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 COPYRIGH	HT OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instructions are located in the first tab of this workbook	02/26/2020	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
		(/////Deried))	

A	ACCO	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2019/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
		Instructions:	
В		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.	
		4 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	66
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		WINDSTREAM MISSOURI LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		4001 RODNEY PARHAM (Number, street, rural route, apartment, or suite number)	
		LITTLE ROCK AR 72212 (City, town, state, zip)	
0	INSTR	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unl	ess these
С		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		
	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.

D       Introvertions: Lut acid separate community sevel by the cable system. A "community" is the same as a "community if" a defined in FCC rules: discrete unicorporated areas). A 12.6.8. /6.5 (diff). The first community but you lat will save as a form of system identification hereafter known discrete unicorporated areas). A 12.6.8. /6.5 (diff). The first community but you lat will save as a form of system identification hereafter known discrete unicorporated areas). A 12.6.8. /6.5 (diff). The first community but you lat will save as a form of system identification hereafter known discrete unicorporated areas). A 12.6.8. /6.5 (diff). The first community of the save as a form of system identification hereafter known discrete unicorporated areas). A 12.6.8. /6.5 (diff). The first community but you lat will save as a form of system identification hereafter known discrete unicorporated areas). A 12.6.8. /6.5 (diff). The first community of the save as a form of system identification hereafter known discrete unicorporate areas). A 10.0. /// Community is the save as a form of system identification hereafter known discrete unicorporate areas as a form of system identification hereafter known discrete unicorporate areas and incorporate areas as a form of system identification hereafter known discrete unicorporate areas as a form of system identification hereafter known discrete unicorporate areas as a form of system identification hereafter known discrete unicorporate areas as a form of system identification hereafter known discrete unicorporate areas as a form of system identification hereafter known discrete unicorporate areas as a form of system identification hereafter known discrete unicorporate areas areas as a form of system identification hereafter known discrete areas ar	Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WINDSTREAM MISSOURI LLC	SYSTEM ID# 466
First Community       MO         Add Roes is Recently       MO	Area	Instructions: List each separate community served by the cable system. A "commur "a separate and distinct community or municipal entity (including unincorporated co discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you l as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile	ity" is the same as a "community unit" as defined in FCC rules: ommunities within unincorporated areas and including single, ist will serve as a form of system identification hereafter known
Community       POLIK COUNTY       MO         Add base is kneestar		CITY OR TOWN	STATE
Ad base have <ul> <li></li></ul>			
	Community	POLK COUNTY	MO
	Add Rows as Necessary		

								FORM SA1	-2E. PAG
Name								313	1 EIVI 1
	WINDSTREAM MISSOU								-1
Е	SECONDARY TRANSMISSION	SERVICE: SL	IBSCRIE	BERS AND RA	TES				
<b>C</b>	In General: The information in s								
Secondary	system, that is, the retransmission about other services (including p								
Transmission	last day of the accounting period							ig on the	
Service: Sub-	Number of Subscribers: Both								
scribers and	down by categories of secondary								
Rates	each category by counting the nu separately for the particular serv							charged	
	Rate: Give the standard rate c							e and the	
	unit in which it is generally billed				y standa	rd rate variations	within a p	articular rate	
	category, but do not include disc				os of soo	ondony transmis	sion convic	a that cable	
	Block 1: In the left-hand block systems most commonly provide								
	that applies to your system. <b>Note</b>								
	categories, that person or entity								
	subscriber who pays extra for ca first set" and would be counted o					I in the count un	der "Servic	e to the	
	Block 2: If your cable system I					service that are	different fro	om those	
	printed in block 1 (for example, t								
	with the number of subscribers a	nd rates, in the	e right-ha	and block. A two	o- or thre	e-word descripti	on of the se	ervice is	
	sufficient.	DCK 1					BLOCK	2	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT
	Residential:		250	04 75					
	Service to first set		350	61.75					
	Service to additional set(s)								
	• FM radio (if separate rate) Motel, hotel		1	61.75					
	Commercial		1	61.75					
	Converter			01.75					
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	SIONS: RATES					
F	In General: Space F calls for rat	•	,		•				
•	not covered in space E, that is, the service for a single fee. There are								
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the un	it in which it is							
Secondary	enter only the letters "PP" in the Block 1: Give the standard rat		ha cabla	system for oac	h of the	applicable convic	oc lictod		
ransmissions: Rates	Block 2: List any services that							were not	
	listed in block 1 and for which a s	• •			-	• •			
	brief (two- or three-word) descrip	tion and includ	le the ra	e for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SERV	/ICE	RATE	CATEGO	ORY OF SERVICE	RAT
	Continuing Services:		Installa	tion: Non-resi	dential				
	• Pay cable	18.00		el, hotel					
	Pay cable—add'l channel		-	nmercial					
	Fire protection		,	cable					
	•Burglar protection		,	cable-add'l cha	annel				
	Installation: Residential			protection					
	• First set	50.00		glar protection					
	Additional set(s)     EM radio (if concrete rate)	35.00		ervices:		25.00			
	<ul> <li>FM radio (if separate rate)</li> </ul>			onnect		35.00			
	• Converter			onnoct					
	Converter			connect		25.00			
	• Converter		• Out	connect et relocation re to new addre		35.00 50.00			

	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM I
Name	WINDSTREAM MISS	DURI LLC		4
	PRIMARY TRANSMITTERS:	TELEVISION		
G smitters: levision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a <b>Substitute Basis Stations</b> basis under specific FCC r • Do <i>not</i> list the station here station was carried <i>only</i> or • List the station here, and basis. For further informati <b>Column 1:</b> List each statio multicast stream associate "WETA-2" as the same on <b>Column 2:</b> Give the chann of license. For example, V <b>Column 3:</b> Indicate in eacl educational station, by entu (for independent multicast) For the meaning of these t <b>Column 4:</b> 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	(1) stations carried only on a part- le carriage of certain network progr 1(e)(2) and (4))]; and (2) certain sta arried by your cable system on a su he Special Statement and Program d 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 over station, an independent station, or a for network multicast), "I" (for indep r "E-M" (for noncommercial educat ctions in the paper SA1-2 form. the community to which the station	time basis under ams [sections ations carried on a bstitute program Log)—if the o on some other tions. PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" ional multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	κγτν	3	N	SPRINGFIELD MO
	KYTV WEATHER	3.2	I-M	SPRINGFIELD MO
ecessary	KOLR	10	N	SPRINGFIELD MO
	KOZK	21	E	SPRINGFIELD MO
	KOZL	27	l	SPRINGFIELD MO
	KWBM	31	I	HARRISON AR
	Kepp			
	KSPR	33	I	SPRINGFIELD MO
		······································	l N	SPRINGFIELD MO OSAGE BEACH MO
	KRBK	49	I N I	OSAGE BEACH MO
		······································	I N I	
	KRBK	49	 N 	OSAGE BEACH MO
	KRBK	49	I N I	OSAGE BEACH MO
	KRBK	49	I N I	OSAGE BEACH MO
	KRBK	49	I N I	OSAGE BEACH MO
	KRBK	49	 N 	OSAGE BEACH MO
	KRBK	49	 N 	OSAGE BEACH MO
	KRBK	49	 N 	OSAGE BEACH MO
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	KRBK	49		OSAGE BEACH MO

WINDSTREA	F OWNER OF C							SYSTEM II 4
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of For detailed info paper SA1-2 for <b>Column 1:</b> lo <b>Column 2:</b> S <b>Column 3:</b> If signal, indicate <b>Column 4:</b> G	it is carried by monitoring, to prmation abou rm. dentify the call State whether t the radio stati this by placing Sive the statior	y the sys be recei at the Co I sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under ( stem whenever it is received a ved at the headend, with the pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	at the system's he system's FM ante this point, see pa sed by the cable s ne station is licen	eadend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can certain st general in eparate	be expected, tated intervals. nstructions in the. and discrete	Primary Transmitters Radio
		0/0				0/0		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
					·	r	1	

Accounting Perio	od: 2019/2						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	WINDSTREAM MISSO	URI LLC						466
	SUBSTITUTE CARRIAGI	E: SPECIA		NT AND PROGRAM LO	G			
I I	In General: In space I, identi	-	-		-	on that your ca	ahle syste	m carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN		NING SUBST	TITUTE CARRIAGE				
Special	<ul> <li>During the accounting per</li> </ul>	iod, did you	r cable system	carry, on a substitute basi	s, any nonne	work televisior	n program	1
Statement and Program Log	broadcast by a distant star	tion?					YES	× NO
Program Log	Neter If your energy is "Ne?			a blank. Kurun anaurania (	·/		-	
	Note: If your answer is "No'	, leave the	rest of this pag	e blank. If your answer is	res, you mu	ist complete th	ie progran	n
	log in block 2.		MO					
	2. LOG OF SUBSTITUTE In General: List each subst			te line. Use abbreviations	wherever nos	sible if their m	eaning is	
	clear. If you need more spa				wherever poo		iouning io	
	Column 1: Give the title	of every no	nnetwork televi	sion program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							1.
	"NBA Basketball: 76ers vs.			ibali. List specific program			Lucy of	
	Column 2: If the program	n was broad	dcast live, ente	r "Yes." Otherwise enter "N	lo."			
				sting the substitute progra				
	the case of Mexican or Can			e community to which the			SC or, in	
	Column 5: Give the mon	th and day	when your sys	tem carried the substitute	program. Use	numerals, with	h the mon	ith
	first. Example: for May 7 giv	ve "5/7."			-			
				gram was carried by your				У
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	i program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. shou	uld be	
		er "R" if the	listed program	was substituted for progra	mming that y	our system wa	s require	d
	to delete under FCC rules a	nd regulation	ons in effect du	ring the accounting period	; enter the let	ter "P" if the lis	ted progra	
	was substituted for program		our system wa	s permitted to delete unde	r FCC rules a	nd regulations	in	
	effect on October 19, 1976.							
					WHE	N SUBSTITU	ITE	
	S	UBSTITUT	E PROGRAM	1		AGE OCCUR		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. TIME FROM —	ES TO	DELETION
		165 01 140	CALL SIGN	4. STATION S LOCATION	AND DAT		10	
						-		
						_		
						_		
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						_		
						_		
						_		
						_		
						—		

Accounting Period:	2019/2			FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WINDSTREAM MISSOURI LLC			S	YSTEM ID# 466
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and all amounts (gross receipts) paid to your cable system by subscribers for the sy (as identified in space E) during the accounting period. For a further explanation 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	ystem's s on of how	econdary trans to compute thi	smission servic s amount, see	2,885.04
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 b Use block 3 if the amount of gross receipts in space K is more than \$263,800 b See page (vi) of the general instructions located in the paper SA1-2 form for more in	out less tl	han \$527,600	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,1	100 OR	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty f 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				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines	s 1 and 2		· · <u> </u>	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS	S (but m	ore than \$137,	100)	
	1. Base amount under statutory formula	5	263,800.00	-	
	2. Enter amount of gross receipts from space K	5	142,885.04	_	
	3. Subtract line 2 from line 1	5	120,914.96	_	
	4. Enter the amount of gross receipts from space K		. \$ 1	142,885.04	
	5. Enter the amount from line 3		\$ 1	120,914.96	
	6. Subtract line 5 from line 4				
	7. Multiply line 6 by .005 (enter figure here)				109.85
	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				109.85
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,8	300 (but	less than \$527	7,600)	
	1. Enter the amount of gross receipts from space K				
	2. Base amount under statutory formula			-	
	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)				
	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	o, and o .			
	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)		\$	109.85	
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			\$	129.85
	Important: Your remittance must be in the form of an electronic payme See page i of the general instructions in the paper SA1-2	ent payal	ble to the Regis	ster of Copyrig	

Accounting Period:	2019/2		FORM SA1-2E. PAGE 7
Name		F OWNER OF CABLE SYSTEM: M MISSOURI LLC	SYSTEM ID# 466
<b>M</b> Channels	<ol> <li>to its subscribe</li> <li>1. Enter the tol system carrie</li> <li>2. Enter the tol on which the</li> </ol>	You must give (1) the number of channels on which the cable system carried television broadcast stations ers, and (2) the cable system's total number of activated channels during the accounting period. tal number of channels on which the cable ed television broadcast stations	9 47
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom at about this statement of account.)	
for Further Information	Name	JIM POWELL Telephone 706.89	06.1089
	Address	1839 HIGHWAY 17 N (Number, street, rural route, apartment, or suite number)	
		YOUNG HARRIS GA 30582 (City, town, state, zip)	
	Email	SANDRA BLADE@WINDSTREAM.COM Fax (optional) 330.486.3504	
O Certification		<b>N</b> (This statement of account must be certified and signed in accordance with Copyright Office regulations) Ined, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	(Own	ner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
	i X (Off	ent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as i in line 1 of space B and that the owner is not a corporation or partnership; or ficer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the o in line 1 of space B.	
	<ul> <li>I have examine are true, completing</li> </ul>	' ed the statement of account and hereby declare under penalty of law that all statements of fact contained herein ete, and correct to the best of my knowledge, information, and belief, and are made in good faith. tion 1001(1986)]	
		X /s/ TIMOTHY P LOKEN	
		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: <b>TIMOTHY P LOKEN</b>	
		Title: DIRECTOR-REGULATORY REPORTING (Title of official position held in corporation or partnership)	
		Date: FEBRUARY 25, 2020	

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P Special Statemen Concerning Gros Receipts Exclusion	le system for the basic rstem shall not include sub- ursuant to section 119." neral instructions r secondary transmissions	AM MISSOURI LLC AL STATEMENT CONCERNING GROSS RECEIPTS EXC ellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), entence: In determining the total number of subscribers and the gross amounts p ervice of providing secondary transmissions of primary broadcast transmicribers and amounts collected from subscribers receiving secondary transmised are information on when to exclude these amounts, see the note on page in the paper SA1-2 form. The accounting period, did the cable system exclude any amounts of gross a satellite carriers to satellite dish owners?  S. Enter the total here and list the satellite carrier(s) below. Name	Satellite Home Viewer Act of 1988 amended Ti g sentence: "In determining the total number of subscribe service of providing secondary transmissions scribers and amounts collected from subscri tore information on when to exclude these amo ad in the paper SA1-2 form. g the accounting period, did the cable system by satellite carriers to satellite dish owners?
P Special Statemen Concerning Gros	le system for the basic rstem shall not include sub- ursuant to section 119." neral instructions r secondary transmissions	AL STATEMENT CONCERNING GROSS RECEIPTS EXC ellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), entence: In determining the total number of subscribers and the gross amounts p ervice of providing secondary transmissions of primary broadcast transmicribers and amounts collected from subscribers receiving secondary tra- e information on when to exclude these amounts, see the note on page n the paper SA1-2 form. The accounting period, did the cable system exclude any amounts of gross a satellite carriers to satellite dish owners?	<b>CIAL STATEMENT CONCERNING G</b> atellite Home Viewer Act of 1988 amended Ti g sentence: "In determining the total number of subscribe service of providing secondary transmissions scribers and amounts collected from subscri nore information on when to exclude these amo ed in the paper SA1-2 form. g the accounting period, did the cable system by satellite carriers to satellite dish owners?
Special Statemer Concerning Gros	le system for the basic rstem shall not include sub- ursuant to section 119." neral instructions r secondary transmissions	ellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), entence: In determining the total number of subscribers and the gross amounts p ervice of providing secondary transmissions of primary broadcast transmis cribers and amounts collected from subscribers receiving secondary tra- e information on when to exclude these amounts, see the note on page in the paper SA1-2 form. The accounting period, did the cable system exclude any amounts of gross a satellite carriers to satellite dish owners?	Satellite Home Viewer Act of 1988 amended Ti g sentence: "In determining the total number of subscribe service of providing secondary transmissions scribers and amounts collected from subscri ore information on when to exclude these amo ed in the paper SA1-2 form. g the accounting period, did the cable system by satellite carriers to satellite dish owners?
Q	payment or underpayment.	Name	ES. Enter the total here and list the satellite ca
Q	payment or underpayment.		
Q	payment or underpayment.		Address
Q	payment or underpayment.		
		EST ASSESSMENT st complete this worksheet for those royalty payments submitted as a re xplanation of interest assessment, see page (viii) of the general instruct	
Interest Assessme			
		Enter the amount of late payment or underpayment	Enter the amount of late payment or underp
-	x		
-		Multiply line 1 by the interest rate* and enter the sum here	. Multiply line 1 by the interest rate* and ente
	xdays		
_		Multiply line 2 by the number of days late and enter the sum here	Multiply line 2 by the number of days late ar
	X 0.00274		
	-		
-	(interest charge)		
	r further assistance please	view the interest rate chart click on <i>www.copyright.gov/licensing/interes</i> ntact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
	te.	is is the decimal equivalent of 1/365, which is the interest assessment f	This is the decimal equivalent of 1/365, which
		f you are filing this worksheet covering a statement of account already s v the owner, address, first community served, ID number, and accountir	
			r
			•
			ess
			ISS
		er	mber community served
-	r further assistance please te. ne Copyright Office, please	n space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 view the interest rate chart click on <i>www.copyright.gov/licensing/interes</i> ntact the Licensing Division at (202) 707-8150 or licensing@loc.gov. his is the decimal equivalent of 1/365, which is the interest assessment f f you are filing this worksheet covering a statement of account already s	To view the interest rate chart click on <i>www.cc</i> contact the Licensing Division at (202) 707-81 This is the decimal equivalent of 1/365, which E: If you are filing this worksheet covering a sta

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