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

3258

STATEMENT	FOF ACCOUNT	FOR COPYRIGHT	OFFICE USE ONLY	by email to:
	ransmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov
Cable Systems	is are located	2/25/2020	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A ACC Accounting Period	2013/2	BY THIS STATEMENT: (YYY Period 1 = January 1 - June 30 Barcode Data Filing Period (optional - s	Period 2 = July 1 - December 31	
В	Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent co		ary of another corporation, give the full cor	porate title

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
		Zito West Holding LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		Zito Media
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		PO Box 665 (Number, street, rural route, apartment, or suite number)
		Coudersport, PA 16915 (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 these a 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	4	IDENTIFICATION OF CABLE SYSTEM:
	1	Zito Media - Chillicothe
		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 suffciency of the fling, a determination that would be made by a court of law.

Return completed workbook

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Zito West Holding LLC	3258
D	Instructions: List each separate community served by the cable system. A "co "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community the as the "first community." Please use it as the first community on all future fil	ommunity" is the same as a "community unit" as defined in FCC rules: rated communities within unincorporated areas and including single, at you list will serve as a form of system identification hereafter knowr lings.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or i identified city.	nobile home parks should be reported in parentheses below the
First	CITY OR TOWN Chillicothe	STATE
Community	Livingston County	MO
Add Rows as Necessary		

								FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					515	TEM II 32
	Zito West Holding LLC								32;
-	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCR	BERS AND R	ATES				
E	In General: The information in s	•		-		•			
. .	system, that is, the retransmission								
Secondary Transmission	about other services (including p last day of the accounting period						those exist	ling on the	
Service: Sub-	Number of Subscribers: Both						ble system	ı, broken	
scribers and	down by categories of secondar	, y transmission	service	e. In general, yo	u can con	npute the numb	er of subsc	ribers in	
Rates	each category by counting the n		0	0,0		•		s charged	
	separately for the particular serv Rate: Give the standard rate of							ne and the	
	unit in which it is generally billed	-	-					-	
	category, but do not include disc	· ·		,	ing otaniaa		io mann a	particular rate	
	Block 1: In the left-hand block	•		-		•			
	systems most commonly provide								
	that applies to your system. Not categories, that person or entity			0		0			
	subscriber who pays extra for ca						•		
	first set" and would be counted of								
	Block 2: If your cable system								
	printed in block 1 (for example, t								
	with the number of subscribers a sufficient.	and rates, in th	e right-i	nand block. A tv	vo- or thre	e-wora descrip	tion of the s	service is	
		DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATI	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:				_		-		
	Service to first set		893	27.13					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
					•				1
_	SERVICES OTHER THAN SEC In General: Space F calls for rai					II vour cable sv	stem's serv	vices that were	
F	not covered in space E, that is, t	•	,		•				
	service for a single fee. There an	•			0		0.	·	
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		usualiy	y billed. If arry ta		laigeu oli a vai	iable hei-h	logram basis,	
ransmissions:	Block 1: Give the standard rat		the cab	le system for ea	ach of the	applicable servi	ces 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.							e form of a	
	bhei (two- of three-word) desch					I	Т		
		BLO	1			DATE	CATEO	BLOCK 2 DRY OF SERVICE	
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SER ation: Non-res		RATE	CATEGO	JRT OF SERVICE	RAT
	• Pay cable	17.95		tel, hotel					
	• Pay cable—add'l channel			mmercial					
	Fire protection		Commercial Pay cable						
	•Burglar protection		Pay cable-add'l channe						
	Installation: Residential		• Fire protection						
	First set	30.00		rglar protection					
	 Additional set(s) 			services:					
	• FM radio (if separate rate)		•Re	connect		30.00			
	• Converter		• Dis	sconnect					
			• Ou	tlet relocation		30.00			••••••
			• Ma	ve to new addr	ess	30.00			

	LEGAL NAME OF OWNER OF	· CABLE SYSTEM:		SYSTEM
Name	Zito West Holding LL	с		3
	PRIMARY TRANSMITTERS:			
G Primary ransmitters: Television	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as 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 informatio Column 1 : List each statior multicast stream associated "WETA-2" as the same on t Column 2 : Give the channel 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, s n's call sign. <i>Do not</i> report origination pr d 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 st rried by your cable system on a su e Special Statement and Program I both on a substitute basis and als see page (v) of the general instruct rogram services such as HBO, ES -air designation. For example, rep vision station for broadcasting ove 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	E-time basis under arams [sections tations carried on a ubstitute program in Log)—if the so on some other ctions. SPN, etc. Identify each boort multistream er the air in its community a noncommercial pendent), "I-M" tional multicast). n is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	КСРТ	19	Е	Kansas City MO
	ксти	5	N	Kansas City MO
	KCWE	29	I	Kansas City MO
	КМВС	9	N	Kansas City MO
	КМВС	9.1	N	Kansas City MO
	КМСІ	38	l	Lawrence KS
	KDYE	50		
	KPXE			Kansas City MO
	KSHB	41	N	Kansas City MO Kansas City MO
			N I	
Rows as Necessary	KSHB	41		Kansas City MO
Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
l Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
l Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
J Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
l Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
d Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
d Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
d Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO
ld Rows as Necessary	KSHB KSMO	41 62	1	Kansas City MO Kansas City MO

				SYSTEM				
Name	LEGAL NAME OF OWNER OF			32 32				
	Zito West Holding LLC 3250 PRIMARY TRANSMITTERS: TELEVISION							
				· · · · · ·				
G) translator stations and low power tele of (1) stations carried only on a part-time of (1) stations carried only on a part-time (1) stations (1)	,				
	FCC rules and regulations in	n effect on June 24, 1981, permitting t	he carriage of certain network progran	ns [sections				
Primary ansmitters:)(2) and (4), or 76.63 (referring to 76.0 s explained in the next paragraph.	61(e)(2) and (4))]; and (2) certain static	ons carried on a				
Felevision	Substitute Basis Stations:	With respect to any distant stations o	arried by your cable system on a subs	stitute program				
		les, regulations, or authorizations: in space G—but do list it in space I (the Special Statement and Program Lo	pa)—if the				
	station was carried only on	a substitute basis.						
		•	d both on a substitute basis and also on the page (v) of the general instruction					
	Column 1: List each station	i's call sign. <i>Do not</i> report origination	program services such as HBO, ESPN	N, etc. Identify each				
	multicast stream associated "WETA-2" as the same on the	0	e-air designation. For example, report	t multistream				
	Column 2: Give the channe	el number the FCC assigned to the tel	evision station for broadcasting over th	ne air in its community				
		RC is channel 4 in Washington, D.C.	station, an independent station, or a r	noncommercial				
			(for network multicast), "I" (for independent					
	(for independent multicast),	"E" (for noncommercial educational),	or "E-M" (for noncommercial education					
		rms, see page (iv) of the general instr	uctions in the paper SA1-2 form. t the community to which the station is	licensed by the				
			the community with which the station is	,				
		, ,,,,,						
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
		2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					
		2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					
		2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					
		2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					
		2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					
		2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					
		2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					
		2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION					

EGAL NAME OF			ISTEM:				1	SYSTEM 32
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf isignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether to the radio stat this by placing ive the station	y the sys be recei at the Co I sign of e the static ion's sign g a chech n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process < 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 par ed by the cable s re station is licens	adend, and (2 anna, during ca ge (v) of the g ystem as a se sed by the FC0) it can ertain st eneral ii parate :	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	
OALL SIGN		3,0	LOCATION OF STATION	UALL SIGN		3/D	LOCATION OF STATION	

Accounting Perio							FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	Zito West Holding LLC	;						3258
	SUBSTITUTE CARRIAG							
I		-	-			4	6 1	4
•	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the programm							
Substitute Carriage:					ne general in			
Special	1. SPECIAL STATEMEN	-						
Statement and	 During the accounting per 	riod, did you	ur cable syster	n carry, on a substitute ba	sis, any noni	network telev	ision prog	
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No	" leave the	rest of this na	age blank. If your answer is	"Yes " vouu	must complet	e the proc	
	, , , , , , , , , , , , , , , , , , ,				5 103, you i	nust compict	e ine prog	jram
	log in block 2.		MC					
	2. LOG OF SUBSTITUTI In General: List each subs			ata lina. Lina abbraviation	wherever	oooiblo if the	ir moonin	a io
	clear. If you need more spa				s wherever p		ii meanin	J 15
	· ·			vision program ("substitute	e program") t	hat. during th	e account	ina
	period, was broadcast by a							
	under certain FCC rules, re	gulations, o	or authorizatio	ns. See page (v) of the ge	neral instruct	ions for furth	er informa	tion.
	Do not use general categor		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I L	ove Lucy"	or
	"NBA Basketball: 76ers vs.			۵/ ۳ <u>0</u> /۱	(N.L. 11			
				er "Yes." Otherwise enter ' asting the substitute progr				
				the community to which th		censed by th	e ECC or	in
	the case of Mexican or Car						0001,	
				stem carried the substitute			with the n	nonth
	first. Example: for May 7 gi							
				ogram was carried by you				ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:01	:15 p.m. to 6	5:28:30 p.m. s	should be	
	stated as "6:00–6:30 p.m."							due el
	to delete under FCC rules			n was substituted for prog				
	was substituted for program							ogram
	effect on October 19, 1976		your system w			and regulat		
	,							1
					WHE	N SUBSTIT	UTE	
	S	UBSTITUT	E PROGRAM	1	CARRI	AGE OCCU	RRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIN		DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	TO	
						_		
						_		
						_		
						_		
					·			
						_		

Accounting Period:	2019/2		FORM S	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito West Holding LLC		S	SYSTEM ID# 3258
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amo all amounts (gross receipts) paid to your cable system by subscribers for the system's set (as identified in space E) during the accounting period. For a further explanation of how 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.	condary transm o compute this a	ission service amount, see \$ 23	
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 tha • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less tha 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	an \$527,600 n.	263,800	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that y		this six-mon	
	accounting period is \$52.00	ou must pay for		
	Line 1. Royalty fee for accounting period			
	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	2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but mo	ore than \$137,1	00)	
	1. Base amount under statutory formula	263,800.00		
	2. Enter amount of gross receipts from space K	237,081.37		
	3. Subtract line 2 from line 1	26,718.63		
	4. Enter the amount of gross receipts from space K	. \$ 2	237,081.37	
	5. Enter the amount from line 3	. \$	26,718.63	
	6. Subtract line 5 from line 4	\$ 2	210,362.74	
	7. Multiply line 6 by .005 (enter figure here)		\$	1,051.81
	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		\$	1,051.81
	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)	\$	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)	\$	1,051.81	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	. \$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3		\$	1,071.81
	Important: Your remittance must be in the form of an electronic payment paya See page i of the general instructions in the paper SA1-2 form fo	-		ghts!

Accounting Period:	2019/2		FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF	OWNER OF CABLE SYSTEM: ding LLC	SYSTEM ID# 3258
M Channels	to its subscriber1. Enter the tota system carried2. Enter the tota on which the c	You must give (1) the number of channels on which the cable system carried television broadcast stations rs, and (2) the cable system's total number of activated channels during the accounting period. al number of channels on which the cable d television broadcast stations	10 212
N Individual to Be Contacted		D BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Teri McMullen Telephone	814-260-0434
	Address 	PO Box 665 (Number, street, rural route, apartment, or suite number) Coudersport PA 16915 (City, town, state, zip) teri.mcmullen@zitomedia.com Fax (optional)	
O Certification	I, the undersign (Own (Ager in X (Offic in · I have examine	I (This statement of account must be certified and signed in accordance with Copyright Office regulations) ned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) er other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space nt of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable line 1 of space B and that the owner is not a corporation or partnership; or cer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ov line 1 of space B. Add the statement of account and hereby declare under penalty of law that all statements of fact contained hereit te, and correct to the best of my knowledge, information, and belief, and are made in good faith. ion 1001(1986)]	system as identified vner of the cable system
		Date: 02/26/2020	

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.

Atto West Holding LLC 33 State West Holding LLC Section 111(d)(1)(A), of the Copyright Act by adding the following 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 for acted 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? Mare Mare Maling Address No 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. State of the set of	ounting Period: 2019/2	FORM SA1-2E. PAGE
	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
The Stabilite Home Viewer Act of 1988 amended Title 17, section 1111(d)(1)(A), of the Copyright Act by adding the following sentence: P In determining the total number of subscribers and the gross amounts paid to the cable system for the basis exiters and amounts collected from subscribers receiving secondary transmissions pursuant to section 119.* P 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 During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. \$ No VES. Enter the total here and list the satellite carrier(s) below. \$ Name Maing Address Maing Address No could be able system of the basis of prost processing accounting period. P Nore x 1% Nore x 1% Nore x 1% Nore x 1% Line 1 Enter the total here and list the satellite carrier(s) below. x 1% Line 2 Multiply line 1 by the interest rate* and enter the sum here x 1% 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 entere here in space L (loga e) block 1, line	o West Holding LLC	325
Mailing Address Mailing Address Mailing Address INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Q Line 1 Enter the amount of late payment or underpayment. x 1% Line 2 Multiply line 1 by the interest rate* and enter the sum here - x days Line 3 Multiply line 2 by the number of days late and enter the sum here - x .000274 Line 4 Multiply line 3 by 0.00274** and enter herefin in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$. . * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing/@loc.gov. * This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address	 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 	P Special Statement Concerning Gross Receipts Exclusion
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and enter the sum here		
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in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6		_
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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.