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

Return completed workbook

STATEM	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	by email to:
	ary Transmissions by	DATE RECEIVED	AMOUNT	
General instru	ems (Short Form) actions are located of this workbook	2/25/2020	<u>coplicsoa@loc.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150	
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y		
Accounting Period	2019/2	Barcode Data Filing Period (optiona	Period 2 = July 1 - December 31 I - see instructions)	
	Instructions:			
В	Give the full legal name of the owner of t of the subsidiary, not that of the parent c		diary of another corporation, give the full co	rporate title
Owner	List any other name or names under whic	h the owner conducts the business of t	he cable system.	
	If there were different owners during the single statement of account and royalty f		the last day of the accounting period should sting period.	submit a
	Check here if this is the system's first filin	g. If not, enter the system's ID number	assigned by the Licensing Division.	63740
	LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM		
	Zito West Holding LLC			
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFERENT)	
	Zito Media			
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
	PO Box 665 (Number, street, rural route, apartment, or suite r	number)		
	Coudersport, PA 16915 (City, town, state, zip)			
<u> </u>	INSTRUCTIONS: In line 1, give any busin	ness or trade names used to ider	ntify the business and operation of the	e system unless these
С	names already appear in space B. In line	2, give the mailing address of th	e system, if different from the address	s given in space B.
System	IDENTIFICATION OF CABLE SYSTEM:			
	Zito Media - Maringouin	-		
	MAILING ADDRESS OF CABLE SYSTEM	Л:		
	2 (Number, street, rural route, apartment, or suite r	number)		
	(City, town, state, zip code)			
L				

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 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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID:
Name	Zito West Holding LLC	6374
D	Instructions: List each separate community served by the cable system. A "commun "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 li as the "first community." Please use it as the first community on all future filings.	ity" is the same as a "community unit" as defined in FCC rules: mmunities within unincorporated areas and including single,
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	nome parks should be reported in parentheses below the
Area Served	identified city.	ione parks should be reported in parentileses below the
	CITY OR TOWN	STATE
First	Maringouin	LA
Community	Livonia	LA
	Fordoche	LA
dd Rows as Necessary	Iberville	LA
	Point Coupee	LA

								FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					515	TEM II 6374
	Zito West Holding LLC								037
-	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCRI	BERS AND RA	TES				
E	In General: The information in s			-		•			
Cocondom	system, that is, the retransmission								
Secondary Transmission	about other services (including p last day of the accounting period						those exist	ing on the	
Service: Sub-	Number of Subscribers: Both						ble system	, broken	
scribers and	down by categories of secondar	y transmission	service.	In general, you	can com	npute the numb	er of subsc	ribers in	
Rates	each category by counting the n		0	0,0		•		charged	
	separately for the particular serv Rate: Give the standard rate of							re and the	
	unit in which it is generally billed	-	-	•					
	category, but do not include disc	· ·	,		,				
	Block 1: In the left-hand block			-		•			
	systems most commonly provide								
	that applies to your system. 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 the	e right-h	and block. A two	o- or thre	e-wora descrip	tion of the s	service is	
		OCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:								
	Service to first set		365	28.45					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC In General: Space F calls for rai						stom's con	views that work	
F	not covered in space E, that is, t	•	,						
	service for a single fee. There are					,			
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the ur		usually	billed. If any rat	es are ch	narged on a var	iable per-p	rogram basis,	
Secondary Transmissions:	enter only the letters "PP" in the Block 1: Give the standard rate		the cable	system for eac	h of the	applicable servi	ces listed		
Rates	Block 2: List any services that							were not	
	listed in block 1 and for which a				hed. List	these other ser	vices in the	e form of a	
	brief (two- or three-word) descrip	otion and inclue	de the ra	te for each.			1		
		BLO	CK 1			-		BLOCK 2	-
	CATEGORY OF SERVICE	RATE		ORY OF SERV		RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services:			tion: Non-resid	iential				
	• Pay cable	17.95		el, hotel					
	Pay cable—add'l channel Eiro protoction		_	nmercial					
	Fire protection			cable	nnel				
	•Burglar protection		· ·	cable-add'l cha protection					
	First set	30.00		•					
	Additional set(s)	30.00		glar protection ervices:					
	• FM radio (if separate rate)			onnect		30.00			-
			- 460	UTHELI		30.00			
	, , ,		• Diec						
	• Converter			connect		20.00			
	, , ,		• Outl			30.00 30.00			

	LEGAL NAME OF OWNER OF			SYSTEM
Name	Zito West Holding LL			63
	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 station 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, i 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- ne carriage of certain network progra 1(e)(2) and (4))]; and (2) certain state arried by your cable system on a su ne Special Statement and Program d both on a substitute basis and also see page (v) of the general instruct program services such as HBO, ESI e-air designation. For example, repo- vision station for broadcasting over station, an independent station, or a for network multicast), "I" (for indep or "E-M" (for noncommercial education totions 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
	WAFB	9.1	Ν	Baton Rouge, LA
	WBRZ	2.1	Ν	Baton Rouge, LA
	WGMB	44.1	N	Baton Rouge, LA
	WGMB WLPB	44.1 27	N E	
				Baton Rouge, LA
	WLPB	27	E	Baton Rouge, LA Baton Rouge, LA
	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA
Rows as Necessary	WLPB WVLA	27 33.1	E N	Baton Rouge, LA Baton Rouge, LA Baton Rouge, LA

ounting Period:	2019/2			FORM SA1-2E. PAG
Namo	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	Zito West Holding LL	C		637
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable syster	m during the accounting period, except	g translator stations and low power tele of (1) stations carried only on a part-tin	ne basis under
Primary ransmitters:	76.59(d)(2) and (4), 76.61(e substitute program basis, as	e)(2) and (4), or 76.63 (referring to 76. s explained in the next paragraph.	the carriage of certain network program 61(e)(2) and (4))]; and (2) certain station	ons carried on a
Television	Substitute Basis Stations basis under specific FCC ru • Do not list the station here station was carried only on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location	With respect to any distant stations of iles, regulations, or authorizations: a in space G—but do list it in space I (a substitute basis. also in space I, if the station was carried in concerning substitute basis stations i's call sign. <i>Do not</i> report origination I with a station according to its over-the he form. I number the FCC assigned to the tel RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, list	carried by your cable system on a subst the Special Statement and Program Lo ed both on a substitute basis and also s, see page (v) of the general instructio program services such as HBO, ESPN le-air designation. For example, report evision station for broadcasting over th a station, an independent station, or a r (for network multicast), "I" (for indeper or "E-M" (for noncommercial education uctions in the paper SA1-2 form. at the community to which the station is the community with which the station is	og)—if the on some other ons. N, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

EGAL NAME OF		JADLE S	ISTEM.					SYSTEM 637
	every radio s	tation 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 ignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether t the radio stati this by placing vive the station	/ the sys be recei t the Cc sign of e he static 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 opyright Office regulations on t each station carried. In is AM or FM. hal 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 enna, during co ge (v) of the g system as a se sed by the FC	?) it can ertain st eneral i eparate	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	
							·	
							·	

Accounting Perio							FOR	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF		STEM:					SYSTEM ID#
Name	Zito West Holding LLC							63740
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LC	G			
	In General: In space I, ident	tifv everv no	nnetwork telev	ision program, broadcast b	v a distant sta	ition, that vo	our cable svs	tem carried on a
	substitute basis during the a	accounting p	eriod, under sp	pecific present and former F	CC rules, reg	ulations, or	authorizatio	ns. For a further
Substitute	explanation of the programm	ning that mu	st be included	in this log, see page (v) of t	he general in	structions ir	the paper S	SA1-2 form.
Carriage: Special	1. SPECIAL STATEMEN	-						
Statement and	 During the accounting per 		ur cable syste	m carry, on a substitute ba	isis, any noni	network tel	evision prog	
Program Log	broadcast by a distant sta	tion?					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 i	must comp	lete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs				s wherever p	ossible, if t	heir meaning	g is
	clear. If you need more spa Column 1: Give the title			vision program ("substitute	e program") t	hat during	the account	tina
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general categor "NBA Basketball: 76ers vs.		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I	Love Lucy"	or
			dcast live, ent	er "Yes." Otherwise enter	"No."			
	Column 3: Give the call	sign of the	station broadd	casting the substitute prog	ram.			
	Column 4: Give the broat the case of Mexican or Car			the community to which th			the FCC or,	in
				stem carried the substitute			ls. with the r	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 t	5:28:30 p.m	i. snould be	
		ter "R" if the	e listed prograr	n was substituted for prog	ramming tha	t your syste	em was <i>requ</i>	lired
	to delete under FCC rules							ogram
	was substituted for programe ffect on October 19, 1976		your system w	as permitted to delete und	ter FCC rules	s and regula	ations in	
								Γ
	6			A		N SUBSTI		7. REASON FOR
		2. LIVE?	E PROGRAM 3. STATION'S		5. MONTH	AGE OCC		DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY		— то	
							_	
								"
							<u> </u>	
							<u> </u>	
							_	
							_	
							_	
							<u> </u>	"
							<u> </u>	
							_	
							_	
								"
							_	
							_	
							_	
								+
							-	
1	I	1	г	1 	1 /	г		7

Accounting Period:	2019/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito West Holding LLC	S	YSTEM ID# 63740
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmit (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ssion service mount, see	9,934.41 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	63,800	
	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 t	his six-mon	
	accounting period is \$52.00 Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1		
	1. Base amount under statutory formula		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	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 Free and			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!

Accounting Period:	2019/2		FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF C Zito West Hold	DWNER OF CABLE SYSTEM: Jing LLC	SYSTEM ID# 63740
M Channels	to its subscribers 1. Enter the total system carried 2. Enter the total on which the ca	ou must give (1) the number of channels on which the cable system carried television broadcast stations s, and (2) the cable system's total number of activated channels during the accounting period. I number of channels on which the cable television broadcast stations	6 126
N Individual to Be Contacted		DEE 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 Email	PO Box 665 (Number, street, rural route, apartment, or suite number) Coudersport PA 16915 (City, town, state, zip) terri.mcmullen@zitomedia.com Fax (optional) (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
O Certification		ed, 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	B; or
	in X (Offic in • I have examined	t 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 eer 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. d the statement of account and hereby declare under penalty of law that all statements of fact contained herei e, and correct to the best of my knowledge, information, and belief, and are made in good faith. on 1001(1986)]	vner of the cable system
		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: James Rigas Title: President (Title of official position held in corporation or partnership) Date: 02/26/2020	
	ļ		

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.

ito West Holding LLC 63 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 folous service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers neceiving secondary transmissions pursuant to section 119.* P 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.* P To more information on when to exclude these amounts, see the note on page (vii) of the general instructions coacted in the paper SA1-2 form. P Image Image Image P Image Image Image P Image Image Image Image Image P Image Ima		FORM SA1-2E. PAGE
	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
The Stabilite Home Viewar Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Copyright Act by adding the following serimence: Image: Copyright Act by adding the following series and and the following series act following series act adding the fo	o West Holding LLC	6374
Mailing 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 submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and enter the sum here is a for the payment or underpayment. Image: Complete this worksheet for those royalty payment or underpayment for the payment or underpayment for the payment or underpayment or underpayment for the payment or underpayment or underpayment or underpayment or underpayment or underpayment for one day late. Image: Complete 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. Complete the payment or underpayme		
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 submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete this worksheet for those royalty payments and the paper SA1-2 form. Image: Complete the payment or underpayment for the paper SA1-2 form. Image: Complete the payment for the paper SA1-2 form. Image: Complete the payment for the payment form. Image: Complete the payment fo	INTEREST ASSESSMENT	
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	You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q
Line 2 Multiply line 1 by the interest rate* and enter the sum here		Interest Assessmen
Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 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 - * 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 ID number		
 in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 <u>\$</u> (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@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 ID number 		
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 ID number ID number	x days Line 3 Multiply line 2 by the number of days late and enter the sum here	·
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 ID number	x days Line 3 Multiply line 2 by the number of days late and enter the sum here	·
list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number	x days Line 3 Multiply line 2 by the number of days late and enter the sum here	·
Address ID number	x	·
Address ID number	x	·
	Line 3 Multiply line 2 by the number of days late and enter the sum here	
	x	
First community served	x	
Accounting period	x	

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.