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	ENT	OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:		
-		ansmissions by	DATE RECEIVED	AMOUNT			
Cable Syste			5/112112021125		coplicsoa@copyright.gov		
General instru			02/28/2020	\$	For additional information, contact the U.S. Copyright Office Licensing Division at:		
in the first tab	of this	workbook		ALLOCATION NUMBER	Tel: (202) 707-8150		
A	ACC	OUNTING 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							
В		Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent co		idiary of another corporation, give the full co	rporate 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 single statement of account and royalty ferences		the last day of the accounting period should ting period.	submit a		
		Check here if this is the system's first filing	. If not, enter the system's ID number	assigned by the Licensing Division.	004262		
		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 (City, town, state, zip)					
С				ntify the business and operation of the			
	name	1	2, give the mailing address of th	e system, if different from the addres	s given in space B.		
System	1	IDENTIFICATION OF CABLE SYSTEM: EASTLAND, TX					
		MAILING ADDRESS OF CABLE SYSTEM	· · · · · · · · · · · · · · · · · · ·				
	2	(Number, street, rural route, apartment, or suite nu	imber)				
		(City, town, state, zip code)					
-							
-				ne personally identifying information (PII) reque trace an individual, such as name, address a			

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.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
Name	CEQUEL COMMUNICATIONS LLC	00426
	Instructions: List each separate community served by the cable system. A "commu	
-	"a separate and distinct community or municipal entity (including unincorporated	
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.	This will serve as a form of system identification hereafter know
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.	
001104		
		OTATE
	CITY OR TOWN	STATE
First	EASTLAND	TX
Community	EASTLAND COUNTY	ТХ
	RANGER	ТХ
d Rows as Necessary		
J NOWS as Necessary		

Name E	LEGAL NAME OF OWNER OF CA									
_	CEQUEL COMMUNICAT									
_		IONS LLC							00426	
_	SECONDARY TRANSMISSION	SERVICE: SI	JBSCRI	BERS AND R	ATES					
. .	In General: The information in s					y transmission	service of	the cable		
	system, that is, the retransmission									
Secondary	about other services (including p						those exist	ting on the		
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both	•				,	ble system	broken		
scribers and	down by categories of secondary	•								
Rates	each category by counting the n			0 / 1		•				
	separately for the particular serv									
	Rate: Give the standard rate c	-	-	•				-		
	unit in which it is generally billed category, but do not include disc	· · ·	,		ny standa	rd rate variation	s within a	particular rate		
	Block 1: In the left-hand block				ries of sec	ondary transmis	sion servi	ce that cable		
	systems most commonly provide	to their subso	ribers. C	Give the numbe	er of subso	cribers and rate	for each lis	sted category		
	that applies to your system. Not			-		-				
	categories, that person or entity subscriber who pays extra for ca									
	first set" and would be counted o					a in the count ur	ider Servi	ce to the		
	Block 2: If your cable system I					service that are	different f	rom those		
	printed in block 1 (for example, ti									
	with the number of subscribers a	nd rates, in th	e right-h	and block. A tv	vo- or thre	e-word descript	ion of the s	service is		
	sufficient.				1		PL OCK	()		
	DLC	DCK 1 NO. OF					BLOCK	NO. OF		
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEF	RVICE	SUBSCRIBERS	RATE	
	Residential:									
	 Service to first set 		844	34.99						
	 Service to additional set(s) 									
	 FM radio (if separate rate) 									
	Motel, hotel									
	Commercial		72	34.99						
	Converter									
	• Residential									
	 Non-residential 									
	SERVICES OTHER THAN SEC In General: Space F calls for rat	· · · ·				ll vour cable sve	tem's serv	vices that were		
F	not covered in space E, that is, the	•	,		-	• •				
	service for a single fee. There ar									
Services	furnished at cost or (2) services									
Other Than	amount of the charge and the un		usually	billed. If any ra	ates are ch	narged on a vari	able per-p	rogram basis,		
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rat		he cable	e svstem for ea	ch of the	applicable servi	ces listed.			
Rates	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. 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) descrip									
		BLO	CK 1					BLOCK 2		
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SER	VICE	RATE	CATEGO	ORY OF SERVICE	RATE	
	Continuing Services:		Installa	tion: Non-res	idential					
	• Pay cable	19.00	• Mot	el, hotel						
	 Pay cable—add'l channel 	19.00	• Con	nmercial						
	 Fire protection 		• Pay	cable						
	 Burglar protection 		• Pay	cable-add'l ch	annel					
	Installation: Residential		• Fire	protection						
	• First set	99.00	• Burg	glar protection						
	 Additional set(s) 	25.00	Other s	ervices:						
	 FM radio (if separate rate) 		• Rec	onnect		40.00				
	Converter		• Disc	connect						
l. I	1		0.1				1		1	
			• Out	et relocation		25.00				

	LEGAL NAME OF OWNER OF	E CABLE SYSTEM		SYSTE					
Name				00					
	CEQUEL COMMUNICATIONS LLC PRIMARY TRANSMITTERS: TELEVISION								
G Primary ansmitters: Television	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do <i>not</i> list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried <i>only</i> on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community 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 (v) of the general instructions in the paper SA1-2 for								
	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. LOCA								
	KERA-1	13	E	DALLAS, TX					
	KIDZ-1	42	<u> </u>	ABILENE, TX					
ows as Necessary	КРСВ-1	17	l	SNYDER, TX					
	KRBC-1	9	N	ABILENE, TX					
				ADILLINE, IA					
	KRBC-HD1	9	N-M	ABILENE, TX					
	KRBC-HD1 KTAB-1	9 32	N-M N						
				ABILENE, TX					
	KTAB-1 KTAB-HD1	32 32	N	ABILENE, TX ABILENE, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1	32 32 12	N N-M N	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2	32 32 12 12.2	N N-M N i-M	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1	32 32 12 12.2 12	N N-M N	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1	32 32 12 12.2 12	N N-M N i-M	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					
	KTAB-1 KTAB-HD1 KTXS-1 KTXS-2 KTXS-HD1 KXVA-1	32 32 12 12.2 12.2 12 15	N N-M N I-M I	ABILENE, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX SWEETWATER, TX ABILENE, TX					

LEGAL NAME OF								SYSTEM 0042
	every radio s	tation ca	rried on a separate and discrence in the second sec					н
eceivable 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	/ the sys be recei t the Co sign of e he statio on's sign 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	od: 2019/2						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	ATIONS L	LC.					004262
	SUBSTITUTE CARRIAG							
I I		-	-					
•	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the program	•••		•				
Carriage:		-			ine general inc			
Special	1. SPECIAL STATEMEN					4		
Statement and	• During the accounting pe		ur cable syster	n carry, on a substitute ba	asis, any nonr	ietwork tei		
Program Log	broadcast by a distant sta	ition?				l	YES	× NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you r	nust comp	lete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUT	E PROGR	AMS					
	In General: List each subs				s wherever p	ossible, if t	heir meaning	g is
	clear. If you need more spa						46	·
	period, was broadcast by a			vision program ("substitute				
	under certain FCC rules, re							
	Do not use general catego							
	"NBA Basketball: 76ers vs.							
				er "Yes." Otherwise enter				
				asting the substitute prog the community to which th		oppod by	the ECC or	in
	the case of Mexican or Car						the FCC or,	In
				stem carried the substitute			ls, with the n	nonth
	first. Example: for May 7 gi		, , ,		1 0		,	
				ogram was carried by you				ately
	to the nearest five minutes	. Example:	a program car	ried by a system from 6:0	1:15 p.m. to 6	:28:30 p.m	n. should be	
	stated as "6:00–6:30 p.m."	ter "R" if the	e listed program	n was substituted for prog	ramming that	vour syste	em was requ	uired
	to delete under FCC rules							
	was substituted for program							- 3
	effect on October 19, 1976							
	s	UBSTITUI	E PROGRAM	1	WHEN SUBSTITUTE CARRIAGE OCCURRED 7. REASON			
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH		TIMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то	
							_	
							_	
							_	
							<u> </u>	
							_	,
							_	
							_	
							_	
							_	
							_	
							_	
							_	

Accounting Period:	2019/2 FORM SA1-2E.	PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTE CEQUEL COMMUNICATIONS LLC 00	M ID#)4262
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.	
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	.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	
	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 \$ 259,832.70	
	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) \$ 1,279	.33
	8. Interest charge. Enter the amount from line 4, space Q, page 8	.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8 \$ 1,279	.33
	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	
	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) \$ 1,279.33	
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 \$ 1,299	.33
	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# 004262
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 on which the cable system carried television broadcast stations and nonbroadcast services	12 242
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 3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite number) TYLER, TX 75701 (City, town, state, zip) Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional)	
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.

	2019/2	FORM SA1-2E. PAGE
	/NER OF CABLE SYSTEM:	SYSTEM ID
	IUNICATIONS LLC	00426
The Satellite I lowing senten "In det service scriber	STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- ce: ermining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- s and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
	paper SA1-2 form.	
-	counting period, did the cable system exclude any amounts of gross receipts for secondary transmissions lite carriers to satellite dish owners?	
YES. Ente	er the total here and list the satellite carrier(s) below	
Name Mailing Address	Name Mailing Address	
INTEREST		
	aplete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. ation 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
Line 2 Multip	ly line 1 by the interest rate* and enter the sum here	
Line 3 Multip	xdays Iy line 2 by the number of days late and enter the sum here	
•	ly line 3 by 0.00274** and enter here ce L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	
in spa * To view t contact t	ce L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	
in spa * To view contact f ** This is t NOTE: If you	ce L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	
in spa * To view contact f ** This is t NOTE: If you	Le L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	

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.