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	ENT (	OF ACCOUNT	FOR COPYRIGH	IT OFFICE USE ONLY	by email to:
		nsmissions by	DATE RECEIVED	AMOUNT	
Cable System General instruct in the first tab of	ctions a	are located	08/15/2018	\$ ALLOCATION NUMBER	coplicsoa@loc.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCO	UNTING PERIOD COVERED E	BY THIS STATEMENT: (Y)	/YY/(Period))	
		2018/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
Accounting Period			Barcode Data Filing Period (optional	- see instructions)	
В		Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent co	-	diary of another corporation, give the full cor	rporate title
Owner			accounting period, only the owner on t	he last day of the accounting period should s	ubmit a
		single statement of account and royalty fe Check here if this is the system's first filing			63378
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
		Ralls Technologies LLC			
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT	)	
		MAILING ADDRESS OF OWNER OF PO BOX 184 (Number, street, rural route, apartment, or suite nu			
		New London, MO 63459 (City, town, state, zip)			
	INSTR		ess or trade names used to ider	tify the business and operation of the	e system unless these
С	names	already appear in space B. In line 2		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 ni	mber)		
		(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.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name		
	Ralls Technologies LLC	633
D	Instructions: List each separate community served by the cable system. A "commu "a separate and distinct community or municipal entity (including unincorporated 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
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile	e home parks should be reported in parentheses below the
Area Served	identified city.	
	CITY OR TOWN	STATE
First	City of New London	MO
Community	Village Of Rennsselar	MO
	Unincorporated Ralls Co	MO
ld Rows as Necessary	Unincorporated SE Marion Co	MO
	Unincorporated NW Pike Co	MO
	Unincorporated E Monroe Co	MO
	Unincorporated NE Audrain Co	MO
	Hannibal	MO
	Vandalia	МО
		•

									-2E. PAGE
Name	LEGAL NAME OF OWNER OF C							515	6337
	Ralls Technologies LL								000
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCR	IBERS AND R	ATES				
E	In General: The information in s								
Secondary	system, that is, the retransmission about other services (including particular services)								
Transmission	last day of the accounting period								
Service: Sub-	Number of Subscribers: Both						ble system	ı, broken	
scribers and	down by categories of secondar	•				•			
Rates	each category by counting the n		0	•••		•		s charged	
	separately for the particular serv Rate: Give the standard rate of							be and the	
	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. Not							0,	
	categories, that person or entity			•		-			
	subscriber who pays extra for ca								
	first set" and would be counted of	0			( )				
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, t with the number of subscribers a					-			
	sufficient.		e ngint i						
	BLC	DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATI	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:								
	<ul> <li>Service to first set</li> </ul>			\$25					
	<ul> <li>Service to additional set(s)</li> </ul>								
	<ul> <li>FM radio (if separate rate)</li> </ul>								
	Motel, hotel								
	Commercial								
	Converter								
	Residential			\$3-\$5					
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TR			s				
-	In General: Space F calls for rational	-			-	Il your cable sy	stem's serv	vices that were	
F	not covered in space E, that is, t								
Services	service for a single fee. There are	•			0			•	
Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		ucuuny			a gou on a ra		regram zacie,	
Fransmissions:	Block 1: Give the standard rat			•		• •			
Rates	Block 2: List any services that listed in block 1 and for which a	• •			-	-	-		
	brief (two- or three-word) descrip	• •	-		SHEU. LISU	these other ser			
		DI O						BLOCK 2	
	CATEGORY OF SERVICE	BLO RATE	1	GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services:			ation: Non-res			0/11201		
	• Pay cable	\$7-\$17	• Mo	tel, hotel			Expand	ded Basic	\$(
	Pay cable—add'l channel		• Cor	mmercial			Digital		\$7
	Fire protection		•Pay	/ cable			Sports		, ,
	•Burglar protection		· ·	, cable-add'l ch	annel		Sports		Ş
	Installation: Residential		· ·	e protection			Variety		Ş
	• First set	\$100	• Bur	glar protection			Outdoo		Ş
	<ul> <li>Additional set(s)</li> </ul>	\$30	Other s	services:			PPV(Ev	ent Only per R	\$4-0
	• FM radio (if separate rate)		• Red	connect				erical Exp Basi	\$1(
	• Converter			connect					
				tlet relocation					
			• Mo	ve to new addr	ess				

counting Period:	2018/1			FORM SA1-2E. PAGE 3
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
Humo	Ralls Technologies L	LC		63378
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(c substitute program basis, a <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 informatic <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on the <b>Column 2:</b> Give the channel of license. For example, W <b>Column 3:</b> Indicate in each educational station, by enter (for independent multicast), For the meaning of these to <b>Column 4:</b> Give the location	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-the	t (1) stations carried only on a part-tin he carriage of certain network program a(e)(2) and (4))]; and (2) certain stati arried by your cable system on a sub- he Special Statement and Program L d both on a substitute basis and also see page (v) of the general instruction orogram services such as HBO, ESPI e-air designation. For example, report evision station for broadcasting over the station, an independent station, or a (for network multicast), "I" (for indepe or "E-M" (for noncommercial education actions in the paper SA1-2 form.	me basis under ms [sections ons carried on a stitute program og)—if the on some other ons. N, etc. Identify each t multistream he air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KHQA	7	N	
	WGEM	10	N	
ws as Necessary	WTJR	32		
	WQEC	34	E	
	KHQA-2	7.2	N-M	
	COMET	7.3	N-M	
	WGEM-2	10.2	I-M	
	WGEM-3	10.3	N-M	QUINCY, IL
	WQEC-2	34.2	E-M	QUINCY, IL
	WQEC-3	34.3	E-M	QUINCY, IL

EGAL NAME OF			ISTEW.				1	SYSTEM 633
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf isignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether to the radio stat this by placing vive the station	y the sys be recein at the Co sign of e the static ion's sign g a chech n's location	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 his point, see par ed by the cable s e station is licens	adend, and (2 enna, during co ge (v) of the g system as a se sed by the FC	) it can ertain st eneral ii 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	
OALL SIGN		3/0	LOCATION OF STATION	UALL SIGN		3/0	LOCATION OF STATION	
							·	

Accounting Perio							FOR	M SA1-2E. PAGE 5.
N	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	Ralls Technologies L	LC						63378
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LC	G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	ify every no	nnetwork telev	<i>ision program,</i> broadcast by becific present and former F	y a <i>distant</i> sta CC rules, reg	ulations, or	authorizatio	ns. For a further
Carriage:	1. SPECIAL STATEMEN				<b>J</b>		<u> </u>	-
Special	During the accounting per				isis, anv noni	network tel	evision proa	ram
Statement and	broadcast by a distant sta	-						XNO
Program Log	-						YES	
	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 proo	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI In General: List each subs			ate line. Lise abbreviation	e whorovor n	ossible ift	hoir moonin	a is
	clear. If you need more spa				s wherever p			y 13
				vision program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.					onumpro, i	2010 2009	
				er "Yes." Otherwise enter				
				casting 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			ls, with the r	nonth
	first. Example: for May 7 gi		o oubotituto pr	carom was corriad by you	r achla avata	m list the	timoo ooour	atoly
	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 oyotoin n			o una rogun		
	s	UBSTITUT	E PROGRAM	1		N SUBSTI		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	1	TIMES	DELETION
	1. TITLE OF FROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то	
							_	
							_	
							_	"
								"
								"
							<u> </u>	
							<u></u>	
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							<b></b>	"
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								1

Accounting Period:	2018/1		FORM	6A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:		:	SYSTEM ID#
	Ralls Technologies LLC			63378
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the am all amounts (gross receipts) paid to your cable system by subscribers for the system's s (as identified in space E) during the accounting period. For a further explanation of how 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.	secondary transm to compute this a	ission service amount, see \$ 30	
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 th Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less th See page (vi) of the general instructions located in the paper SA1-2 form for more informatic BLOCK 1: GROSS RECEIPTS OF \$137,100 OF	nan \$527,600 m.	263,800	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that accounting period is \$52.00	you must pay for	this six-mon	
	Line 1. Royalty fee for accounting period			
	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		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but n	nore 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 (bu	t less than \$527	,600)	
	1. Enter the amount of gross receipts from space K \$	304,454.92		
	2. Base amount under statutory formula	263,800.00		
	3. Subtract line 2 from line 1	40,654.92		
	4. Multiply line 3 by .01	\$	406.55	
	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		\$	1,725.55
	FILING FEE AND TOTAL REMITTANCE DUE			
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	. \$	1,725.55	
	2. Filing Fee (See the instructions for more information on filing fee calculations)	<u>\$</u>	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3		\$	1,745.55
	Important: Your remittance must be in the form of an electronic payment pay See page i of the general instructions in the paper SA1-2 form f	-		ghts!

Accounting Period	2018/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Ralls Technologies LLC	SYSTEM ID# 63378
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations	11
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	240
<b>N</b> Individual to Be Contacted	<b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> (Identify an individual to whom we can contact about this statement of account.)	
for Further Information		573-985-3600
	Address 17594 Highway 19, PO BOX 184 (Number, street, rural route, apartment, or suite number) New London, MO 63459 (City, town, state, zip)	
	Email r.johnston@rallstech.com Fax (optional) 573-985-365	8
O Certification	<ul> <li>CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)</li> <li>I, the 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</li> <li>X (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable 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 ow in line 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained hereia are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]</li> </ul>	system as identified
	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:       Bob L. Winsel         Title:       Chief Operating Officer         (Title of official position held in corporation or partnership)	
	Date: 8/15/18	

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ounting Period: 2018/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
lls Technologies LLC	6337
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:         <ul> <li>"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> </ul> </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>X NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below.</li> </ul>	P Special Statement Concerning Gross Receipts Exclusion
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. 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
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