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

| STATEME | ENT | OF ACCOUNT | FOR COPYRIGH | T OFFICE USE ONLY | by email to: |
|---|------|--|--|---|---|
| | | ansmissions by | DATE RECEIVED | AMOUNT | |
| Cable Systems (Short Form) General instructions are located in the first tab of this workbook | | | 08/16/2018 | \$ ALLOCATION NUMBER | <u>coplicsoa@loc.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150 |
| Α | ACCO | OUNTING PERIOD COVERED E | Y THIS STATEMENT: (YY Period 1 = January 1 - June 30 | YY/(Period)) Period 2 = July 1 - December 31 | - |
| Accounting Period | | 20181 | Barcode Data Filing Period (optional · | - see instructions) | |
| В | | Instructions: Give the full legal name of the owner of the of the subsidiary, not that of the parent cou | | liary of another corporation, give the full cor | porate title |
| Owner | | List any other name or names under which | the owner conducts the business of th | e cable system. | |
| | | If there were different owners during the a single statement of account and royalty fee | | ne last day of the accounting period should s ng period. | ubmit a |
| | | Check here if this is the system's first filing. | If not, enter the system's ID number a | ssigned by the Licensing Division. | 8794 |
| | | LEGAL NAME OF OWNER/MAILING | ADDRESS OF CABLE SYSTEM | | |
| | | Adams Telcom, Inc. | | | |
| | | BUSINESS NAME(S) OF OWNER OF | CABLE SYSTEM (IF DIFFERENT) | | |
| | | | | | |
| | | MAILING ADDRESS OF OWNER OF (| CABLE SYSTEM | | |
| | | PO Box 248 (Number, street, rural route, apartment, or suite nu | mber) | | |
| | | Golden, IL 62339 | | | |
| | | (City, town, state, zip) | | | |
| С | | RUCTIONS: In line 1, give any busine s already appear in space B. In line 2 | | | |
| System | 1 | IDENTIFICATION OF CABLE SYSTEM: | | | |
| | | MAILING ADDRESS OF CABLE SYSTEM: | | | |
| | 2 | (Number, street, rural route, apartment, or suite nu | 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 sufficiency of the fling, a determination that would be made by a court of law.

Return completed workbook by email to:

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM I |
|----------------------|--|--|
| Name | Adams Telcom, Inc. | 87 |
| D | Instructions: List each separate community served by the cable system. A "commun "a separate and distinct community or municipal entity (including unincorporated co discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you li as the "first community." Please use it as the first community on all future filings. | mmunities within unincorporated areas and including single st will serve as a form of system identification hereafter kno |
| Area Served | Note: Entities and properties such as hotels, apartments, condominiums, or mobile hidentified city. | nome parks should be reported in parentheses below the |
| | | |
| | CITY OR TOWN | STATE |
| First Community | Mendon | |
| Community | Camp Point Golden | L |
| dd Rows as Necessary | Quincy | |
| du nows as Necessary | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| | LEGAL NAME OF OWNER OF C | ABLE SYSTEM | : | | | | | | -2E. PAG |
|---------------------------|--|------------------|-----------|---------------------------|-----------|---------------------------|-------------|-----------------|----------|
| Name | Adams Telcom, Inc. | | | | | | | | 87 |
| Е | SECONDARY TRANSMISSION In General: The information in s | pace E should | l cover a | Il categories of se | econdar | | | | |
| 0 | system, that is, the retransmission | | | | | | | | |
| Secondary Transmission | about other services (including p last day of the accounting period | | | | | | lnose exis | ung on the | |
| Service: Sub- | Number of Subscribers: Both | | | | | | ble systen | n, broken | |
| scribers and | down by categories of secondar | | | | | | | | |
| Rates | each category by counting the n separately for the particular serv | | 0 | • • • | | • | | s charged | |
| | Rate: Give the standard rate of | | | | | | | ge and the | |
| | unit in which it is generally billed | • • | , | | standa | rd rate variation | s within a | particular rate | |
| | category, but do not include disc | | | | o of ooo | andan (tranamic | | ico that achia | |
| | Block 1: In the left-hand block systems most commonly provide | • | | Ũ | | | | | |
| | that applies to your system. Not | | | | | | | | |
| | categories, that person or entity | | | | | ••• | • | | |
| | subscriber who pays extra for ca | | | | | d in the count ur | nder "Serv | ice to the | |
| | first set" and would be counted of Block 2: If your cable system | 0 | | | • • • | service that are | different | from those | |
| | printed in block 1 (for example, t | - | | • | | | | | |
| | with the number of subscribers a | and rates, in th | e right-h | and block. A two- | - or thre | e-word descript | ion of the | service is | |
| | sufficient. | | | | | | BLOC | () | |
| | DLC | NO. OF | | | | | BLUC | NO. OF | |
| | CATEGORY OF SERVICE | SUBSCRIB | ERS | RATE | CATE | EGORY OF SEF | RVICE | SUBSCRIBERS | RA |
| | Residential: | | | | | | | | |
| | Service to first set | | 0 | - | | | | | |
| | Service to additional set(s) | | | | | | | | |
| | • FM radio (if separate rate) | | | | | | | | |
| | Motel, hotel Commercial | | | | | | | | |
| | Converter | | | | | | | | |
| | Residential | | | | | | | | |
| | Non-residential | | | | | | | | |
| | | | | | | | | | |
| | SERVICES OTHER THAN SEC | ONDARY TRA | ANSMIS | SIONS: RATES | | | | | |
| F | In General: Space F calls for ra | | , | • | | | | | |
| • | not covered in space E, that is, t service for a single fee. There ar | | | | | - | - | | |
| Services | furnished at cost or (2) services | • | | • | | | • | , | |
| Other Than | amount of the charge and the ur | | usually | billed. If any rate | s are ch | narged on a vari | able per-p | orogram basis, | |
| Secondary | enter only the letters "PP" in the Block 1: Give the standard rate | | the eably | a system for each | of the | annliaghla son <i>i</i> i | oog ligtod | | |
| ransmissions: Rates | Block 2: List any services that | • • | | | | •• | | | |
| | listed in block 1 and for which a | • | - | | ed. List | these other ser | vices in th | e form of a | |
| | brief (two- or three-word) descrip | otion and inclu | de the ra | ite for each. | | | _ | | |
| | | BLO | CK 1 | | | | | BLOCK 2 | |
| | CATEGORY OF SERVICE | RATE | | ORY OF SERVIC | | RATE | CATEG | ORY OF SERVICE | RA |
| | Continuing Services: | | | tion: Non-reside | ential | | | | |
| | Pay cable Add'l abannal | | | el, hotel | | | | | |
| | Pay cable—add'l channel Eire protection | | | nmercial | | | | | |
| | Fire protection Burglar protection | | | cable cable-add'l chan | nol | | | | |
| | •Burgiar protection | | · · | protection | | | | | |
| | First set | - | | glar protection | | | | | |
| | Additional set(s) | | | ervices: | | | | | |
| | • FM radio (if separate rate) | | | connect | | - | | | |
| | • Converter | | | connect | | - | | | |
| | | | | let relocation | | _ | | | |
| | | | Out | | | | | | |
| | | | | ve to new address | S | - | | | |

| ccounting Period: 2 | 2018/1 | | | FORM SA1-2E. PAGE 3 | | | | | |
|-----------------------------|---|---|---|-------------------------------|--|--|--|--|--|
| Name | LEGAL NAME OF OWNER OF | CABLE SYSTEM: | | SYSTEM ID# | | | | | |
| Name | Adams Telcom, Inc. | | | 8794 | | | | | |
| | PRIMARY TRANSMITTERS: | TELEVISION | | | | | | | |
| G Primary | carried by your cable system FCC rules and regulations | entify every television station (including m during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting tl e)(2) and (4), or 76.63 (referring to 76.6 | t (1) stations carried only on a part-ti he carriage of certain network progra | ime basis under ams [sections | | | | | |
| Transmitters: Television | Substitute Basis Stations | s explained in the next paragraph. : With respect to any distant stations ca | arried by your cable system on a sub | ostitute program | | | | | |
| | basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. | | | | | | | | |
| | basis. For further information | 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 instructi | ons. | | | | | |
| | multicast stream associated "WETA-2" as the same on t | d with a station according to its over-the | e-air designation. For example, repo | ort multistream | | | | | |
| | of license. For example, W | RC is channel 4 in Washington, D.C. case whether the station is a network | C C | | | | | | |
| | educational station, by enter | ering the letter "N" (for network), "N-M" | (for network multicast), "I" (for indepe | endent), "I-M" | | | | | |
| | For the meaning of these te Column 4: Give the location | "E" (for noncommercial educational), of 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 | uctions in the paper SA1-2 form. t the community to which the station | is licensed by the | | | | | |
| | | | | | | | | | |
| | 1. CALL SIGN | 2. B'CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. LOCATION OF STATION | | | | | |
| | κτνο | 7.2 | Ν | Kirksville, MO | | | | | |
| | WQEC | 27.1 | E | Quincy, IL | | | | | |
| dd Rows as Necessary | KHQA | 7.1 | Ν | Quincy, IL | | | | | |
| | WTJR | 16.1 | I | Quincy, IL | | | | | |
| | WGEM-DT1-NBC | 10.1 | Ν | Quincy, IL | | | | | |
| | WGEM-DT2-CW | 10.2 | Ν | Quincy, IL | | | | | |
| | WGEM-DT3-FOX | 10.3 | N | Quincy, IL | | | | | |
| | GRIT | 7.3 | Ν | Quincy, IL | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| EGAL NAME OF | | JABLE 5 | ISTEM. | | | | | SYSTEM I 87 |
|---|--|---|---|---|---|--|---|----------------------------------|
| | every radio s | tation ca | arried on a separate and discre nerally receivable by your cab | | | | | н |
| eceivable if (1) in the basis of i for detailed info aper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G | it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior | y the sys be recei t the Cc sign of e he static ion's sign g a check n's locatio | I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically processor k mark in the "S/D" column. on (the community to which th 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 nna, during c ge (v) of the g ystem as a se sed by the FC | ?) it can ertain st eneral in eparate : | be expected, ated intervals. Instructions 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 | | | | | | FORM | A SA1-2E. PAGE 5. |
|--------------------------|---|---------------|------------------|--|-----------------|-----------------|--------------|-------------------|
| Nama | LEGAL NAME OF OWNER OF | CABLE SYS | STEM: | | | | | SYSTEM ID# |
| Name | Adams Telcom, Inc. | | | | | | | 8794 |
| | SUBSTITUTE CARRIAG | | | | G | | | |
| | In General: In space I, ident | | - | | - | tion that you | r cable eve | tem carried on a |
| • | substitute basis during the a | | | | | | | |
| Substitute | explanation of the programm | | | | | | | |
| Carriage: | 1. SPECIAL STATEMEN | | RNING SUBS | TITUTE CARRIAGE | | | | |
| Special Statement and | During the accounting per | riod, did you | ur cable syster | n carry, on a substitute ba | isis, any noni | network telev | vision prog | ram |
| Program Log | broadcast by a distant sta | tion? | | | | | YES | × NO |
| i rogram zog | - | | reat of this na | an blank. If your anower i | • "Voo " vou | | - | |
| | Note: If your answer is "No | , leave the | rest of this pa | ige blank. If your answer is | s res, your | must comple | te the prog | Iram |
| | log in block 2. 2. LOG OF SUBSTITUTI | | Me | | | | | |
| | In General: List each subs | | | ate line. Use abbreviation | s wherever p | ossible, if the | eir meaning | a is |
| | clear. If you need more spa | | | | e mierer p | | | 5.0 |
| | | | | vision program ("substitute | | | | |
| | period, was broadcast by a under certain FCC rules, re | | | | | | | |
| | Do not use general categor | | | | | | | |
| | "NBA Basketball: 76ers vs. | | | | | | - | |
| | | | | er "Yes." Otherwise enter " asting the substitute progr | | | | |
| | | | | the community to which th | | censed by th | e FCC or. | in |
| | the case of Mexican or Car | nadian stati | ons, if any, the | community with which the | e station is id | entified). | | |
| | | | when your sy | stem carried the substitute | e program. U | se numerals, | , with the n | nonth |
| | first. Example: for May 7 gi | | e substitute nr | ogram was carried by you | r cable syste | m list the tir | mes accur | ately |
| | to the nearest five minutes. | | | | | | | atory |
| | stated as "6:00-6:30 p.m." | | | | | | | |
| | to delete under FCC rules | | | n was substituted for prog | | | | |
| | was substituted for program | | | | | | | ogram |
| | effect on October 19, 1976 | • | , , | | | J | | |
| | | | | | | | | |
| | s | UBSTITUT | E PROGRAM | 1 | | N SUBSTIT | | 7. REASON FOR |
| | 1. TITLE OF PROGRAM | 2. LIVE? | 3. STATION'S | | 5. MONTH | 6. TIN | | DELETION |
| | | Yes or No | CALL SIGN | 4. STATION'S LOCATION | AND DAY | FROM - | - то | |
| | | | | | | | - | |
| | | | | | | _ | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | · | | - | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | _ | | |
| | | | | | | | | |
| | | | | | · | | | |
| | | | | | | | - | |
| | | | | | | | - | |
| | | | | | | | _ | |
| | | | | | | _ | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | _ | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | _ | | |
| 1 | | | | | | | | + |

| Accounting Period: | 2018/1 | FORM SA | 1-2E. PAGE 6. |
|---|---|-----------------------------|--------------------------|
| Nama | LEGAL NAME OF OWNER OF CABLE SYSTEM: | S | YSTEM ID# |
| Name | Adams Telcom, Inc. | | 8794 |
| 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 transmi (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. | ssion service mount, see | I,154.24 ss 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 \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. | 63,800 | |
| | 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 | his six-mon | |
| | 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 | 00) | |
| | 1. Base amount under statutory formula | | |
| | 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 Total Remittance Due | 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) | 52.00 | |
| | 2. Filing Fee (See the instructions for more information on filing fee calculations) | 15.00 | |
| | 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 | \$ | 67.00 |
| | Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informati | | nts! |

| Accounting Period: | 2018/1 FORM SA1-2E. PAGE |
|---|--|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM I Adams Telcom, Inc. 87 |
| 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 |
| N Individual to Be Contacted | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.) |
| for Further Information | Name Robert L. Hutter Telephone (217) 696-4411 |
| | Address 405 Emminga Road, PO Box 248 (Number, street, rural route, apartment, or suite number) Golden, IL 62339 (City, town, state, zip) |
| | Email roberthutter@adamstel.com Fax (optional) |
| O Certification | CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or (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 cable system in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein 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)] |
| | X /s/ James W. Broemmer 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: James W. Broemmer Title: CEO (Title of official position held in corporation or partnership) |
| | Date: June 30, 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.

| Adams Telcom, Inc. 87 SPECIAL STATEMENT CONCERNING GROSS RECEIPS EXCLUSIONS The Satellite Home Verser Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following services of providing secondary transmissions of primary broadcast transmitters, the system shall not include 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 for the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions marked by satellite carriers to satellite dish owners? Name Mare M | ounting Period: 2018/1 | FORM SA1-2E. PAGE 8 |
|--|---|--|
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Stabilite Home Viewer Act of 1989 amended Title 17, section 111(ght](A), of the Copyright Act by adding the following sectorates, and the outper stable and humber of subactbers and the gross amounts paid to the cable system for the basic service of providing sectorately transmission provand to section 115: The more information on when to exclude these amounts, see the note on page (wii) 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 to by satellite carriers to satellite carrier(s) below. Section 3 transmission of interest assessment, see page (wiii) of the general instructions located in the paper SA1-2 form. Name Matter 2 Kanz Complete this worksheet for those royally payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (wiii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment. For an explanation of interest assessment, see page (wiii) of the general instructions located in the paper SA1-2 form. Line 2 Multiply line 1 by the interest rate* and enter the sum here. x 0.00274 Line 4 Multiply line 2 by the number of days late and enter the sum here. x 0.00274 Line 4 Multiply line 2 by the number of using payoelicensing/interest-rate path. For further assistance please contract (202) 707-181 of on cleaning/gloc cay. * To view the interest rate chart click on www.copyright.gov/icensing/interest-rate path. For further assistance please contract (202) 707-181 of on cleaning/gloc cay. * To view the interest rate chart click on www.copyright.gov/icensing/interest-rate path. For further assistance please contract in the community served, ID number, and accounting period as given in the o | GAL NAME OF OWNER OF CABLE SYSTEM: | SYSTEM ID |
| The Statellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following serience: Image: Copyright act by adding the following serience of providing sector and yr transmissions of prinxup to accountary transmissions of prinxup to accountary transmissions of prinxup to account any transmissions on the section 119." Pe For more information on when to exclude these amounts, see the note on page (wii) of the general instructions tocated in the pager SA1-2 form. Section 114(d)(1)(A), of the General instructions tocated in the pager SA1-2 form. Section 118." During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions minds by satellite carriers to satellite (a carrier(s) below. Section 114." Section 114." Name Maing Address Maing Address Maing Address Section 114." Section 114." Nume 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 (wiii) of the general instructions located in the paper SA1-2 form. Imterest Assessment Line 1 Enter the amount of late payment or underpayment | ams Telcom, Inc. | 8794 |
| Mailing Address Mailing Address Mailing Address INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Q Line 1 Enter the amount of late payment or underpayment. x | 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? NO | P Special Statement Concerning Gross Receipts Exclusion |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and enter the sum here is a complete this worksheet for those royalty payments and enter the sum here is a constant the Licensing Division at (202) 707-8150 or licensing@loc.gov. Image: Complete the late complete the late covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Image: Complete the complete the complete the complete the complete the complete the list point of the served is community served is commun | | |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for the pay payment for form. Image: Complete this worksheet covering a statement of account already sub | | |
| Line 3 Multiply line 2 by the number of days late and enter the sum here - - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - x 0.00274 - - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - - - - - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - <td< th=""><th></th><th>Q</th></td<> | | Q |
| Line 3 Multiply line 2 by the number of days late and enter the sum here - - - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - x 0.00274 - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - - - - view 1 - - - - - - - * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. * This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner - - - - - Address - - - - - - ID number - - - - - - - - First community served< | Line 1 Enter the amount of late payment or underpayment | Interest Assessmen |
| Line 3 Multiply line 2 by the number of days late and enter the sum here | Line 1 Enter the amount of late payment or underpayment | Interest Assessmen |
| x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 | x | Interest Assessmen |
| in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |
| (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |
| To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served | Line 2 Multiply line 1 by the interest rate* and enter the sum here - Line 3 Multiply line 2 by the number of days late and enter the sum here - Line 3 Multiply line 2 by the number of days late and enter the sum here - Line 4 Multiply line 3 by 0.00274** and enter here - in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ | Interest Assessment |
| list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |
| Address ID number First community served | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |
| Address ID number First community served | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |
| First community served | Line 2 Multiply line 1 by the interest rate* and enter the sum here - x - x - x - x - x - x - x - x - x - x - x - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 x - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. | Interest Assessmen |
| First community served | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |
| | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |
| | Line 2 Multiply line 1 by the interest rate* and enter the sum here | Interest Assessmen |

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.