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 COPYRIGH	IT 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	02/22/2019	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A ACCOUNTING PERIOD COVERED B	Y THIS STATEMENT: (Y)	(YY/(Period))	

~	ACCO	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2018/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		20182 Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
		Instructions:	
В		Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.	
Owner		List any other name or names under which the owner conducts the business of the cable system.	
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.	
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		NEX-TECH LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		145 N MAIN (Number, street, rural route, apartment, or suite number)	
		LENORA, KS 67645	
		(City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless the est already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	

Privacy Act 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#
	NEX-TECH LLC	62974
D	Instructions: List each separate community served by the cable system. A "comm "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	d communities within unincorporated areas and including single, ou list will serve as a form of system identification hereafter known
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mob identified city.	ile home parks should be reported in parentheses below the
First	CITY OR TOWN WEBBER	KS
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM					FORM SA1	TEM I
Name	NEX-TECH LLC	ADEL OTOTEM.					010	629
Е	SECONDARY TRANSMISSION			-				
-	In General: The information in s system, that is, the retransmission							
Secondary	about other services (including p							
Transmission	last day of the accounting period	I (June 30 or D	ecember 31, a	as the case may	/ be).		-	
Service: Sub-	Number of Subscribers: Both							
scribers and Rates	down by categories of secondar each category by counting the n							
nuco	separately for the particular serv						largea	
	Rate: Give the standard rate c							
	unit in which it is generally billed	• •	,		idard rate variations	s within a pa	articular rate	
	category, but do not include disc Block 1: In the left-hand block				secondary transmiss	sion service	e that cable	
	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					der Servic	e to the	
	Block 2: If your cable system					different fro	om those	
	printed in block 1 (for example, t							
	with the number of subscribers a sufficient.	and rates, in the	e right-hand b	lock. A two- or th	hree-word description	on of the se	ervice is	
		OCK 1				BLOCK	2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		ATE C	ATEGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RA
	Residential:							
	Service to first set		40	24.95 PRE	MIERE		28	48
	Service to additional set(s)							
	• FM radio (if separate rate)							
	Motel, hotel							
	Commercial							
	Converter							
	Residential							
	Non-residential							
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISSION	S: RATES				
F	In General: Space F calls for rat	•	,	•				
Г	not covered in space E, that is, t							
Services	service for a single fee. There ar furnished at cost or (2) services							
Other Than	amount of the charge and the un							
Secondary	enter only the letters "PP" in the				-			
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that						were not	
Ruco	listed in block 1 and for which a							
	brief (two- or three-word) descrip	otion and includ	le the rate for	each.				
		BLO	CK 1				BLOCK 2	
	CATEGORY OF SERVICE	RATE		OF SERVICE	RATE	CATEGO	ORY OF SERVICE	RA
	Continuing Services:		Installation:	Non-residentia	al			
	• Pay cable	72.95	 Motel, ho 	tel		Sports	& Entertain.	13
	Pay cable—add'l channel		Commerce			Cinema	X	11
	Fire protection		 Pay cable 	e		HBO		17
	 Burglar protection 		,	e-add'l channel			ne & TMC	14
	Installation: Residential		 Fire prote 			Starz! E	ncore	12
	First set	99.00	• Burglar p					
		110.00	Other servic	es:				
	Additional set(s)	110.00						
	• FM radio (if separate rate)	110.00	• Reconne		30.00			
	. ,	110.00	• Disconne	ect				
	• FM radio (if separate rate)	110.00	• Disconne • Outlet rel	ect	30.00 110.00 99.00			

ounting Period: 2	2018/2			FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF	- CABLE SYSTEM:		SYSTEM ID
	NEX-TECH LLC			6297
G Primary Transmitters: Television	PRIMARY TRANSMITTERS: In General: In space G, ide carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, a Substitute Basis Stations 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 Column 1: List each station multicast stream associated "WETA-2" as the same on f Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio	entify every television station (including m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6 is explained in the next paragraph. :: With respect to any distant stations ca ules, regulations, or authorizations: e in space G—but do list it in space I (th a substitute basis. also in space I, if the station was carried 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-the carriage of certain network progra a(e)(2) and (4))]; and (2) certain state arried by your cable system on a sub- the Special Statement and Program d both on a substitute basis and also see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep pr "E-M" (for noncommercial education actions in the paper SA1-2 form.	elevision stations) time basis under ams [sections ations carried on a bstitute program Log)—if the o on some other tions. PN, etc. Identify each ort multistream the air in its community a noncommercial eendent), "I-M" ional multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KSNC	2	N	GREAT BEND, KS
	KLNE	3	E	LEXINGTON, NE
Necessary	KSNB	5	N	SUPERIOR, NE
Neccose. ,	KBSH	7	N	HAYS, KS
	KOOD	9	E	HAYS, KS
	KGIN	11	N	GRAND ISLAND, NE
	KHGI	13	N	KEARNEY, NE
	KFXL	14	N	LINCOLN, NE
	MYTV	15		LINCOLN, NE
	KWBL	16	I	KEARNEY, NE
	KSCW	23		WICHITA, KS
	KSAS	24	Ν	WICHITA, KS
	KWCH-DT2	110	N-M	WICHITA, KS
	KOOD-DT4	183	E-M	HAYS, KS
	KMTW-DT3	186	I-M	WICHITA, KS
	KSAS-DT2	187	N-M	WICHITA, KS
	KOOD-DT3	189	E-M	HAYS, KS
	KOOD-DT3	189	E-M	HAYS, KS

Accounting I	Period: 2018	/2					FORM	/I SA1-2E. PAGE 4.
LEGAL NAME O		CABLE SY	/STEM:					SYSTEM ID# 62974
	st 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 inf paper SA1-2 fc Column 1: I Column 2: S Column 3: I signal, indicate Column 4: C) it is carried by f monitoring, to formation about orm. Identify the call State whether t If the radio stat this by placing Give the station	y the sys be recein the Co sign of the static ion's sig g a chec n's locati	I-Band FM Carriage: Under (stem whenever it is received a ived at the headend, with the s opyright Office regulations on the 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 certain st general i eparate	be expected, tated intervals. nstructions in the. and discrete	Primary Transmitters: Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
KQMA	FM		PHILLIPSBURG, KS					
KKDT	FM		BURDETT, KS					
KDNS	FM		DOWNS, KS					
KREP	FM		BELLEVILLE, KS					
	+							
	+							
	+							
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Accounting Perio	od: 2018/2						FOR	M SA1-2E. PAGE 5.
-	LEGAL NAME OF OWNER OF	CABLE SYS	FEM:					SYSTEM ID#
Name	NEX-TECH LLC							62974
					•			
	SUBSTITUTE CARRIAGE							
I	In General: In space I, identi							
	substitute basis during the ac explanation of the programm							
Substitute					e general inst			2 101111.
Carriage: Special	1. SPECIAL STATEMENT							
Statement and	 During the accounting period 	-	r cable system	carry, on a substitute bas	is, any nonne	twork televisio	n program	
Program Log	broadcast by a distant stat	tion?					YES	× NO
	Note: If your answer is "No'	. leave the	rest of this pad	e blank. If vour answer is	"Yes." vou mu	ist complete th	ne progran	n
	log in block 2.	,		,,,	, j			
	2. LOG OF SUBSTITUTE		MS					
	In General: List each subst			te line. Use abbreviations	wherever pos	sible, if their n	neaning is	
	clear. If you need more spa					0.0.0, 0.0	loaning lo	
	Column 1: Give the title	of every no	nnetwork televi	ision program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re							l.
	Do not use general categori "NBA Basketball: 76ers vs.		vies of daske	toall. List specific program	n titles, for exa	ample, I Love	LUCY OF	
			lcast live, ente	r "Yes." Otherwise enter "N	No."			
				sting the substitute progra				
				ne community to which the			CC or, in	
	the case of Mexican or Can							
		,	when your sys	tem carried the substitute	program. Use	numerals, wit	th the mon	th
	first. Example: for May 7 giv		substitute pro	gram was carried by your	cable system	List the times	accuratel	V
	to the nearest five minutes.							у
	stated as "6:00-6:30 p.m."		1 - 5					
				was substituted for progra				
	to delete under FCC rules a							am
	was substituted for program effect on October 19, 1976.	ming that y	our system wa	s permitted to delete unde	r FCC rules a	nd regulations	5 IN	
					WHE	N SUBSTITU	JTE	
	S	UBSTITUT	E PROGRAM	1	CARR	AGE OCCUF	RRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIM	IES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	TO	
					-			
					-			
						_		
					-			
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1			1	1	1	<u> </u>		

Accounting Period:	2018/2	FORM SA	1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: NEX-TECH LLC	S	YSTEM ID 62974
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. I 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 the 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.	smission servic is amount, see	e 7,248.61
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 • 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 \$52	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 informa		hts!

Accounting Period:	2018/2						FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF	OWNER OF CABLE SYSTEM:					SYSTEM ID# 62974
M Channels	 to its subscribe 1. Enter the tol system carrie 2. Enter the tol on which the 	You must give (1) the number of ers, and (2) the cable system's t tal number of channels on whic ed television broadcast stations tal number of activated channel cable system carried television dcast services	total numb ch the cable s Is n broadcas	e t stations	ing the accounting per	riod.	18 344
N Individual to Be Contacted		TO BE CONTACTED IF FURTH t about this statement of account		RMATION IS NEEDED (Ider	ntify an individual to wl	hom	
for Further Information	Name	Scott Roe				Telephone 7	785-625-7070
	Address	2418 Vine Street (Number, street, rural route, apart Hays, KS 67601 (City, town, state, zip)	rtment, or sui	te number)			
	Email	sroe@nex-tech	h.com		Fax (optio	nal)	
O Certification	I, the undersig (Own (Age i X (Off i I have examinare true, completion	N (This statement of account m ined, hereby certify that (Check o ner other than corporation or p ent of owner other than corpora in line 1 of space B and that the o ficer or partner) I am an officer (f in line 1 of space B. ed the statement of account and ete, and correct to the best of my thion 1001(1986)]	one, but only partnership ation or pa owner is no (if a corpora hereby dec y knowledge Enter an Enter sign d name:	y one, of the boxes.) b) I am the owner of the cable artnership) I am the duly author it a corporation or partnership; ation) or a partner (if a partners clare under penalty of law that e, information, and belief, and /s/ Rhonda S. Goddaa electronic signature on the line nature using an "/s/ signature" Rhonda S. Goddard	system as identified in orized agent of the own or ship) of the legal entity all statements of fact c are made in good faith ard e above to certify this sta (e.g., /s/ John Smith)	line 1 of space B; of the cable syst identified as owner contained herein	tem as identified
		Title: (Title of o		Financial Officer on held in corporation or partnersh	ip)		
		Date:			02/26/	2019	

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	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
-TECH LLC	6297
 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	
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	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
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