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.

STATEMENT OF ACCOUNT

for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

## SA1-2E Short Form

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

Α	CCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
	2020/2Period 1 = January 1 - June 30Period 2 = July 1 - December 31
	Barcode Data Filing Period (optional - see instructions)
Accounting	
Accounting Period	
В	Instructions: 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
	Central Telcom Services LLC
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM
	P.O. Box 7
	(Number, street, rural route, apartment, or suite number) Fairview, Ut 84629-0007
	(City, town, state, zip)
С	<b>ISTRUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these ames 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:
	MAILING ADDRESS OF CABLE SYSTEM:
	2 (Number, street, rural route, apartment, or suite number)
	(City, town, state, zip code)
Privacy Act Notice	ection 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

1-27-21

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 suffciency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
	Central Telcom Services LLC	2912
D	Instructions: List each separate community served by the cable system. A "commu "a separate and distinct community or municipal entity (including unincorporated or 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. Note: Entities and properties such as hotels, apartments, condominiums, or mobile	ommunities within unincorporated areas and including single, list will serve as a form of system identification hereafter know
Area Served	identified city.	nome parks should be reported in parentileses below the
	CITY OR TOWN	STATE
First	Delta	Utah
Community	Lynndyl	Utah
	Hinckley	Utah
dd Rows as Necessary		

								FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:	:					SYS	
	Central Telcom Service	s LLC							2912
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCR	IBERS AND R	ATES				
Ε	In General: The information in s	•		•		•			
Secondary	system, that is, the retransmissi about other services (including particular services)					•			
Transmission	last day of the accounting period							sting on the	
Service: Sub-	Number of Subscribers: Both	•					•		
scribers and Rates	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								
Rales	separately for the particular serv		-	•••		•	-	scharged	
	Rate: Give the standard rate of	charged for eac	ch cate	gory of service.	Include b	oth the amount	of the cha	•	
	unit in which it is generally billed	· · ·		,		ard rate variation	ns within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block					condarv transmi	ssion serv	ice that cable	
	systems most commonly provide			-		•			
	that applies to your system. Not			-		-			
	categories, that person or entity								
	subscriber who pays extra for ca first set" and would be counted of					a in the count u	nder Serv	ice to the	
	Block 2: If your cable system	•			• • •	n service that ar	e different	from those	
	printed in block 1 (for example, t					•			
	with the number of subscribers a sufficient.	and rates, in th	e right-	hand block. A t	wo- or thre	ee-word descrip	tion of the	service is	
		OCK 1					BLOCK	< 2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIBI		RATE	CAT	EGORY OF SEF	NO. OF SUBSCRIBERS	RAT	
	Residential:	00000Kibi			0/(II		(TIOL	GOBGORIBERG	
	Service to first set		39	32.95	Expand	ded		28	60.
	<ul> <li>Service to additional set(s)</li> </ul>								
	• FM radio (if separate rate)								
	Motel, hotel		7	32.95				7	60.
	Commercial								
	Converter							35	-
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC		NSMIS		s				
-	In General: Space F calls for ra					all your cable sy	stem's ser	vices that were	
F	not covered in space E, that is,					•	•		
Services	service for a single fee. There a furnished at cost or (2) services		-		-		- · ·	,	
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the	rate column.		-		-		-	
ransmissions: Rates	<b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed. <b>Block 2:</b> List any services that your cable system furnished or offered during the accounting period that were not								
Rates	<b>BIOCK 2:</b> 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.								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE			GORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RAT
	Continuing Services:		Install	ation: Non-res	idential				
	• Pay cable	17.95		tel, hotel		Varies			
	<ul> <li>Pay cable—add'l channel</li> </ul>	16.95		mmercial		-			
	Fire protection	-		y cable	-	-			
	•Burglar protection	-		y cable-add'l ch	nannel	-			
	Installation: Residential			e protection		-			
	• First set	100.00		rglar protection		-			
	Additional set(s)	29.95		services: connect		20.05			
		- /	• Ke	CONNECT		29.95			
	• FM radio (if separate rate)		• Di-						
	Converter	-		connect		-			
		-	• Ou		955	- 49.95 29.95			

				SYSTEM						
Name	LEGAL NAME OF OWNER OF			291						
	PRIMARY TRANSMITTERS:		<ul> <li>It is a station and law managements</li> </ul>	· · · · · · · · · · · · · · · · · · ·						
G		ntify every television station (including n during the accounting period, except	-	,						
-	FCC rules and regulations i	n effect on June 24, 1981, permitting	the carriage of certain network progra	ams [sections						
rimary Ismitters:		e)(2) and (4), or 76.63 (referring to 76. s explained in the next paragraph.	61(e)(2) and (4))]; and (2) certain sta	ations carried on a						
lsmitters: levision		s explained in the next paragraph. : With respect to any distant stations of	carried by your cable system on a su	bstitute program						
		lles, regulations, or authorizations:	(the Oracial Otatamant and Dragram	1 \ :{ 4b						
	• Do not list the station here station was carried only on	e in space G—but do list it in space I ( a substitute basis.	the Special Statement and Frogram	Log)—if the						
	• List the station here, and a	also in space I, if the station was carrie								
		n concerning substitute basis stations n's call sign. <i>Do not</i> report origination								
		with a station according to its over-th		-						
	"WETA-2" as the same on t		ovision station for broadcasting over	the air in its community						
		el number the FCC assigned to the tel RC is channel 4 in Washington, D.C.								
	Column 3: Indicate in each	case whether the station is a network	-							
	-	ring the letter "N" (for network), "N-M" "E" (for noncommercial educational),	, , , ,	,						
		erms, see page (iv) of the general insti	•							
		n of each station. For U.S. stations, lis	-	-						
	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. LOCATION OF STATION						
	κυτν	2	N	Salt Lake City, Utah						
	κτνχ	4	Ν	Salt Lake City, Utah						
vs as Necessary	KSL	5	Ν	Salt Lake City, Utah						
nows as necessary	1	_	_							
	KUED	7	E	Salt Lake City, Utah						
	KUED KUEN	9	E	Salt Lake City, Utah Ogden, Utah						
	KUEN	9		Ogden, Utah						
	KUEN KSTU KJZZ	9 13 14		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ	9 13 14		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						
	KUEN KSTU KJZZ KUPX	9 13 14 16		Ogden, Utah Salt Lake City, Utah Salt Lake City, Utah Provo, Utah						

LEGAL NAME OF								SYSTEM I 291
	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 b monitoring, to ormation abou rm. dentify the call state whether t the radio stat this by placing Sive the station	y the sys be rece at the Co l sign of the static ion's sig g a chec n's locati	I-Band FM Carriage: Under C stem whenever it is received a ived at the headend, with the opyright 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	t the system's he system's FM ante this point, see pa ed by the cable s he station is licent	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain s general i eparate	be expected, tated 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	
		<b>-</b>				·		
						·		
		<b>-</b>				·		
						·		
						·		
						·		
		<b>-</b>						
						·		

Accounting Perio	od: 2020/2					FOF	RM SA1-2E. PAGE 5.
News	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:				SYSTEM ID#
Name	Central Telcom Servic	es LLC					29121
	SUBSTITUTE CARRIAGE	E: SPECIA		NT AND PROGRAM LO	G		
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	ccounting p	eriod, under sp	ecific present and former F	CC rules, reg	ulations, or authorizatio	ons. For a further
Carriage:	1. SPECIAL STATEMEN	•					
Special	During the accounting per				sis any nonr	network television prov	nram
Statement and	0 01			in carry, on a substitute be	1313, arry 110111		
Program Log	broadcast by a distant sta					YES	NO
	Note: If your answer is "No	", leave the	e rest of this pa	ge blank. If your answer i	s "Yes," you r	must complete the pro	ogram
	log in block 2. 2. LOG OF SUBSTITUTE						
	In General: List each subs clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re	titute progra ace, please of every no distant sta gulations, o	am on a separ add additional onnetwork telev tion and that yo or authorization	rows to the tables. vision program ("substitut our cable system substitu ns. See page (v) of the ge	e program") t ted for the pro	hat, during the accour ogramming of another ions for further inform	nting station ation.
	Column 3: Give the call	Bulls." n was broa sign of the	dcast live, ento station broadc	etball." List specific progr er "Yes." Otherwise enter asting the substitute prog the community to which th	"No." ram.		
	first. Example: for May 7 giv Column 6: State the tim	nth and day ve "5/7." es when th	when your system when your	stem carried the substitut	e program. Us Ir cable syste	se numerals, with the m. List the times accu	rately
	to delete under FCC rules a was substituted for program	er "R" if the and regulat nming that	e listed progran ions in effect d	n was substituted for prog uring the accounting perio	ramming that od; enter the l	t your system was <i>req</i> etter "P" if the listed p	uired
	effect on October 19, 1976		E PROGRAM	1		N SUBSTITUTE	7. REASON FOR
	1. TITLE OF PROGRAM		3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		DELETION
						_	
						_	
							****
					]	_	

Accounting Period:	2020/2	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Central Telcom Services LLC	SYSTEM ID# 29121
<b>K</b> Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmise (as identified in space E) during the accounting period. For a further explanation of how to compute this am 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.	sion service
L Copyright Royalty Fee	<ul> <li>COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe:</li> <li>Complete block 1, block 2, or block 3.</li> <li>Use block 1 if the amount of gross receipts in space K is \$137,100 or less</li> <li>Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$26</li> <li>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.</li> </ul>	3,800
	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 this accounting period is \$52.00	six-month
	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	· · · · · · · · · · · · · · · · · · ·
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,10	0)
	1. Base amount under statutory formula         \$         263,800.00	
	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 \$527,6	00)
	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	

0.00	
	-
\$ 52.00 \$ 15.00	-
\$	67.00
e to the Register of Copyri more information.	ghts!
	\$ 15.00 \$ e to the Register of Copyri

Accounting Period:	2020/2		FORM SA1-2E. PAGE 7.
Name		OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Central Telcor	n Services LLC	29121
M Channels	to its subscriber	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 I television broadcast stations	9
	on which the c	I number of activated channels able system carried television broadcast stations cast services	248
N Individual to Be Contacted		<b>D BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Paul Peckham       Telephone       (435) 42	7-0561
	Address	P.O. Box 7 (Number, street, rural route, apartment, or suite number)	
		Fairview, Utah 84629 (City, town, state, zip)	
	Email	p.peckham@centracom.com Fax (optional) (435) 427-3200	
0	CERTIFICATION	(This statement of account must be certified and signed in accordance with Copyright Office regulations)	
Certification	• I, the undersign	ed, hereby certify that (Check one, but only one, of the boxes.)	
	(Owne	er other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
		<b>It of owner other than corporation or partnership)</b> I am the duly authorized agent of the owner of the cable system as ic line 1 of space B and that the owner is not a corporation or partnership; or	dentified
		cer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the ca line 1 of space B.	able system
		d the statement of account and hereby declare under penalty of law that all statements of fact contained herein te, and correct to the best of my knowledge, information, and belief, and are made in good faith. ion 1001(1986)]	

X /s/ Eddie L. Cox
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: Eddie L. Cox
Title:  (Title of official position held in corporation or partnership)
Date: 1/1/2021

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.

ounting Period: 2020/2	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
ntral Telcom Services LLC	2912
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 th lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the bas service of providing secondary transmissions of primary broadcast transmitters, the system shall not inclu- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 1	asic Ide sub- Special Statement
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 transmi made by satellite carriers to satellite dish owners?	ssions
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpar For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2	
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
X	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	<u> </u>
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	-
(interest char	ge)
	please
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	•
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,	•
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, list below the owner, address, first community served, ID number, and accounting period as given in the original Owner	•
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, list below the owner, address, first community served, ID number, and accounting period as given in the original Owner	

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