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

STATEM	INT:	OF ACCOUNT	FOR COPYRIG	Return completed workbook by email to:					
		ansmissions by	DATE RECEIVED	AMOUNT	-				
Cable Syste					<u>coplicsoa@copyright.gov</u>				
General instru	ctions	are located		\$	For additional information, contact the U.S. Copyright Office Licensing Division at:				
in the first tab	of this	workbook	02/28/2020	ALLOCATION NUMBER	Tel: (202) 707-8150				
					1				
				Ш	3				
A	ACCO	DUNTING PERIOD COVERED E	BY THIS STATEMENT: (Y)	YYY/(Period))					
		2019/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31					
		20192	Barcode Data Filing Period (optiona	I - see instructions)					
Accounting									
Period									
		Instructions:							
В		Give the full legal name of the owner of the of the subsidiary, not that of the parent co		diary of another corporation, give the full cor	porate title				
Owner		List any other name or names under which	the owner conducts the business of t	he cable system.					
		If there were different owners during the a	ccounting period, only the owner on t	the last day of the accounting period should si	ubmit a				
		single statement of account and royalty fee							
		Check here if this is the system's first filing	If not, enter the system's ID number	assigned by the Licensing Division.	000143				
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM						
		CEQUEL COMMUNICATIONS LLC							
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)					
		SUDDENLINK COMMUNICATIONS							
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM						
		3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite nu	mber)						
		TYLER, TX 75701							
	INCTO	(City, town, state, zip)	an ar trada namaa uaad ta idar	tify the hypinese and exerction of the	avatam unlaga thaga				
С				ntify the business and operation of the e system, if different from the address					
System	1	IDENTIFICATION OF CABLE SYSTEM:							
		HAZEN, AR							
		MAILING ADDRESS OF CABLE SYSTEM:							
	2	(Number, street, rural route, apartment, or suite nu	mber)						
		(City, town, state, zip code)							
	•								
Privacy Act Notice	e: Sectior	111 of title 17 of the United States Code aut	norizes the Copyright Offce to collect th	e personally identifying information (PII) reques	sted 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.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
Name	CEQUEL COMMUNICATIONS LLC	000143
	Instructions: List each separate community served by the cable system. A "commu	
-	"a separate and distinct community or municipal entity (including unincorporated of	
D	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.	ist will serve as a form of system identification hereafter know
		have any should be recented in an address below the
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile	nome parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	STATE
First	HAZEN	AR
Community	CARLISLE	
Community		AR
	DEVALLS BLUFF	AR
ld Rows as Necessary	PRAIRIE COUNTY(PORTION)	AR

								-	1-2E. PAGE			
Name	LEGAL NAME OF OWNER OF CA		SYSTEM ID									
	CEQUEL COMMUNICAT		00014									
_	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCRI	BERS AND RA	TES							
E	In General: The information in s	•		-		•						
. .	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the											
Secondary Transmission	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).											
Service: Sub-	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken											
scribers and	, , , , , , , , , , , , , , , , , , ,											
Rates	each category by counting the number of billings in that category (the number of persons or organizations charged											
	separately for the particular serv							as and the				
	Rate: Give the standard rate of unit in which it is generally billed											
	category, but do not include disc				iy stanua		is within a					
	Block 1: In the left-hand block				ies of sec	ondary transmis	ssion servi	ce that cable				
	systems most commonly provide							0,				
	that applies to your system. Not			-		-						
	categories, that person or entity subscriber who pays extra for ca						•					
	first set" and would be counted once again under "Service to additional set(s)." Block 2: If your cable system has rate categories for secondary transmission service that are different from those											
	printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together											
	with the number of subscribers a	and rates, in th	e right-h	and block. A tw	o- or thre	e-word descript	ion of the	service is				
	sufficient.	DCK 1					BLOCK	()				
		NO. OF					BLOCK 2 NO. OF					
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RATE			
	Residential:		440	24.00								
	Service to first set		118	34.99								
	Service to additional set(s)											
	• FM radio (if separate rate)											
	Motel, hotel		45									
	Commercial		15	34.99								
	Converter											
	Residential											
	Non-residential											
	SERVICES OTHER THAN SEC											
-	In General: Space F calls for ra					Il your cable sy	stem's ser	vices that were				
F	not covered in space E, that is, t	hose services	that are	not offered in c	ombinatio	on with any seco	ondary tra	nsmission				
	service for a single fee. There are		,		0		0 (,				
Services Other Than	furnished at cost or (2) services amount of the charge and the ur											
Secondary	5		usually	billed. If any fa	les are ci	larged on a van	able per-p	logram basis,				
ransmissions:	enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.											
Rates	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 a											
	brief (two- or three-word) description and include the rate for each.											
		BLO						BLOCK 2				
	CATEGORY OF SERVICE	RATE		ORY OF SER\		RATE	CATEG	ORY OF SERVICE	RATE			
	Continuing Services:			tion: Non-resi	dential							
	• Pay cable	19.00		el, hotel								
	 Pay cable—add'l channel 	19.00		nmercial								
	Fire protection		-	cable								
	•Burglar protection		-	cable-add'l ch	annel							
	Installation: Residential			protection								
	First set	99.00		glar protection								
	Additional set(s)	25.00		ervices:								
	 FM radio (if separate rate) 		• Rec	onnect		40.00						
	, , ,											
	• Converter			connect								
	• Converter			connect let relocation		25.00						

				FOR	M SA1-2E. PAGE 3					
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:			SYSTEM ID: 000143					
	CEQUEL COMMUNICATIONS LLC									
	PRIMARY TRANSMITTERS: TELEVISION									
G Primary nsmitters: elevision	carried by your cable syster FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations : basis under specific FCC ru	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:	<i>t</i> (1) stations carried only on a part-ti he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain stat arried by your cable system on a sub	me basis under ms [sections ions carried on a stitute program						
	station was carried only on	e in space G—but do list it in space I (t a substitute basis. also in space I, if the station was carrie		0,						
	basis. For further informatio Column 1: List each station	n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	, see page (v) of the general instructi program services such as HBO, ESP	ons. N, etc. Identify each						
	"WETA-2" as the same on t Column 2: Give the channed	the form. el number the FCC assigned to the tele	0 1 1							
	Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location	of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.								
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF ST	ATION					
	KARK-1	4	N	LITTLE ROCK, AR						
	KARZ-1	42	l	LITTLE ROCK, AR						
ws as Necessary	KASN-1	38	I	PINE BLUFF, AR						
tows as necessary										
	KATV-1	7	Ν	LITTLE ROCK, AR						
	KATV-1 KETS-1	7	N	LITTLE ROCK, AR						
				1						
	KETS-1	2	E	LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1	2 36	E	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1	2 36 16 49	E	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1	2 36 16 49	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						
	KETS-1 KKAP-1 KLRT-1 KMYA-1 KTHV-1	2 36 16 49 11	E E I I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR CAMDEN, AR LITTLE ROCK, AR						

LEGAL NAME OF								SYSTEM 000
	every radio s	tation ca	rried on a separate and discrence in the second sec					н
ecceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If signal, indicate t 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 station	y the sys be recei t the Co sign of e he statio ion's sign g a check i's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on t each station carried. on is AM or FM. nal was electronically processor (mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante his point, see pa ed by the cable s e station is licens	adend, and (2 anna, during c ge (v) of the g ystem as a se sed by the FC	?) it can l ertain st eneral ir eparate a	be expected, ated 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	
0/122 01011	7 0. 1	0,2			7	0,0		
						1		

Accounting Perio								M SA1-2E. PAGE 5.	
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#	
Name	CEQUEL COMMUNICA	ATIONS L	LC					000143	
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LC	G				
	In General: In space I, ident	tify every no	nnetwork telev	<i>ision program</i> , broadcast by	, a distant sta	tion, that y	our cable sys	tem carried on a	
	ubstitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further								
Substitute	explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.								
Carriage: Special	1. SPECIAL STATEMEN								
Statement and	 During the accounting per 	• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program							
Program Log									
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you r	must comp	lete the prog	jram	
	log in block 2.								
	2. LOG OF SUBSTITUT			ata lina. Llas abbraviation		aasibla iff	hair maanin	- io	
	In General: List each subs clear. If you need more spa				s wherever p	ossidie, ii i	neir meaning	y is	
				vision program ("substitute	e program") tl	hat, during	the account	ing	
	period, was broadcast by a								
	under certain FCC rules, re								
	Do not use general catego "NBA Basketball: 76ers vs.		ovies or bask	etball. List specific progra	am titles, for e	example,	Love Lucy	or	
			adcast live, ent	er "Yes." Otherwise enter	"No."				
				asting the substitute prog					
	the case of Mexican or Car			the community to which the			the FCC or,	in	
				stem carried the substitute			ls, with the n	nonth	
	first. Example: for May 7 gi	ve "5/7."							
				ogram was carried by you				ately	
	to the nearest five minutes stated as "6:00–6:30 p.m."	. Example:	a program car	ried by a system from 6:0"	1:15 p.m. to 6	:28:30 p.n	n. snould be		
		ter "R" if the	e listed prograr	n was substituted for prog	ramming that	t your syste	em was <i>requ</i>	iired	
	to delete under FCC rules							ogram	
	was substituted for prograr effect on October 19, 1976	•	your system w	as permitted to delete und	ter FCC rules	and regul	ations in		
	S		E PROGRAM	1		N SUBST AGE OCC	URRED	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. FROM	TIMES — TO	DELETION	
							_		
							_		
							_		
							_		
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							_		
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1			1						
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Accounting Period:	2019/2 FORM SA1-2E. PAGE							
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC 00014							
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total c all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se 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. \$ 41,170.05 (Amount of gross 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 \$263,80(• Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(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 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							
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8							
	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)							
	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							
	Enter the amount of gross receipts from space K							
	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							
	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)							
	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)							
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 67.00							
	EFT Trace # or TRANSACTION ID #							
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.							

Accounting Period	2019/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 000143
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 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services .	10 58
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.) Name RODNEY HASKINS	(903) 579-3152
Information	Address Address 3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite number) TYLER, TX 75701	
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 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ov 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 herei 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)] 	system as identified vner of the cable system
	X /s/ Alan Dannenbaum 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: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership) Date: 02/18/2020	-

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.

ounting Period: 2019/2	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
QUEL COMMUNICATIONS LLC	00014
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 fol- lowing 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 sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
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	
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 Assessmen
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
xdays	
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	
in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ - (interest charge)	
* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.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	
Address ID number	
Address	

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.