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

STATEME	NT OF ACCOUNT	FOR COPYRIGH	IT OFFICE USE ONLY	Return completed workbook by email to:
	y Transmissions by	DATE RECEIVED	AMOUNT	
-	ns (Short Form) tions are located f this workbook	2-27-21	\$ ALLOCATION NUMBER	coplicsoa@copyright.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY	YY/(Period))	
	2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional	- see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of t of the subsidiary, not that of the parent o		liary of another corporation, give the full co	rporate title
Owner	List any other name or names under whic	ch the owner conducts the business of th	e cable system.	
	If there were different owners during the single statement of account and royalty f		ne last day of the accounting period should s ng period.	submit a
	Check here if this is the system's first filir	ng. If not, enter the system's ID number a	ssigned by the Licensing Division.	2953
-	LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM		
-	Uintah Basin Electronic Telecomm	unications		
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFERENT)		
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
	PO Box 398			

INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these

names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.

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.

(Number, street, rural route, apartment, or suite number)

Roosevelt UT 84078

IDENTIFICATION OF CABLE SYSTEM:

MAILING ADDRESS OF CABLE SYSTEM:

(Number, street, rural route, apartment, or suite number)

(City, town, state, zip)

Duchesne

(City, town, state, zip code)

С

System

1

2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name	Uintah Basin Electronic Telecommunications	29
П	Instructions: List each separate community served by the cable system. A "communi "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 lis 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 rul mmunities within unincorporated areas and including singl
A = = = =	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	nome parks should be reported in parentheses below the
	identified city.	
_	CITY OR TOWN	STATE
First Community	Duchesne	Utah
Community	Vernal Uintob County	Utah Utah
dd Rows as Necessary	Uintah County Roosevelt	Utah
iu nows as necessary	Naples	Utah
	Duchesne County	Utah

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:					FORM SA1	TEM II
Name	Uintah Basin Electronic	: Telecommu	nications					29
E	SECONDARY TRANSMISSION In General: The information in s				ry transmission	service of	the cable	
	system, that is, the retransmissi	•	•		•			
Secondary	about other services (including	, , , ,	•			those exis	sting on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Bot	,		•	,	hla sveta	n broken	
scribers and	down by categories of secondar	•						
Rates	each category by counting the r	•	-	•	•			
	separately for the particular service						reasonal the	
	Rate: Give the standard rate of unit in which it is generally billed							
	category, but do not include dise	· ·	,			is within a	particular rate	
	Block 1: In the left-hand block	-		-	-			
	systems most commonly provid							
	that applies to your system. Not categories, that person or entity		•		•			
	subscriber who pays extra for ca				•••	•		
	first set" and would be counted							
	Block 2: If your cable system	-	-					
	printed in block 1 (for example, with the number of subscribers				•	,		
	sufficient.							
	BLO	OCK 1				BLOC		
	CATEGORY OF SERVICE	NO. OF SUBSCRIBER	RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:	863	24.9					
	 Service to first set 							
	 Service to additional set(s) 							
	• FM radio (if separate rate)							
	Motel, hotel							
	Commercial							
	Converter							
	Residential	-	765 6.50)				
	 Non-residential 		100 5.64					
	SERVICES OTHER THAN SEC In General: Space F calls for ra				all your cable sy	stem's sei	vices that were	
F	not covered in space E, that is,			•				
	service for a single fee. There a	re two exceptions	s: you do not need	l to give rate	information cor	cerning (1) services	
Services Other Than	furnished at cost or (2) services							
Secondary	amount of the charge and the up enter only the letters "PP" in the		sually billed. If an	rates are c	narged on a var	lable per-	orogram basis,	
Secondary			•	each of the				
ransmissions:	Block 1: Give the standard ra				the ecoupting	-		
•	Block 1: Give the standard ra Block 2: List any services that	• •		-	-	vices in th	he form of a	
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a	separate charge	was made or esta	ablished. Lis	-			
ransmissions:	Block 1: Give the standard ra Block 2: List any services that	separate charge ption and include	was made or esta the rate for each.	ablished. Lis	-	T		
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri	separate charge ption and include BLOCH	was made or estate the rate for each.	ablished. Lis	t these other ser		BLOCK 2	
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE	separate charge ption and include BLOCH RATE C	was made or esta the rate for each (1 ATEGORY OF SE	ablished. Lis	-	CATEG	BLOCK 2 ORY OF SERVICE	RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	separate charge ption and include BLOCK RATE C	was made or esta the rate for each. < 1 ATEGORY OF SE istallation: Non-r	ablished. Lis	t these other ser	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	separate charge ption and include BLOCK RATE C 24.99	was made or esta the rate for each. (1 ATEGORY OF SE estallation: Non-r • Motel, hotel	ablished. Lis	t these other ser	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	separate charge ption and include BLOCK RATE C	was made or esta the rate for each. <u>K 1</u> <u>ATEGORY OF SE</u> istallation: Non-r • Motel, hotel • Commercial	ablished. Lis	t these other ser	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	separate charge ption and include BLOCK RATE C 24.99	was made or esta the rate for each. (1 ATEGORY OF SE estallation: Non-r • Motel, hotel	RVICE	t these other ser	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	separate charge ption and include BLOCK RATE C 24.99	was made or esta the rate for each. <u>(1</u> <u>ATEGORY OF SE</u> <u>istallation: Non-r</u> • Motel, hotel • Commercial • Pay cable	RVICE	t these other ser	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection	separate charge ption and include BLOCK RATE C 24.99	was made or esta the rate for each. <u>K 1</u> <u>ATEGORY OF SE</u> istallation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable-add'l	RVICE esidential	t these other ser	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection Installation: Residential	separate charge ption and include BLOCH RATE C 24.99 39.00 40.00	was made or esta the rate for each. <u>(1</u> <u>ATEGORY OF SE</u> istallation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable-add'l • Fire protection	RVICE esidential	t these other ser	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set	separate charge ption and include BLOCH RATE C 24.99 39.00 40.00	was made or esta the rate for each. <u>X 1</u> <u>ATEGORY OF SE</u> istallation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable • Pay cable-add'l • Fire protection • Burglar protecti	RVICE esidential	t these other ser	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s)	separate charge ption and include BLOCH RATE C 24.99 39.00 40.00	was made or esta the rate for each. <u>X 1</u> <u>ATEGORY OF SE</u> Installation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable • Pay cable-add'l • Fire protection • Burglar protection ther services:	RVICE esidential	RATE	CATEG		RAT
ransmissions:	Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	separate charge ption and include BLOCH RATE C 24.99 39.00 40.00	was made or esta the rate for each. <u>X 1</u> <u>ATEGORY OF SE</u> istallation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable • Pay cable-add'l • Fire protection • Burglar protection ther services: • Reconnect	RVICE esidential	RATE	CATEG		RA1

ounting Period:	2020/2			FORM SA1-2E. PAGE 3
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
		nic Telecommunications		2953
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, a 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 informatic Column 1: List each station multicast stream associated "WETA-2" as the same on the Column 2: Give the channel of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	entify every television station (including m during the accounting period, except n effect on June 24, 1981, permitting e)(2) and (4), or 76.63 (referring to 76. s explained in the next paragraph. : With respect to any distant stations of ules, regulations, or authorizations: e in space G—but do list it in space I (a substitute basis. also in space I, if the station was carrie on concerning substitute basis stations n's call sign. <i>Do not</i> report origination d with a station according to its over-th	t (1) stations carried only on a part-til the carriage of certain network progra 61(e)(2) and (4))]; and (2) certain stat carried by your cable system on a sub the Special Statement and Program I ed both on a substitute basis and also s, see page (v) of the general instruction program services such as HBO, ESP ne-air designation. For example, report evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for independent or "E-M" (for noncommercial education cuctions in the paper SA1-2 form. at the community to which the station	me basis under ms [sections ions carried on a postitute program _og)—if the pon some other ons. N, etc. Identify each wrt multistream the air in its community noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KUTV	2	N	Salt Lake City, Utah
	KTVX	4	<u> </u>	Salt Lake City, Utah
d Rows as Necessary	KSL-TV	5	<u> </u>	Salt Lake City, Utah
	KUED-PBS	7	E	Salt Lake City, Utah
	KUEN	9		Salt Lake City, Utah
	ION	10		Salt Lake City, Utah
	KBYU-PBS	11		Salt Lake City, Utah
	KUCW	12		Salt Lake City, Utah
	KSTU-FOX	13	N	Salt Lake City, Utah
	KJZZ	14	I	Salt Lake City, Utah

	FOWNER OF (n Electroni		YSTEM: communications					SYSTEM I 29
								2.
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					Н
eceivable if (1) n the basis of for detailed info aper SA1-2 fo Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation about rm. dentify the call tate whether to the radio stat this by placing give the station	y the sys be recein at the Co sign of e 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 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	t the system's he system's FM ante this point, see pa sed by the cable s he station is licen	eadend, and (2 enna, during o ge (v) of the g system as a se sed by the FC	2) it can certain 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	
UALL SIGN		3/0	LOCATION OF STATION	GALL SIGN		3/0	LOCATION OF STATION	
						·		
						·		
						·		

Accounting Perio	d: 2020/2						FORM	A SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	Uintah Basin Electron	ic Teleco	mmunicatio	ns				2953
	SUBSTITUTE CARRIAGE				<u>^</u>			
						the street is a second		
•	In General: In space I, identi substitute basis during the a						•	
Substitute	explanation of the programm	• •		•	-			
Carriage:	1. SPECIAL STATEMENT	-			•		· ·	
Special	 During the accounting per 				isis, anv nonr	network telev	ision proar	am
Statement and	broadcast by a distant sta							NO
Program Log	-						YES	
	Note: If your answer is "No	", leave the	e rest of this pa	ge blank. If your answer is	s "Yes," you r	nust comple	te the prog	Iram
	log in block 2.							
	2. LOG OF SUBSTITUTE			ata lina. Lina abbraviation	o whorever p	oocible if th	oir mooning	
	In General: List each subs clear. If you need more spa		•		s wherever p	ossible, il the	eir meaning	j is
				vision program ("substitute	e program") tl	hat, during th	ne account	ing
	period, was broadcast by a	distant sta	tion and that y	our cable system substitut	ted for the pro	ogramming o	of another s	station
	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 L	love Lucy"	or
			dcast live, ent	er "Yes." Otherwise enter	"No."			
	Column 3: Give the call	sign of the	station broadc	asting the substitute prog	ram.			
			,	he community to which th		•	e FCC or,	in
	the case of Mexican or Car			stem carried the substitute		,	with the m	aonth
	first. Example: for May 7 giv	-	when your sy		o program. O		, which the fi	Ionth
	Column 6: State the time	es when the		ogram was carried by you				ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:07	1:15 p.m. to 6	5:28:30 p.m.	should be	
	stated as "6:00–6:30 p.m."	er "R" if the	listed program	n was substituted for prog	ramming that	t vour system	n was <i>requ</i>	uired
	to delete under FCC rules a							
	was substituted for program	0		0 01				0
	effect on October 19, 1976.							
						N SUBSTIT		
	SI	JBSTITUT	E PROGRAM	1		AGE OCCL		7. REASON FOR
	1. TITLE OF PROGRAM		3. STATION'S		5. MONTH	6. TI		DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM –	- то	
							_	
						_	_	
							_	
							_	
							_	
						_	-	
							_	
							_	
							-	
						_	_	
							-	
							-	
							_	
						_	_	
							_	
							-	
							_	
							-	

	2020/2 LEGAL NAME OF OWNER OF CABLE SYSTEM:		S	YSTEM ID
Name	Uintah Basin Electronic Telecommunications			295
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and th all amounts (gross receipts) paid to your cable system by subscribers for the syste (as identified in space E) during the accounting period. For a further explanation of 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.	em's secondary trans how to compute this	smission service amount, see	
	IMPORTANT: You must complete a statement in space P concerning gross receip	ots.	(Amount of gro	oss 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 I Use block 3 if the amount of gross receipts in space K is more than \$263,800 but I See page (vi) of the general instructions located in the paper SA1-2 form for more inform 	less than \$527,600	\$263,800	
	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 accounting period is \$52.00	e that you must pay fo	r this six-month	
	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 1	l and 2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (b	out more than \$137	,100)	
	1. Base amount under statutory formula \$	263,800.00		
	2. Enter amount of gross receipts from space K	162,617.00		
	3. Subtract line 2 from line 1	101,183.00		
	4. Enter the amount of gross receipts from space K	\$	162,617.00	
	5. Enter the amount from line 3	\$	101,183.00	
	6. Subtract line 5 from line 4	\$	61,434.00	
	7. Multiply line 6 by .005 (enter figure here)		\$	307.17
	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	. \$	307.17
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800) (but less than \$52	7,600)	
	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, a	and 6		
	FILING FEE AND TOTAL REMITTANCE DUE			
Filing Fee and otal Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	\$	307.17	
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		\$	327.17
	EFT Trace # or TRANSACTION ID #	2000110	7	
		26RCN1F8		

Accounting Period:	2020/2		FORM SA1-2E. PAGE 7
Name		DWNER OF CABLE SYSTEM: Electronic Telecommunications	SYSTEM ID# 2953
M Channels	to its subscribers 1. Enter the total system carried 2. Enter the total on which the ca	bu 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	10 256
N Individual to Be Contacted		BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Rashelle Richardson Telephone 435 622	2 5411
	Address 	PO Box 398 (Number, street, rural route, apartment, or suite number) Roosevelt, Utah 84066 (City, town, state, zip) rrichardson@stratanetworks.com Fax (optional) 435 622-0033	
O Certification	I, the undersigned (Owned) (Agentic in I X (Offic in I I) I have examined	(This statement of account must be certified and signed in accordance with Copyright Office regulations) ad, hereby certify that (Check one, <i>but only one</i> , of the boxes.) ar other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or at of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as line 1 of space B and that the owner is not a corporation or partnership; or aer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the line 1 of space B. If the statement of account and hereby declare under penalty of law that all statements of fact contained herein e, and correct to the best of my knowledge, information, and belief, and are made in good faith. on 1001(1986)]	

	X /s/ M. Jason McKee
	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 r	name: M. Jason McKee
	Chief Financial Officer cial position held in corporation or partnership)
Date:	02-27-2021

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.

Inting Period: 2020/2	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
ah Basin Electronic Telecommunications	295
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." 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.	P Special Statement Concerning Gross 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?	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	-
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. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmer
	-
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	
Line 1 Enter the amount of late payment or underpayment	
Line 1 Enter the amount of late payment or underpayment	
Line 1 Enter the amount of late payment or underpayment	
Line 1 Enter the amount of late payment or underpayment	

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.