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

STATEM	ENT OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	Return completed workbook by email to:	
-	ary Transmissions by	DATE RECEIVED	AMOUNT	 coplicsoa@copyright.gov 	
General instru	ems (Short Form) actions are located of this workbook	3/1/2021 \$		For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150	
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YYY	Y/(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 th the subsidiary, not that of the parent corp	-	ary of another corporation, give the full corpo	orate title of	
Owner	List any other name or names under which If there were different owners during the a statement of account and royalty fee payn	accounting period, only the owner on the	last day of the accounting period should sub	omit a single	
	Check here if this is the system's first filing			3565	
	LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM			
	CableSouth Media III, LLC				
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)			
	MAILING ADDRESS OF OWNER OF 1056 Jones Blvd	CABLE SYSTEM			
	(Number, street, rural route, apartment, or suite n Milan, TN 38358	umber)			
	(City, town, state, zip)		6 . 4		
C	INSTRUCTIONS: In line 1, give any busin names already appear in space B. In line				
System	1 IDENTIFICATION OF CABLE SYSTEM: Swyft Connect LLC				
	MAILING ADDRESS OF CABLE SYSTEM	:			
	2 (Number, street, rural route, apartment, or suite n Milan, TN 38358 (City, town, state, zip code)	umber)			

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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Nume	CableSouth Media III, LLC	3565
D	Instructions: List each separate community served by the cable system. A "comm separate and distinct community or municipal entity (including unincorporated of unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list w community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mole	communities within unincorporated areas and including single, discrete ill serve as a form of system identification hereafter known as the "first
Area Served	city.	
_	CITY OR TOWN	STATE
First Community	Oakdale Allen Parrish	LA
dd Rows as Necessary		

								FORM SA1	
Name	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						SYS	TEM ID
	CableSouth Media III, LL	_C							356
Е	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission	pace E should	cover al	I categories of s	secondar	•			
Secondary	about other services (including p	, , ,	,		,		those exist	ing on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						blo cyctom	brokon	
scribers and	down by categories of secondary	•							
Rates	each category by counting the n	umber of billing	gs in that	category (the n	number o	f persons or org	anizations		
	separately for the particular serv							na and the	
	Rate: Give the standard rate c unit in which it is generally billed.	-	-	•				-	
	category, but do not include disc				y standa		o within a p		
	Block 1: In the left-hand block	•		0					
	systems most commonly provide							0,	
	that applies to your system. Not categories, that person or entity			-		-			
	subscriber who pays extra for ca						•		
	first set" and would be counted o								
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, t with the number of subscribers a								
	sufficient.	,							
	BLC	DCK 1					BLOCK		1
	CATEGORY OF SERVICE	NO. OF SUBSCRIBI		RATE	CATE	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:	000001110			0,111			CODOCINIDEINO	
	Service to first set		202	31.35					
	Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC							·	
F	In General: Space F calls for ration not covered in space E, that is, t								
-	service for a single fee. There ar					•			
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the un		usually	billed. If any rate	es are ch	arged on a vari	able per-pr	rogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rat		he cable	system for eac	h of the	applicable servi	ces listed.		
Rates	Block 2: List any services that	your cable sy	stem furr	nished or offered	d during	the accounting	period that		
	listed in block 1 and for which a				ned. List	these other ser	vices in the	e form of a	
	brief (two- or three-word) descrip	tion and includ	the the rat	te for each.			1		
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE		ORY OF SERVI tion: Non-resid		RATE	CATEGO	ORY OF SERVICE	RATE
	Continuing Services: Pay cable			el, hotel	lential				
	Pay cable—add'l channel			nmercial					
	Fay cable—add i channel Fire protection		-	cable					
	•Burglar protection			cable-add'l cha	nnel				
	Installation: Residential		-	protection					
	• First set	39.99		glar protection					
	Additional set(s)			ervices:					
	• FM radio (if separate rate)			onnect		49.99			
	• Converter	5.00	• Disc	connect					
			• Outl	et relocation					
			• Mov	e to new addres	25	39.99			
				o to non addiod	50				

unting Period: 2	1			
Name	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM I
	CableSouth Media III	, LLC		35
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable syste	entify every television station (including tra m during the accounting period, <i>except</i> (in effect on June 24, 1981, permitting the	1) stations carried only on a part-ti	me basis under
Primary		e)(2) and (4), or 76.63 (referring to 76.61)	(e)(2) and (4))]; and (2) certain sta	tions carried on a
ransmitters: Television		as explained in the next paragraph. s: With respect to any distant stations car	ried by your cable system on a sul	bstitute program
		ules, regulations, or authorizations: e in space G—but do list it in space I (the a substitute basis	Special Statement and Program	Log)—if the
		also in space I, if the station was carried I	both on a substitute basis and also	o on some other
	Column 1: List each static	on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination pro d with a station according to its over-the-a	ogram services such as HBO, ESF	PN, etc. Identify each
	"WETA-2" as the same on Column 2: Give the chann	the form. el number the FCC assigned to the televi	0	
		VRC is channel 4 in Washington, D.C. h case whether the station is a network sta	ation an independent station or a	noncommercial
		ering the letter "N" (for network), "N-M" (for		
	· · · · · · · · · · · · · · · · · · ·	, "E" (for noncommercial educational), or	(ional multicast).
		erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th		is licensed by the
		adian stations, if any, give the name of the	•	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KPLC	2	N	Little Rock, AR
	KPLC KVHP	2 4	<u>N</u>	Little Rock, AR Little Rock, AR
Rows as Necessary				Little Rock, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP	4	N	Little Rock, AR
Rows as Necessary	KVHP KVHP	4 5	N N	Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE	4 5 10	N N N	Little Rock, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL	4 5 10 7	N N N E	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB	4 5 10 7 6	N N E N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR
Rows as Necessary	KVHP KVHP KWWE KLTL KALB KSWL KATC	4 5 10 7 6 3	N N N E N N	Little Rock, AR Little Rock, AR Little Rock, AR Little Rock, AR El Dorado, AR Little Rock, AR Little Rock, AR

EGAL NAME OF	• OWNER OF (Media III, L		YSTEM:					SYSTEM I 35
	every radio s	tation ca	rried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of r for detailed info paper SA1-2 for Column 1: Id Column 2: St Column 3: If ignal, indicate t Column 4: G	it is carried by nonitoring, to rmation abou m. entify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Co sign of e he statio on's sign g a checl o's locatio	-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on t each station carried. In is AM or FM. hal was electronically processes (mark in the "S/D" column. on (the community to which the	t the system's hea system's FM ante his point, see pag ed by the cable sy e station is licens	adend, and (2 nna, during ce ge (v) of the ge ystem as a se ed by the FCC) it can b ertain sta eneral in parate a	e expected, ated intervals. structions in the. nd discrete	Primary Transmitters Radio
						<u>e/D</u>		
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.
News	LEGAL NAME OF OWNER OF	CABLE SYST	EM:					SYSTEM ID#
Name	CableSouth Media III, I	LLC						3565
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG	i			
	In General: In space I, identi							
	substitute basis during the ad explanation of the programm	• •	•	•				
Substitute Carriage:		-			e general instru		e paper SAT-	2 101111.
Special	 SPECIAL STATEMENT During the accounting per 					twork televis	sion program	a
Statement and	broadcast by a distant stat	•	r cable system	carry, on a substitute bas	is, any nonne			
Program Log						L	YES	NO
	Note: If your answer is "No	", leave the	rest of this pag	e blank. If your answer is	"Yes," you mu	ust complete	e the progra	m
	log in block 2.							
	2. LOG OF SUBSTITUTE			ta lina. I laa ahbraviatiana	wherever	aible if thei		
	In General: List each subst clear. If you need more spa				wherever pos	sidie, ii thei	r meaning is	5
				sion program ("substitute	program") tha	at, during the	e accounting	1
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							n.
	"NBA Basketball: 76ers vs.			toali. List specific program			WC LUCY OF	
				"Yes." Otherwise enter "				
		0		sting the substitute progra e community to which the		need by the	FCC ar in	
	the case of Mexican or Can		· ·	5		,	FCC or, in	
				tem carried the substitute			with the mor	nth
	first. Example: for May 7 giv							
	to the nearest five minutes.			gram was carried by your				ly
	stated as "6:00–6:30 p.m."	Example. a	a program carne	ed by a system nom 0.01.	15 p.m. to 0.2	.o.ou p.m. s		
	Column 7: Enter the lette			was substituted for progra			•	
	to delete under FCC rules a							am
	was substituted for program effect on October 19, 1976.	• •	our system wa	s permitted to delete unde	er FCC rules a	and regulation	ons in	
						EN SUBSTI		
	s		E PROGRAM	1	CARR	AGE OCC	URRED	7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		IMES — TO	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
1					11		-	

Accounting Period:	2020/2	FORM SA1	-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SY	STEM ID#
	CableSouth Media III, LLC		3565
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 transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (viii) 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.	ission service	05
	COPYRIGHT ROYALTY FEE		
L 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 \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. 	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 that you must pay for th accounting period is \$52.00	his 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	\$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	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
			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	4 240 00	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)		
	6. Interest charge. Enter the amount from line 4, space Q, page 8		
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing For and			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) FAL	SE	
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	\$	15.00
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2020/2			FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CA CableSouth Media III, LLC			SYSTEM ID# 3565
M Channels	to its subscribers, and (2) the 1. Enter the total number of cl	cable system's total nur	els on which the cable system carried television broadcast stations nber of activated channels during the accounting period. ble	9
	2. Enter the total number of a on which the cable system and nonbroadcast services	carried television broad	cast stations	. 178
N Individual to Be Contacted	INDIVIDUAL TO BE CONTAC we can contact about this stat		ORMATION IS NEEDED (Identify an individual to whom	
for Further Information	Name Cristy Wo		Telephone	731-686-9227
	Address 1056 Jon (Number, stree Milan, TN (City, town, stat	et, rural route, apartment, or si	ilte number)	
	Email <u>c</u>	cworkman@swyftconne	Fax (optional	
O Certification	 I, the undersigned, hereby certiin (Owner other than compared to a compar	tify that (Check one, <i>but or</i> corporation or partnersh ner than corporation or p ace B and that the owner ace B. t of account and hereby de t to the best of my knowle b)] Corporation or p ace B. t of account and hereby de t to the best of my knowle b)] Corporation or p ace B. t of account and hereby de t to the best of my knowle b)]	rtified and signed in accordance with Copyright Office regulations) <i>nly one</i> , of the boxes.) ip) I am the owner of the cable system as identified in line 1 of space partnership) I am the duly authorized agent of the owner of the cable is s not a corporation or partnership; or ration) or a partner (if a partnership) of the legal entity identified as ow acclare under penalty of law that all statements of fact contained herein dge, information, and belief, and are made in good faith. /s/ Thomas Pate electronic signature on the line above to certify this statement. gnature using an "/s/ signature" (e.g., /s/ John Smith)	system as identified
		Typed or printed name:	Thomas Pate	
	D	(Title of offici	al position held in corporation or partnership) 3/1/2021	

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unting Period: 2020/2	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
leSouth Media III, LLC	3565
 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. 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? NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name 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.	Q Interest Assessment
	Q Interest Assessment
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessment
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 Assessment
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 Assessment
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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 Assessment
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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 Assessment

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