: Give the standard rate of unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block systems most commonly provide	y transmission umber of billin ice at the rate harged for eac (Example: "\$ iounts allowed in space E, th to their subsc	service. gs in tha indicate ch catego 20/mth") for adva ie form li cribers. (In general, you t category (the i d—not the numi ory of service. Ir . Summarize ar ince payment. sts the categori Give the number	can con number of ber of se nclude bo ny standa es of sec r of subso	npute the number of persons or orgets receiving sen- oth the amount of and rate variation condary transmis- cribers and rate	er of subsc ganizations vice). of the char as within a ssion servi for each li	ribers in s charged ge and the particular rate ce that cable sted category	
	that applies to your system. Not categories, that person or entity subscriber who pays extra for ca first set" and would be counted or Block 2: If your cable system printed in block 1 (for example, t with the number of subscribers a sufficient.	should be cou ble service to once again und has rate categ iers of service and rates, in th	nted as addition der "Serv ories for s that ind	a subscriber in e al sets would be rice to additiona secondary tran clude one or mo	each app includeo l set(s)." smission re secon	licable category d in the count un service that are dary transmission	y. Example nder "Servi e different t ons), list th tion of the	: a residential ice to the from those nem, together service is	
	BLC	DCK 1 NO. OF	. 1				BLOCK	K 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATI	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT
	Residential: • Service to first set		449	24.95	PREMI	ERE		351	48.
	Service to additional set(s) FM radio (if separate rate) Motel, hotel								
	Commercial Converter • Residential								
	Non-residential								
F Services Other Than Secondary ransmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rai not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	te (not subscri hose services re two exceptio or facilities fur hit in which it is rate column. te charged by sour cable sy separate charge	ber) info that are ons: you nished to susually the cable stem fur ge was n de the ra	rmation with res not offered in c do not need to p nonsubscriber billed. If any rat e system for eac nished or offere nade or establis	pect to a ombination give rate s. Rate in es are ch ch of the d during	on with any secon information com- nformation shout narged on a varia applicable servithe accounting	ondary tran icerning (1 ild include iable per-p ces listed. period that	nsmission) services both the rogram basis, t were not	
	CATEGORY OF SERVICE	RATE		ORY OF SERV	ICE	RATE	CATEG	ORY OF SERVICE	RAT
	Continuing Services:	_		tion: Non-resid		_			
	 Pay cable Pay cable—add'l channel 	72.95		el, hotel nmercial			Sports Cinema	& Entertain. ax	13. 11.
	Fire protection			cable			НВО		17.
	•Burglar protection Installation: Residential		· ·	cable-add'l cha	annel		Showti Starz!	me & TMC Encore	14. 12.
	First set	99.00		glar protection					
	 Additional set(s) 			ervices:					
	• FM radio (if separate rate)		• Rec	onnect		110.00			
	Converter			connect					
			I 0	let relocation		110.00			

unting Period: 2	2018/1			FORM SA1-2E. PA
Name	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTEM
	NEX-TECH LLC			24
	PRIMARY TRANSMITTERS:			
G Primary	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(d	entify every television station (including em during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6	t (1) stations carried only on a part he carriage of certain network prog	-time basis under rams [sections
ansmitters: Felevision	Substitute Basis Stations basis under specific FCC ru	as explained in the next paragraph. S: With respect to any distant stations ca ules, regulations, or authorizations: arig appage C, but de list it is appage 1 (f)		
	station was carried <i>only</i> on • List the station here, and	re in space G—but do list it in space I (t n a substitute basis. also in space I, if the station was carrie on concerning substitute basis stations,	d both on a substitute basis and al	so on some other
	Column 1: List each station multicast stream associated "WETA-2" as the same on Column 2: Give the chann	m's call sign. <i>Do not</i> report origination p d with a station according to its over-the the form. lel number the FCC assigned to the tele	program services such as HBO, ES e-air designation. For example, rep	SPN, etc. Identify each port multistream
	Column 3: Indicate in each educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location	VRC is channel 4 in Washington, D.C. h case whether the station is a network ering the letter "N" (for network), "N-M" (, "E" (for noncommercial educational), c erms, see page (iv) of the general instru- on of each station. For U.S. stations, list adian stations, if any, give the name of t	(for network multicast), "I" (for inde or "E-M" (for noncommercial educa uctions in the paper SA1-2 form. t the community to which the station	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
	KLBY	4	Ν	WICHITA, KS
Rows as Necessary	KBSH	7	Ν	HAYS, KS
	KSNK	8	N	McCOOK, NE
	KOOD	9	E	HAYS, KS
	KAKE	10	Ν	WICHITA, KS
		17		
	KMTW	17		WICHITA, KS
	KSCW	23		WICHITA, KS WICHITA, KS
			I N	
	KSCW	23	I N N-M	WICHITA, KS WICHITA, KS
	KSCW KSAS	23 24		WICHITA, KS
	KSCW KSAS KWCH-DT2	23 24 110	N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2	23 24 110 180 181	N-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2	23 24 110 180 181 182	N-M N-M I-M I-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3	23 24 110 180 181	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 KSCW-DT3 KOOD-DT4	23 24 110 180 181 182 183	N-M N-M I-M I-M E-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3	23 24 110 180 181 182 183 183 184 185	N-M N-M I-M I-M E-M I-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3	23 24 110 180 181 182 183 183 184 185 186	N-M N-M I-M I-M E-M I-M N-M I-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3 KSAS-DT2	23 24 110 180 181 182 183 183 184 185 186 186 187	N-M N-M I-M I-M E-M I-M N-M I-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3	23 24 110 180 181 182 183 183 184 185 186	N-M N-M I-M I-M E-M I-M N-M I-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3 KSAS-DT2	23 24 110 180 181 182 183 183 184 185 186 186 187	N-M N-M I-M I-M E-M I-M N-M I-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS WICHITA, KS WICHITA, KS
	KSCW KSAS KWCH-DT2 KAKE-DT2 KMTW-DT2 KSCW-DT3 KOOD-DT4 KSCW-DT2 KSAS-DT3 KMTW-DT3 KSAS-DT2	23 24 110 180 181 182 183 183 184 185 186 186 187	N-M N-M I-M I-M E-M I-M N-M I-M N-M	WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS WICHITA, KS WICHITA, KS

NEX-TECH	F OWNER OF (CABLE 5	ISTEM:					SYSTEM 240
	t every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of For detailed inf paper SA1-2 fo Column 1: I Column 2: S Column 3: I signal, indicate Column 4: C) it is carried by monitoring, to ormation abou rm. dentify the call State whether t f the radio stat this by placing Give the statior	y the sys be recein to the Co sign of the static ion's sig g a chech n's locati	II-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	t the system's he system's FM ante this point, see pa ed by the cable s he station is licen	eadend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st eneral i eparate	be expected, rated intervals. Instructions in the.	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				5.0		
KQY	FM		HILL CITY, KS					
KRSL KKDT	FM FM		RUSSELL, KS BURDETT, KS					
<u>KDI</u>			BURDETT, KS					
	+							
	+							
	+							
						·		

Accounting Perio	od: 2018/1						FOR	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	NEX-TECH LLC							24008
	SUBSTITUTE CARRIAG							
I I					-			
	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN						•••	
Special	 During the accounting per 				isis. anv noni	network tel	evision proa	ram
Statement and Program Log	broadcast by a distant sta	-	· · · · · , · · ·	,,,,,,	,-,		YES	× NO
Frogram Log	-						-	
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you i	must comp	lete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI In General: List each subs			ato lino. Lleo abbroviation	e whorovor p	occiblo if t	hoir moonin	a ic
	clear. If you need more spa				s wherever p			y is
				vision program ("substitute	e program") t	hat, during	the account	ting
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.			Cuban. List specific progra		champic, i	LOVE LUCY	01
				er "Yes." Otherwise enter				
				casting the substitute prog the community to which th				:-
	the case of Mexican or Car						the FCC or,	1(1
				stem carried the substitute			ls, with the r	nonth
	first. Example: for May 7 gi							
	Column 6: State the tim to the nearest five minutes.			rogram was carried by you				ately
	stated as "6:00–6:30 p.m."		a program car	ned by a system norm 0.0	1. 15 p.m. to t	0.20.30 p.m		
	Column 7: Enter the lett			n was substituted for prog				
	to delete under FCC rules							ogram
	was substituted for programe ffect on October 19, 1976		your system w	as permitted to delete und	ter FCC rules	s and regula	ations in	
		•			1 1			1
						N SUBST		
	S		E PROGRAM			AGE OCC		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	 STATION'S CALL SIGN 	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES — TO	
							-	
							=	
							<u> </u>	
							_	
								"
							<u> </u>	
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Accounting Period:	2018/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: NEX-TECH LLC	S	YSTEM ID# 24008
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ission service amount, see	6,302.48 sss receipts)
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 or equal to \$2 Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 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.	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	this six-mon	
	accounting period is \$52.00 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 than \$137,1	_ •	
	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 \$ 263,800.00		
	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		
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	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 to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		hts!

Accounting Period:	2018/1				FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF C	WNER OF CABLE SYSTEM:			SYSTEM ID# 24008
M Channels	to its subscribers 1. Enter the total	and (2) the cable system's total n	nnels on which the cable system carried television br umber of activated channels during the accounting p cable	period.	19
	on which the ca	number of activated channels ble system carried television broad st services			344
N Individual to Be Contacted	we can contact a	pout this statement of account.)	FORMATION IS NEEDED (Identify an individual to		
for Further Information	Name Address	Scott Roe 2418 Vine Street (Number, street, rural route, apartment, c	or suite number)	Telephone 785-6	25-7070
		Hays, KS 67601 (City, town, state, zip)			
	Email	sroe@nex-tech.com	Fax (op	tional)	
O Certification	I, the undersigned (Owne (Agenti in I X (Offici in I . I have examined	d, hereby certify that (Check one, <i>bu</i> other than corporation or partner of owner other than corporation and 1 of space B and that the owner or or partner) I am an officer (if a cond the statement of account and hereb and correct to the best of my known n 1001(1986)] Correct or Description or Descri	e certified and signed in accordance with Copyright C at only one, of the boxes.) ership) I am the owner of the cable system as identified or partnership) I am the duly authorized agent of the is not a corporation or partnership; or orporation) or a partner (if a partnership) of the legal er by declare under penalty of law that all statements of fa- vledge, information, and belief, and are made in good to vledge, information, and belief, and are made in good to x /s/ Rhonda S. Goddard r an electronic signature on the line above to certify this r signature using an "/s/ signature" (e.g., /s/ John Smith)	d in line 1 of space B; or owner of the cable system a ntity identified as owner of th act contained herein faith.	
			ief Financial Officer		
		Date:	08/2	20/2018	

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.

ounting Period: 2018/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
X-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 following 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 subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." 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	P Special Statement Concerning Gross Receipts Exclusion
	_
Name Name Mailing Address Mailing Address	
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. Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
	Interest Assessmen
	Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
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