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.

DATE RECEIVED

02/22/2019

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

SA1-2E Short Form

Return completed workbook by email to:

coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACC	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		
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.
		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 (Čítý, 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 t as 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)
		(Čity, town, state, zip code)
rivacy Act Notic	e: Sectio	on 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this

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 fing, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Nume	NEX-TECH LLC	62978
D	"a separate and distinct community or municipal entity (including uninco	
Served	identified city.	
	CITY OR TOWN	STATE
First Community	REPUBLIC	KS
,		
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM.						FORM SA1	TEM IC
Name	NEX-TECH LLC							0.0	629
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmissic about other services (including p last day of the accounting period 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	pace E should on of television ay cable) in sp (June 30 or Do blocks in space y transmission umber of billing ice at the rate i harged for eacl (Example: "\$2 ounts allowed in space E, the	cover a and rad ace F, r ecembe ce E cal service. s in tha ndicated h catego (0/mth") for adva e form li	Il categories of hio broadcasts hot here. All the r 31, as the ca l for the numbe In general, you t category (the d—not the num ory of service. I . Summarize a ince payment. sts the categor	secondary by your sy- facts you se may be or of subsc u can com number of ber of sets nclude bo ny standar	stem to subscrit state must be t). ribers to the cat pute the numbe persons or org s receiving serv th the amount o d rate variations	bers. Give hose existi ole system r of subscr anizations ice). f the charg s within a p sion servic	information ng on the broken ibers in charged e and the particular rate we that cable	
	that applies to your system. Note categories, that person or entity subscriber who pays extra for ca first set" and would be counted or Block 2: If your cable system I printed in block 1 (for example, ti with the number of subscribers a sufficient.	Where an inc should be cour ble service to a once again undo has rate catego iers of services ind rates, in the	dividual nted as a additiona er "Serv pries for that inc	or organizatior a subscriber in al sets would b ice to additiona secondary translude one or mo	a is receiving each apple included al set(s)." asmission pre second	ng service that f icable category. in the count un service that are lary transmissio	alls under Example: der "Servic different fr ns), list the	different a residential the to the rom those to the to the	
	BLC	OCK 1 NO. OF					BLOCK	K 2 NO. OF	· · · · · · · · · · · · · · · · · · ·
	CATEGORY OF SERVICE	SUBSCRIBI		RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT
	Residential: • Service to first set		55	24.95	PREMI	ERE		49	48.
	Service to additional set(s) FM radio (if separate rate) Motel, hotel Commercial Converter								
	Residential Non-residential								
F Services Other Than Secondary ransmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, ti service for a single fee. There ar furnished at cost or (2) services a 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) descrip	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 tion and includ	er) infor hat are ns: you ished to usually ne cable stem fur e was n le the ra	mation with re not offered in of do not need to p nonsubscribe billed. If any ra e system for ea nished or offeren nade or establi	spect to al combinatio give rate i rs. Rate in tes are ch ch of the a ed during t	n with any secon nformation cond formation shoul arged on a varia pplicable servic he accounting p	ndary trans cerning (1) d include b able per-pr ces listed. period that	smission services ooth the ogram basis, were not	
		BLOO				DATE	CATEO	BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE		ORY OF SER ation: Non-res		RATE	CATEG	ORY OF SERVICE	RAT
	Pay cable Pay cable—add'l channel	72.95	• Mot	tel, hotel mmercial			Sports Cinema	& Entertain.	13. 11.
	Fire protection		• Pay	cable			HBO		17.
	•Burglar protection		,	/ cable-add'l ch	annel			me & TMC	14.
	Installation: Residential	00.00		e protection			Starz!	ncore	12.
	 First set Additional set(s) 	99.00 110.00		glar protection services:					
	• FM radio (if separate rate)	110.00		connect		30.00			
	,					00.00			
	Converter		• [) S	connect					

	2018/2			FOR	M SA1-2E. PAGE 3
Name	LEGAL NAME OF OWNER O	F CABLE SYSTEM:			SYSTEM ID
	NEX-TECH LLC				62978
G Primary ansmitters: elevision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station here station was carried <i>only</i> or • List the station here, and basis. For further informati Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chanr of license. For example, V Column 3: Indicate in eace educational station, by ent (for independent multicast) For the meaning of these t	entify every television station (including t em during the accounting period, <i>except</i> in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph. s: With respect to any distant stations ca ules, regulations, or authorizations: re in space G—but do list it in space I (the n a substitute basis. also in space I, if the station was carried on concerning substitute basis stations, so on's call sign. <i>Do not</i> report origination pre- ed with a station according to its over-the-	(1) stations carried only on a part- e carriage of certain network prog 1(e)(2) and (4))]; and (2) certain state arried by your cable system on a su be Special Statement and Program I both on a substitute basis and als see page (v) of the general instruc- rogram services such as HBO, ES -air designation. For example, rep- vision station for broadcasting over station, an independent station, or for network multicast), "I" (for indep r "E-M" (for noncommercial educa- ctions in the paper SA1-2 form. the community to which the station	-time basis under rams [sections ations carried on a ubstitute program a Log)—if the so on some other tions. iPN, etc. Identify each bort multistream r the air in its community a noncommercial bendent), "I-M" tional multicast). n is licensed by the	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF ST	ATION
	KSNC	2	N	GREAT BEND, KS	
	KLNE	3	E	LEXINGTON, NE	
as Necessary	KSNB	5	N	SUPERIOR, NE	
,	KBSH	7	Ν	HAYS, KS	
	KOOD	9	E	HAYS, KS	
	KGIN	11	N	GRAND ISLAND, NE	
	KHGI	13	N	KEARNEY, NE	
	KFXL	14	N	LINCOLN, NE	
	ΜΥΤΥ	15			
			1	LINCOLN, NE	
	KWBL	16	1	LINCOLN, NE KEARNEY, NE	
	KWBL KSCW		1 1		
		16	I I N	KEARNEY, NE	
	KSCW	16 23	I I N N-M	KEARNEY, NE WICHITA, KS	
	KSCW KSAS	16 23 24		KEARNEY, NE WICHITA, KS WICHITA, KS	
	KSCW KSAS KWCH-DT2	16 23 24 110	N-M	KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS	
	KSCW KSAS KWCH-DT2 KOOD-DT4	16 23 24 110 183	N-M E-M	KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS	
	KSCW KSAS KWCH-DT2 KOOD-DT4 KMTW-DT3	16 23 24 110 183 186	N-M E-M I-M	KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS	

Accounting I	Period: 2018	/2					FORM	I SA1-2E. PAGE 4.
LEGAL NAME O		CABLE SY	/STEM:					SYSTEM ID# 62978
	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 monitoring, to ormation about orm. dentify the call State whether to f 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 0 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 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	
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	TEM:					SYSTEM ID#
Name	NEX-TECH LLC							62978
	SUBSTITUTE CARRIAGI				3			
I I	In General: In space I, identi					ion that your	r cable svete	m carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN			TITUTE CARRIAGE				
Special	• During the accounting per	iod, did you	r cable system	carry, on a substitute basi	s, any nonne	twork televis	ion progran	1
Statement and Program Log	broadcast by a distant stat	tion?					YES	× NO
Frogram Log			reat of this near	o block. If your opower is "	Vee "veu mu		-	
	Note: If your answer is "No"	, leave the	rest of this pag	e Diank. Il your answer is	res, you mu	ist complete	the program	11
	log in block 2. 2. LOG OF SUBSTITUTE		Me					
	In General: List each subst			te line. Use abbreviations v	wherever nos	sible if their	meaning is	
	clear. If you need more spa						inouring io	
				ision program ("substitute p				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							1.
	"NBA Basketball: 76ers vs.					p.e, 1 20		
				r "Yes." Otherwise enter "N				
				sting the substitute programe to community to which the		neod by tho	ECC or in	
	the case of Mexican or Can							
				tem carried the substitute p			with the mor	nth
	first. Example: for May 7 giv							
				gram was carried by your o				ly
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example. a	i program cam	ed by a system nom 6.01.1	15 p.m. to 6.2	o.su p.m. sr		
		er "R" if the	listed program	was substituted for progra	mming 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 under	r FCC rules a	nd regulatio	ns in	
						N SUBSTI		
	S	UBSTITUT	E PROGRAM		CARR	AGE OCCL		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
		103 01 100	ONLE OIGH	4. 01/110/10 200/110/1		TROM	10	
						_	_	
							_	
						-	_	
							_	
							_	
						-		
						_	_	
1								

Name Inclusion counter or count service. SYSTEM ID Inclusion Counter or count service. SC207. GROSS RECEIPTS GROSS RECEIPTS Inclusion Counter of count service. Sc207. Gross Receipts GROSS RECEIPTS Inclusion Counter of count service. Sc207. Gross Receipts GROSS RECEIPTS Inclusion Counter of count service. Sc207. Over the counter of count service. Sc207. Over the counter of count service. Sc207. Over the counter of count service. Sc200. Over the counter of count service. Sc207.000 or feas. Intervictions. To compatible the relation of counter of the service. Sc207.000 or feas. Intervictions. As a cobia service on service. Sc200. Intervictions. As a cobia service on space K. Sc200. Intervictions. As a cobia service on space K. Sc200. Intervictions. As a cobia service on space K. Sc200. Intervictions. As a cobia service on space K. Sc200.000.00 Intervictions. As a cobia service on space K. Sc200.000.00 Intervictions. As a cobia servicon space K. Sc200.000.00	Accounting Period:	2018/2	FORM SA	A1-2E. PAGE 6.
NEX.FCVTLL C22/7 Cores Receipt OPCOSE RECEIPTS Instructions: The figure you give in this space determines the form you fie and the ancount you give, Enter the tot of almonth (group corpole) paid to you cable system by subactions for the system is secondly transmission service) and annother (group corpole) paid to you cable system by subactions for the system is according transmission service) and the accounting period. Subactions are completed in another (group completed in a start of (group complete) in a paid of (group complete) in a group of (group	Name		S	-
K Instructions: The figure you give in this space determines the form you fie and the amount you gave. Enter the tot of standard complex bits and the amount of the tot complex bits and the amount of the amount of the tot complex bits and the amount of the amount of the tot complex bits and the amount of				62978
Letter the amount under statutory formia \$ 263,800 OH Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2. \$ 263,800,00 Line 1. Royalty fee the amount of gross receipts in space K is more than \$ 137,100 or less. \$ 200,000 Instructions: To compute the royalty fee you owe: \$ 200,000 Instructions: As a cable system with gross receipts in space K is more than \$137,100 or less. \$ 200,000 Instructions: As a cable system with gross receipts of \$137,100 or less. \$ 52.00 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2. \$ 52.00 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2. \$ 263,800.00 2. Enter amount of gross receipts from space K.		Instructions: The figure you give in this space determines the form you file and the amount you pay. If 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 thi 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.	smission servic s amount, see	9,519.81
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-month accounting period is \$52.00 Line 1. Royalty fee for accounting period \$ 52.00 Line 2. Interest charge. Enter the amount from line 4, space 0, 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 \$269,800 OR LESS (but more than \$137,100) 1. Base amount under statutory formula 2. Enter amount of gross receipts from space K		 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 	\$263,800	
accounting period is \$22.00 Line 1. Royalty fee for accounting period \$ \$2.00 Line 2. Interest charge. Enter the amount from line 4, space 0, page 8. 0.00 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2. \$ \$22.00 BLOCK 2: GROSS RECEIPTS OF \$283,800 OR LESS (buit more than \$137,100) 1. Base amount under statutory formula \$ 263,800.00 2. Enter amount of gross receipts from space K.		BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
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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 form 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 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8 BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K 2. Base amount under statutory formula \$ 263,800.00 3. Subtract line 2 from line 1 4. Multiply line 3 by .01 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 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		BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,	100)	
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5. Enter the amount from line 3		3. Subtract line 2 from line 1	_	
6. Subtract line 5 from line 4.		4. Enter the amount of gross receipts from space K		
7. Multiply line 6 by .005 (enter figure here)		5. Enter the amount from line 3		
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.		6. Subtract line 5 from line 4		
9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		7. Multiply line 6 by .005 (enter figure here)		
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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 0.00 FILING FEE AND TOTAL REMITTANCE DUE FILING FEE AND TOTAL REMITTANCE DUE FILING FEE AND TOTAL REMITTANCE DUE S 52.00 S 15.00 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 Register of Copyrights!		2. Base amount under statutory formula	-	
5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)		3. Subtract line 2 from line 1	-	
6. Interest charge. Enter the amount from line 4, space Q, page 8		4. Multiply line 3 by .01		
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) 2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights!		5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
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)		6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
Filing Fee and Total Remittance Due 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
Total Remittance 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		FILING FEE AND TOTAL REMITTANCE DUE		
Total Remittance 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)				
2. Filing Fee (See the instructions for more information on filing fee calculations)	Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights!	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
				jhts!

Accounting Period:	2018/2		FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF NEX-TECH L	OWNER OF CABLE SYSTEM: .C	SYSTEM ID# 62978
M Channels	 to its subscribe 1. Enter the to system carrie 2. Enter the to on which the 	You must give (1) the number of channels on which the cable system carried television br rs, and (2) the cable system's total number of activated channels during the accounting p al number of channels on which the cable d television broadcast stations	eriod.
N Individual to Be Contacted		O BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to a about this statement of account.)	whom
for Further Information	Name	Scott Roe	Telephone 785-625-7070
	Address	2418 Vine Street (Number, street, rural route, apartment, or suite number) Hays, KS 67601 (City, town, state, zip)	
	Email		ional)
O Certification	I, the undersig (Ow (Age X (Off I have examin are true, complete	Image: Control of the statement of account must be certified and signed in accordance with Copyright O and, hereby certify that (Check one, <i>but only one</i> , of the boxes.) Image: Control of the cable system as identified is a comporation or partnership) I am the owner of the cable system as identified is a nt of owner other than corporation or partnership) I am the owner of the cable system as identified is a nt of owner other than corporation or partnership) I am the duly authorized agent of the own in line 1 of space B and that the owner is not a corporation or partnership; or Image: Control of the cable system as identified is a corporation or partnership of the legal entities and correct to the best of my knowledge, information, and belief, and are made in good fait it is not a correct to the best of my knowledge, information, and belief, and are made in good fait it is not not 1001(1986)] Image: Control of the image: Control of	n line 1 of space B; or vner of the cable system as identified y identified as owner of the cable system contained herein /h.
		Title: Chief Financial Officer (Title of official position held in corporation or partnership)	
		Date: 02/20	5/2019

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 fing, a determination that would be made by a court of lave

unting Period: 2018/2	FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
-TECH LLC	629
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.	P Special Statemer Concerning Gros Receipts Exclusio
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	
Name Name Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	-
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
×	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
×	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
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