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

STATEMENT OF ACCOUNT	FOR COPYRIGHT	OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	- <u>coplicsoa@loc.gov</u>
General instructions are located in the first tab of this workbook	08/23/2018	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Δ			

A	ACCO	COUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2018/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		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.	24191
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		RB3, LLC BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		Reach Broadband	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		PO Box 370 (Number, street, rural route, apartment, or suite number)	
		(Number, street, rural route, apartment, or suite number) Schleswig, IA 51461 (City, town, state, zip)	
С	INSTR	<b>FRUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system uses already appear in space B. In line 2, give the mailing address of the system, if different from the address given in	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID# 24101
D	"a separate and distinct community or municipal entity (including uninco	24191 A "community" is the same as a "community unit" as defined in FCC rules: rporated communities within unincorporated areas and including single, y that you list will serve as a form of system identification hereafter known re filings
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, identified city.	
	CITY OR TOWN	STATE
First Community	WEST ODESSA	TX
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						FORM SA1	
Name	RB3, LLC								2419
E Secondary Transmission	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmissic about other services (including p last day of the accounting period	pace E should on of television ay cable) in sp	cover al and rad ace F, n	Il categories of s io broadcasts b ot here. All the	secondar by your sy facts you	stem to subscri state must be	bers. Give	information	
Service: Sub- scribers and Rates	Number of Subscribers: Both down by categories of secondary each category by counting the m separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block systems most commonly provide that applies to your system. Note categories, that person or entity subscriber who pays extra for ca first set" and would be counted of Block 2: If your cable system	y transmission : umber of billing ice at the rate i harged for eacl . (Example: "\$2 ounts allowed f in space E, the to their subscr where an inc should be cour ble service to a once again under	service. s in that ndicated h catego (0/mth"). for adva e form lis ribers. G dividual hted as a additiona er "Serv	In general, you t category (the i d—not the num ory of service. In . Summarize ar nce payment. sts the categori Give the number or organization a subscriber in o al sets would be ice to additiona	a can com number o ber of set nclude bo ny standar es of seco r of subsc is receivi each appl e included I set(s)."	pute the number f persons or org s receiving sent th the amount of rate variation ondary transmis ribers and rate ing service that icable category in the count un	er of subsc ganizations vice). of the charg is within a p ssion servic for each lis falls under v. Example: nder "Servic	ribers in charged ge and the particular rate ex that cable sted category different a residential ce to the	
	printed in block 1 (for example, ti with the number of subscribers a sufficient.	ind rates, in the					ion of the s	service is	
	BLC	OCK 1 NO. OF					BLOCI	K 2 NO. OF	1
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential: • Service to first set		271	27.20					
	Service to additional set(s)								
	• FM radio (if separate rate)		_						
	Motel, hotel		7	27.20					
	Commercial								
	Converter     Residential								
	Non-residential								
F Services Other Than Secondary ransmissions: Rates	SERVICES OTHER THAN SEC: In General: Space F calls for rat 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 un 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) description	e (not subscrib hose services t e two exception or facilities furm it in which it is rate column. e charged by th your cable sys separate charg	er) infor hat are ns: you ished to usually ne cable stem fun e was m	mation with res not offered in c do not need to o nonsubscriber billed. If any rat e system for eac nished or offeren nade or establis	pect to al ombinatio give rate i s. Rate in tes are ch ch of the a d during f	n with any secon nformation con formation shou arged on a vari applicable servi he accounting	ondary tran cerning (1) Id include I able per-pr ces listed. period that	smission services both the rogram basis, were not	
		BLOO						BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE		ORY OF SER		RATE	CATEG	ORY OF SERVICE	RAT
	Pay cable	13.70		el, hotel	uentiai				
	Pay cable—add'l channel			nmercial					
	Fire protection		• Pay	cable					
	<ul> <li>Burglar protection</li> </ul>		• Pay	v cable-add'l cha	annel				
	Installation: Residential			e protection					
	• First set	49.95		glar protection					
	<ul> <li>Additional set(s)</li> </ul>			services:					
	FM radio (if separate rate)     Converter			connect		29.95			
	<ul><li>FM radio (if separate rate)</li><li>Converter</li></ul>		• Disc	connect connect let relocation		29.95			

ame	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM IE 2419
	PRIMARY TRANSMITTERS:			
Anary nitters: vision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a <b>Substitute Basis Stations</b> basis under specific FCC r • Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further informatic <b>Column 1:</b> List each statio multicast stream associate "WETA-2" as the same on <b>Column 2:</b> Give the chann of license. For example, W <b>Column 3:</b> Indicate in each educational station, by ente (for independent multicast) For the meaning of these to <b>Column 4:</b> Give the location	also in space I, if the station was carried on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination p d with a station according to its over-the-	(1) stations carried only on a part-tile carriage of certain network progra 1(e)(2) and (4))]; and (2) certain stat rried by your cable system on a sub the Special Statement and Program I d both on a substitute basis and also see page (v) of the general instructi rogram services such as HBO, ESF -air designation. For example, repo- vision station for broadcasting over station, an independent station, or a for network multicast), "I" (for indepen- r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station	ime basis under ams [sections tions carried on a postitute program Log)—if the p on some other ions. PN, etc. Identify each ort multistream the air in its community n noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
			VI.I.I V. V	
	KWID	26	Ν	
		26 42	<u>N</u>	MIDLAND, TX
recary	KMLM	42	l	MIDLAND, TX ODESSA, TX
ssary	KMLM KOSA	42 7	I N	MIDLAND, TX ODESSA, TX ODESSA, TX
sary	KMLM KOSA KPBT	42 7 38	I N E	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX
ssary	KMLM KOSA	42 7 38 23	I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX
sary	KMLM KOSA KPBT KPEJ KUPB	42 7 38 23 18	I N E N I	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX
sary	KMLM KOSA KPBT KPEJ KUPB KWES	42 7 38 23 18 9	I N E N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX
ssary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
ssary	KMLM KOSA KPBT KPEJ KUPB KWES	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX
cessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
cessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
cessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
cessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
ecessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
ecessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
ecessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
lecessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
Necessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
Necessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
Necessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX
s Necessary	KMLM KOSA KPBT KPEJ KUPB KWES KWWT	42 7 38 23 18 9 30	I N E N I N	MIDLAND, TX ODESSA, TX ODESSA, TX MIDLAND, TX ODESSA, TX ODESSA, TX ODESSA, TX ODESSA, TX

Accounting P	Period: 2018	/1					FORM	/I SA1-2E. PAGE 4
LEGAL NAME OF <b>RB3, LLC</b>	OWNER OF C	CABLE SI	/STEM:					SYSTEM ID 2419
								2419
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					н
receivable if (1) on the basis of For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If signal, indicate Column 4: G	it is carried b monitoring, to prmation about rm. dentify the call tate whether f the radio stat this by placing Sive the station	y the sys be recein the Co sign of the the static ion's sig g a chech n's locati	I-Band FM Carriage: Under C tem whenever it is received a ved 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 ne station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st general i eparate	be expected, ated 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	
-								

Accounting Perio	od: 2018/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	RB3, LLC							24191
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LO	G			
I I	In General: In space I, identi				-	ion that you	r cahle syste	m carried on a
-	substitute basis during the a							
Substitute	explanation of the programm	ing that mus	t be included in	this log, see page (v) of the	e general instr	uctions in th	e paper SA1	-2 form.
Carriage:	1. SPECIAL STATEMEN		NING SUBST	TITUTE CARRIAGE				
Special	• During the accounting per	iod, did you	r cable system	carry, on a substitute bas	s, any nonne	twork televis	<u>sion</u> program	1
Statement and Program Log	broadcast by a distant sta	tion?					YES	XNO
Frogram Log	Note: If your answer is "No	' loovo tho	root of this pag	o block If your answer in	"Voo " vou mi	ust complete	-	
	-	, leave the	rest of this pag	e blank. Il your answer is	res, you mu	ist complete	e the program	п
	log in block 2. 2. LOG OF SUBSTITUTE		MS					
	In General: List each subst			te line. Use abbreviations	wherever pos	sible if thei	r meaning is	
	clear. If you need more spa					0.0.0,0		
				sion program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor	ies like "mo	vies" or "baske	tball " List specific program	n titles for exa	ample "II o	ve Lucv" or	1.
	"NBA Basketball: 76ers vs.					p.o, . <u>-</u> o		
				"Yes." Otherwise enter "N				
				sting the substitute progra e community to which the		nead by the	ECC or in	
	the case of Mexican or Can							
	Column 5: Give the mor	th and day		tem carried the substitute			with the mor	nth
	first. Example: for May 7 giv							
				gram was carried by your				ly
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example. a	i program came	eu by a system nom 0.01.	15 p.m. to 0.2	o.ou p.m. si		
		er "R" if the	listed program	was substituted for progra	imming that y	our system	was require	d
	to delete under FCC rules a							am
	was substituted for program effect on October 19, 1976.		our system wa	s permitted to delete unde	r FCC rules a	nd regulatio	ons in	
						N SUBSTI		
	S	UBSTITUT	E PROGRAM			AGE OCC		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. T FROM	IMES — TO	DELETION
							<u> </u>	
							_	
							_	
							_	
							_	
							_	
							_	
1								
					·		_	

Accounting Period:	2018/1	FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RB3, LLC	S	¥STEM ID# 24191
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. E 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.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	mission servio s amount, see	7,326.24
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 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 accounting period is \$52.00	this 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
	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	7,600)	
	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			
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		ghts!

Accounting Period:	2018/1		FORM SA1-2E. PAGE 7
Name	LEGAL NAME O RB3, LLC	F OWNER OF CABLE SYSTEM:	SYSTEM ID# 24191
M Channels	to its subscrib 1. Enter the to system carri 2. Enter the to on which the	You must give (1) the number of channels on which the cable system carried television broadcast stations eres, and (2) the cable system's total number of activated channels during the accounting period.	9 51
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom ct about this statement of account.)	
for Further Information	Name	Jeffery Lowe Telephone 303-9	44-9455
	Address	PO Box 370 (Number, street, rural route, apartment, or suite number) Schleswig, IA 51461-1014	
	Email	(City, town, state, zip)	
O Certification	I, the undersigned of the u	(This statement of account must be certified and signed in accordance with Copyright Office regulations) gned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) <b>Inter other than corporation or partnership)</b> I am the owner of the cable system as identified in line 1 of space B; or <b>ent of owner other than corporation or partnership)</b> I am the duly authorized agent of the owner of the cable system as in line 1 of space B and that the owner is not a corporation or partnership; or <b>fficer or partner)</b> 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. <b>ned the statement of account and hereby declare under penalty of law that all statements of fact contained herein lete, and correct to the best of my knowledge, information, and belief, and are made in good faith. <b>Corporation 1001(1986) X</b> /s/ Jeffery Lowe Enter an electronic signature on the line above to certify this statement.</b>	
		Enter signature using an "/s/ signature" (e.g., /s/ John Smith)         Typed or printed name:       Jeffery Lowe         Title:       VP - Controller         (Title of official position held in corporation or partnership)       O8/23/2018	

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 the 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 telephon 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 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 t 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 lay

unting Period: 2018/1	FORM SA1-2E. PAGI
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
B, LLC	241
<ul> <li>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."     </li> <li>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.</li> <li>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?</li> <li>NO</li> </ul>	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name     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.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
x	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2       Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm

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 th 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.