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 Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
8/28/20	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

### coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

_						
A	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))				
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31				
Accounting		20201 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.				
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				
		ULTRA COMMUNICATIONS GROUP, LLC				
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)				
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM				
		210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number)				
		602 (City, town, state, zip)				
	<u> </u>	<u> </u>				
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s 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	1	IDENTIFICATION OF CABLE SYSTEM:				
		ULTRA COMMUNICATIONS GROUP, LLC D/B/A NEWWAVE COMMUNICATIONS				
		MAILING ADDRESS OF CABLE SYSTEM:				
	2	3759 OLD STERLINGTON RD (Number, street, rural route, apartment, or suite number)				
		MONROE, LA 71203 (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.

ccounting Period:		FORM SA1-2E. PAGE 1						
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID:						
Name	ULTRA COMMUNICATIONS GROUP, LLC	2342						
	Instructions: List each separate community served by the cable system. A							
D	"a separate and distinct community or municipal entity (including unincorpdiscrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community as the "first community." Please use it as the first community on all future	porated communities within unincorporated areas and including single, that you list will serve as a form of system identification hereafter know filings.						
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, cidentified city.	or mobile nome parks should be reported in parentheses below the						
	CITY OR TOWN STATE							
First	LELAND	MS						
Community								
ld Rows as Necessary								

Accounting Period: 2020/1

FORM SA1-2E. PAGE 2.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 23427

## **ULTRA COMMUNICATIONS GROUP, LLC**

# Ε

### Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

**Number of Subscribers:** Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

**Rate:** Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

**Block 1:** In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

**Block 2:** If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BL	OCK 1	BLOCK 2			
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
<ul> <li>Service to first set</li> </ul>	344	\$40.00			
<ul> <li>Service to additional set(s)</li> </ul>					
<ul> <li>FM radio (if separate rate)</li> </ul>					
Motel, hotel					
Commercial	7	\$40.00			
Converter					
Residential					
Non-residential					
		T		· [	1

# F

### Services Other Than Secondary Transmissions: Rates

## SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

**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.

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	\$9-\$18.00	Motel, hotel		EXPANDED BASIC	39.00
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial		DIGITAL FAM PLUS	13.00
Fire protection		• Pay cable		STARZ SUPER PAK	18.00
•Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>		SHOWTIME UNLTD	18.00
Installation: Residential		Fire protection		HBO THE WORKS	27.00
• First set	\$40.00	Burglar protection		CINEMAX	13.00
<ul> <li>Additional set(s)</li> </ul>		Other services:		HBO	18.00
• FM radio (if separate rate)		Reconnect	\$90.00		
Converter		Disconnect			
		<ul> <li>Outlet relocation</li> </ul>			
		<ul> <li>Move to new address</li> </ul>	\$45.00		

Accounting Period: 2020/1 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 23427

## **ULTRA COMMUNICATIONS GROUP, LLC**

G

### Primary Transmitters: Television

PRIMARY TRANSMITTERS: 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, *except* (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 *not* 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 *only* 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. *Do not* 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 (iv) of the general instructions in the paper SA1-2 form.

**Column 4:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Add Rows as Necessary

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WNBD	33	N	GRENADA, MS
WXVT	15	N	CLEVELAND, MS
WABG	32	N	GREENWOOD, MS
WMAO	25	E	JACKSON, MS
WABG-2	32	I-M	GREENWOOD, MS

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 23427

## **ULTRA COMMUNICATIONS GROUP, LLC**

### PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

- Column 1: Identify the call sign of each station carried.
- Column 2: State whether the station is AM or FM.
- **Column 3:** If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.
- **Column 4:** Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

0411 01611		0/5	LOGATION OF STATISM	0411 01011	A B 4	0/0	LOCATION OF STATION
CALL SIGN	AM or FM	5/0	LOCATION OF STATION	CALL SIGN	AW or FM	S/D	LOCATION OF STATION
	<del> </del>	<del> </del>					
	ļ	ļ					
		ļ					
		l					
	<b></b>	<del> </del>					
	<del> </del>	<del> </del>					
	<b> </b>	<b> </b>					
	ļ	ļ					
		<del> </del>					
		<del> </del>	·				
		<u> </u>				·	
	I						
	<b></b>	<del> </del>					
	<del> </del>	<del> </del>	<del> </del>				
	<del> </del>	ļ					
		ļ					
	1						
	<b></b>	<del> </del>					
	<del> </del>	<del> </del>					
		ļ					
		ļ					
	<b></b>	<del> </del>					
	<del> </del>	<del> </del>					
	<del> </del>	ļ					
		ļ					
		<del> </del>					
	<b></b>	<del> </del>					
	ļ	ļ					
		1					
	<del> </del>	<del> </del>					
	l	ļ					
		ļ					
		L					
	<b>!</b>	l					

Accounting David	.d. 2020/1						FORM CALCE DAGE 5	
Accounting Perio	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				FORM SA1-2E. PAGE 5.  SYSTEM ID#	
Name	ULTRA COMMUNICAT						23427	
	SUBSTITUTE CARRIAGE	_	-					
I Substitute	In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried of substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a furth explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.							
Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE							
Special	During the accounting per	asis. anv nor	network televisio	n program				
Statement and Program Log	broadcast by a distant station?							
Frogram Log	Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program							
		, leave the	rest of this pa	ge blank. II your answer	is res, you	musi complete in	ie program	
	log in block 2.  2. LOG OF SUBSTITUTE	PROGRA	MS					
	In General: List each subst			ate line. Use abbreviatior	ns wherever p	oossible, if their m	neaning is	
	clear. If you need more spa							
	<b>Column 1:</b> Give the title period, was broadcast by a							
	under certain FCC rules, re	gulations, c	or authorization	ns. See page (v) of the g	eneral instruc	tions for further in	nformation.	
	Do not use general categor "NBA Basketball: 76ers vs.		vies" or "bask	etball." List specific progr	ram titles, for	example, "I Love	Lucy" or	
	Column 2: If the program		dcast live. ente	er "Yes." Otherwise enter	· "No."			
	Column 3: Give the call	sign of the	station broadc	asting the substitute pro	gram.			
	Column 4: Give the broathe case of Mexican or Car		,	•		•	CC or, in	
	Column 5: Give the mor						h the month	
	first. Example: for May 7 giv							
	<b>Column 6:</b> State the time to the nearest five minutes.			, ,	•		,	
	stated as "6:00–6:30 p.m."	<u> Дхатіріо.</u> с	a program oun	ica by a system from c.c	71.10 p.111. to	0.20.00 p.m. onoc		
	Column 7: Enter the lett							
	to delete under FCC rules a was substituted for program							
	effect on October 19, 1976.		, ,	•		J		
					\\\\L	EN SUBSTITUTE	<u> </u>	
	SI	JBSTITUT	E PROGRAM		CARRIAGE OCCURRED 7. REASON			
	TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	DELETION		
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	ТО	
						_		
						-		
						- <del> </del>		
						- <del> </del>		
					.	ļ		
						_		
					7			

R Gross Receipts  GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the tall amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission so (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, 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.  COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 2 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 \$263,800 because of the amount of gross receipts in space K is more than \$137,100 but less than \$527,600 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-accounting period is \$52.00	74,976.32 17888.11
Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the tall amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission s (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, 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.  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 \$263,800 but less than \$527,600 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-accounting period is \$52.00	74,976.32 17888.11
Instructions: To compute the royalty fee you owe:  Copyright Royalty Fee  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 \$263,800  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.  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-accounting period is \$52.00	
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-accounting period is \$52.00	mon
accounting period is \$52.00	mon
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 \$137,100)	
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)	
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)	9.00
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)	2.00
Due	5.00
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 Register of C See page i of the general instructions in the paper SA1-2 form for more information.	copyrights!

Accounting Period:	2020/1				FORM SA1-2E. PAGE 7
Name	-	OWNER OF CABLE SYSTEM: IUNICATIONS GROUP, LL	.c		SYSTEM ID# 23427
M Channels	to its subscriber  1. Enter the tota system carried  2. Enter the tota on which the c	s, and (2) the cable system's all number of channels on which television broadcast stations all number of activated channels able system carried television	ls	accounting period.	105
N Individual to Be Contacted		D BE CONTACTED IF FURTH about this statement of account	HER INFORMATION IS NEEDED (Identify annt.)	individual to whom	
for Further Information	Name	EMERSON YEARWO	OOD	Telephone	602-364-6195
	Address	210 E. EARLL DRIVE (Number, street, rural route, apart PHOENIX, AZ 85012 (City, town, state, zip)  EMERSON.YE	ment, or suite number)	Fax (optional) 602-364-601	3
				······ / / / ···················	
O Certification	I, the undersign  (Owne  (Agen in  X (Offic in  I have examine	er other than corporation or part of owner other than corporation of line 1 of space B and that the corporation 1 of space B.  d the statement of account and te, and correct to the best of m	nust be certified and signed in accordance with one, but only one, of the boxes.)  partnership) I am the owner of the cable systemation or partnership) I am the duly authorized owner is not a corporation or partnership; or (if a corporation) or a partner (if a partnership) of the hereby declare under penalty of law that all styknowledge, information, and belief, and are not a corporation.	m as identified in line 1 of space agent of the owner of the cable of the legal entity identified as over	system as identified wner of the cable system
		Typed or printed  Title:  (Title of o	X /s/ RAYMOND STORCK  Enter an electronic signature on the line above Enter signature using an "/s/ signature" (e.g., /sd. name: RAYMOND STORCK  VICE PRESIDENT  Ifficial position held in corporation or partnership)		
		Date:		August 28, 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.

counting Period: 2020/1	FORM SA1-2E. PAGE 8.
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
LTRA COMMUNICATIONS GROUP, LLC	23427
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 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."	P Special Statement Concerning Gross Receipts Exclusion
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.	Receipts Exclusion
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?  X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address Name Mailing Address	<b>-</b>
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
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	-
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 <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . 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	
ID number First community served	"
Accounting period	"

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.

U.S. Copyright Office Form SA1-2E Short Form (Rev. 05-17)