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 COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>
General instructions are located in the first tab of this workbook	8/28/2019	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

A	ACCC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		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.	
		6 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	3748
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		HCCI, LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		3330 State Highway 11B	
		(Number, street, rural route, apartment, or suite number)	
		Nicholville, NY (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 unl s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in sp	
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#
	HCCI, LLC	63748
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.	communities within unincorporated areas and including single,
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobil	e home parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	STATE
First	Wells	NY
Community	Speculator	NY
	Lake Pleasant	NY
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF CA							FORM SA	STEM I
Name		ADLE STOTEM.						010	6374
	HCCI, LLC								007
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCRI	BERS AND R	ATES				
E	In General: The information in s								
Cocondom/	system, that is, the retransmission								
Secondary Transmission	about other services (including p last day of the accounting period						nose existi	ng on the	
Service: Sub-	Number of Subscribers: Both						ole system,	broken	
scribers and	down by categories of secondary								
Rates	each category by counting the nu							charged	
	separately for the particular serve Rate: Give the standard rate c							e 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. Note								
	categories, that person or entity								
	subscriber who pays extra for ca								
	first set" and would be counted o								
	Block 2: If your cable system I printed in block 1 (for example, ti	-		•					
	with the number of subscribers a								
	sufficient.								
	BLC	DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RA
	Residential:	CCDCCT			0,111			CCDCCI.(DLI.(C	
	Service to first set			47.00	Season	al		197	32
	Service to additional set(s)			8.95	Basic			61	47
	• FM radio (if separate rate)				Commercial			5	65.
	Motel, hotel				Digital			60	52
	Commercial		4	65.00	Founda			5	32
	Converter								
	Residential			8.95					
	Non-residential			8.95					
			I						
	SERVICES OTHER THAN SEC								
F	In General: Space F calls for rat not covered in space E, that is, the	•	,		•				
•	service for a single fee. There ar								
Services	furnished at cost or (2) services of		,		0		0.,		
Other Than	amount of the charge and the un		usually	billed. If any ra	ates are ch	arged on a varia	able per-pr	ogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rat		he cable	system for ea	och of the a	annlicable servic	es listed		
Rates								were not	
	Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of								
	brief (two- or three-word) description and include the rate for each.								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SER	VICE	RATE	CATEGO	ORY OF SERVICE	RA
	Continuing Services:		Installa	tion: Non-res	idential				
	• Pay cable		• Mot	el, hotel		80.00			
	Pay cable—add'l channel			nmercial		80.00			
	 Fire protection 		-	cable					
	Fire protection		 Pav 	cable-add'l ch	nannel				
	•Burglar protection								
	•Burglar protection Installation: Residential		• Fire	protection					
	•Burglar protection Installation: Residential • First set	80.00	• Fire • Burg	protection glar protection	I				
	•Burglar protection Installation: Residential • First set • Additional set(s)	80.00 25.00	• Fire • Burg Other s	protection glar protection ervices:	I				
	 Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 		• Fire • Burg Other s • Rec	protection glar protection ervices: onnect	I	60.00			
	•Burglar protection Installation: Residential • First set • Additional set(s)		• Fire • Burg Other s • Rec • Disc	protection glar protection ervices: onnect connect	I				
	 Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 		• Fire • Bury Other s • Rec • Disc • Out	protection glar protection ervices: onnect		60.00 25.00 80.00			

	LEGAL NAME OF OWNER OF	- CABLE SYSTEM:		SYSTE
Name	HCCI, LLC			(
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ansmitters: relevision	carried by your cable syste FCC rules and regulations i 76.59(d)(2) and (4), 76.61(6 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 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 location	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- ne carriage of certain network progra (1(e)(2) and (4))]; and (2) certain sta arried by your cable system on a sul he 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 or "E-M" (for noncommercial educati uctions in the paper SA1-2 form.	ime basis under ams [sections tions carried on a bstitute program Log)—if the p on some other ions. PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WRGB	6.1	N	SCHENECTADY, NY
	WRGB-2	6.2	N 	SCHENECTADY, NY
	WXXA	23.1	N	ALBANY, NY
Rows as Necessary	WAAA	23.1		ALDANI, NI
	WTFN	10,1	N	AI BANY, NY
	WTEN WTEN-2	10.1 10.2	N	ALBANY, NY ALBANY, NY
	WTEN WTEN-2 WNYT	10.2	N N N	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY
	WTEN-2	10.2	N	ALBANY, NY
	WNYT	13.1	N	ALBANY, NY
	WNYT-2	13.2	I	ALBANY, NY

LEGAL NAME OI HCCI, LLC								SYSTEM I 637
	t every radio	station c) arried on a separate and disc nerally receivable by your ca					н
eceivable if (1) on the basis of For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G	it is carried b monitoring, to prmation abourn. dentify the cal tate whether the radio stat this by placing sive the station	y the sys be rece at the Co I sign of the station ition's sig g a checo n's locat	II-Band FM Carriage: Under stem whenever it is received ived at the headend, with the opyright Office regulations on each station carried. on is AM or FM. inal was electronically proces k mark in the "S/D" column. ion (the community to which the the community with which the	at the system's h system's FM an this point, see p sed by the cable he station is licer	eadend, and tenna, during age (v) of the system as a s nsed by the F	(2) it can certain general separate	n be expected, stated intervals. instructions in the.	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	d: 2019/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	HCCI, LLC							63748
	SUBSTITUTE CARRIAGI	E: SPECIA		NT AND PROGRAM LO	G			
I I	In General: In space I, identi		-			ion that your	· cable syste	m carried on a
•	substitute basis during the a							
Substitute	explanation of the programm	ing that mus	st be included in	this log, see page (v) of the	e general instr	uctions in the	e paper SA1-	-2 form.
Carriage:	1. SPECIAL STATEMEN		NING SUBST	TITUTE CARRIAGE				
Special	 During the accounting per 	iod, did you	r cable system	carry, on a substitute basi	s, any nonnet	twork telev <u>is</u>	ion program	1 <u> </u>
Statement and Program Log	broadcast by a distant stat	tion?					YES	× NO
Frogram Log	Note: If your answer is "No'	' loovo tho	root of this pag	a blank. If your anowar is '			-	
	-	, leave the	rest of this pag	e blank. 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	wherever pos	sible if their	meaning is	
	clear. If you need more spa				interer pee	0.0.0,0.	in our nig to	
				sion program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							1.
	"NBA Basketball: 76ers vs.					umpio, 1 201	10 Lucy 0.	
				"Yes." Otherwise enter "N				
				sting the substitute progra		nood by the	FCC or in	
	the case of Mexican or Can			e community to which the			FCC or, in	
				tem carried the substitute			vith the mor	nth
	first. Example: for May 7 giv	/e "5/7."			-			
				gram was carried by your o				ly
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carrie	ed by a system from 6:01:7	15 p.m. to 6:2	8:30 p.m. sh	iould be	
		er "R" if the	listed program	was substituted for progra	mming that y	our system v	was require	d
	to delete under FCC rules a	ind regulation	ons in effect du	ring the accounting period	; enter the let	ter "P" if the	listed progra	
	was substituted for program		our system wa	s permitted to delete unde	r FCC rules a	nd regulation	ns in	
	effect on October 19, 1976.							
					WHE	N SUBSTI	TUTE	
	S	UBSTITUT	E PROGRAM			AGE OCCL		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TI FROM –	IMES – TO	DELETION
		100 01 110	ONEE OIGHT		THE BITT	1110	10	
							_	
						-	_	
						-	_	
			1					
						-	_	
						-	_	
						_	_	
						-	_	
						_	_	
							-	

Accounting Period:	2019/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: HCCI, LLC	SY	STEM ID# 63748
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	,781.83 s 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. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	63,800	
	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 \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of groop requirts from encode K		
	Enter the amount of gross receipts from space K Base amount under statutory formula \$ 263,800.00		
	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) 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) 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) 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) 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) 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) 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) 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) 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) 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) 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) 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) 5. Royalty due on the first \$263,800 of gross recei	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8		
	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
	EFT Trace # or TRANSACTION ID # 828190299		
	Important: Your remittance must be in the form of an electronic payment payable to the Registe See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for m		

Accounting Period:	2019/1					FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNE HCCI, LLC	ER OF CABLE SYSTEM:				SYSTEM ID# 63748
M Channels	 to its subscribers, and Enter the total numl system carried televi Enter the total numl on which the cable s 	I (2) the cable system's ber of channels on whic ision broadcast stations ber of activated channe system carried televisior	total numbers ch the cable s els n broadcast		ccounting period.	8 . 72
N Individual to Be Contacted		CONTACTED IF FURTI this statement of accou		RMATION IS NEEDED (Identify an in	dividual to whom	
for Further Information	Name Bra	adley Pattelli			Telephone	<u>315-328-9021</u>
	(Nun Nic	30 State Highway nber, street, rural route, apar cholville, NY 1296 r, town, state, zip)	artment, or suite	e number)		
	Email	bpattelli@slic.c	com		Fax (optional)	
O Certification	 I, the undersigned, here (Owner othered) (Agent of owner in line 1 X (Officer or in line 1 I have examined the s 	reby certify that (Check c er than corporation or p wner other than corpor of space B and that the o partner) I am an officer (of space B. statement of account and d correct to the best of my	one, <i>but only</i> partnership ration or par owner is not (if a corporat d hereby dec y knowledge	ified and signed in accordance with (<i>cone</i> , of the boxes.)) I am the owner of the cable system a rtnership) I am the duly authorized age t a corporation or partnership; or tion) or a partner (if a partnership) of the dare under penalty of law that all statem a, information, and belief, and are made "/s/ Bradley Pattelli" electronic signature on the line above to nature using an "/s/ signature" (e.g., /s/ Bradley Pattelli	s identified in line 1 of space E ent of the owner of the cable s e legal entity identified as own nents of fact contained herein e in good faith.	3; or system as identified
		Title: (Title of		Executive Officer on held in corporation or partnership)		
l		Date:			08/28/2019	

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 lav

unting Period: 2019/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
XI, LLC	6374
 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? 	P Special Statement Concerning Gross Receipts Exclusio
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
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.	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
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	<u> </u>
Line 2 Multiply line 1 by the interest rate* and enter the sum here	 ys
	 ys _
x day	 ys
Line 3 Multiply line 2 by the number of days late and enter the sum here	 ys
x day	 ys
x day Line 3 Multiply line 2 by the number of days late and enter the sum here x x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here	 ys
Line 3 Multiply line 2 by the number of days late and enter the sum here	 ys
Line 3 Multiply line 2 by the number of days late and enter the sum here	 ys
Line 3 Multiply line 2 by the number of days late and enter the sum here	 ys
Line 3 Multiply line 2 by the number of days late and enter the sum here	ys
Line 3 Multiply line 2 by the number of days late and enter the sum here	ys
Line 3 Multiply line 2 by the number of days late and enter the sum here	- ys -
Line 3 Multiply line 2 by the number of days late and enter the sum here	 ys
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	- ys -
Line 3 Multiply line 2 by the number of days late and enter the sum here	- ys -
Line 3 Multiply line 2 by the number of days late and enter the sum here	 ys

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.