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 COPYRIGHT OFFICE USE ONLY by email to: for Secondary Transmissions by DATE RECEIVED AMOUNT	
	gov
Cable Systems (Short Form) \$ For additional in contact the U.S. Office Licensing General instructions are located 3/1/2021 ALLOCATION NUMBER	nformation, . Copyright g Division at:
A ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
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.	038834
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		COMMZOOM COMMUNICATIONS, LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		2438 BOARDWALK ST (Number, street, rural route, apartment, or sulte number)	
		SAN ANTONIO, TX 78217 (City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system u s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in s	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		СОММZООМ	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	
•		n 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this Ir statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone	
		rou 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	
earch reports pre	epared 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 ents 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#
Name	COMMZOOM COMMUNICATIONS, LLC	038834
	Instructions: List each separate community served by the cable system. A "communit	
D	"a separate and distinct community or municipal entity (including unincorporated cor	
	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis	t will serve as a form of system identification hereafter know
	as the "first community." Please use it as the first community on all future filings.	
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho	ome parks should be reported in parentheses below the
Served	identified city.	
		1
	CITY OR TOWN	STATE
First	COMFORT	TX
Community		
Add Rows as Necessary		

	1							-	1-2E. PAG
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM						SYS	
	COMMZOOM COMMUN	ICATIONS,	LLC						03883
-	SECONDARY TRANSMISSION	I SERVICE: SU	JBSCRI	BERS AND R	ATES				
E	In General: The information in s								
Secondary	system, that is, the retransmission about other services (including particular services)								
Secondary Transmission	last day of the accounting period	, , ,			,		nose exis	ing on the	
Service: Sub-	Number of Subscribers: Both						ole system	, broken	
scribers and	down by categories of secondar	y transmission	service	. In general, yo	u can con	npute the numbe	r of subsc	ribers in	
Rates	each category by counting the n			U I I I				charged	
	separately for the particular serv Rate: Give the standard rate of							ne and the	
	unit in which it is generally billed	-	-	•					
	category, but do not include disc	· · ·							
	Block 1: In the left-hand block	· ,		0		,			
	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								
	Block 2: If your cable system					service that are	different	rom those	
	printed in block 1 (for example, t					,	,.	, 0	
	with the number of subscribers a	and rates, in the	e right-h	and block. A t	vo- or thre	e-word descript	on of the	service is	
	sufficient.	OCK 1					BLOCK	(2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF		NO. OF SUBSCRIBERS	RATI
	Residential:	SUBSCRIB	ERO	NATE	CAT	EGORT OF SEP	VICE	SUBSCRIBERS	NAT
	Service to first set		39	80.18					
	Service to additional set(s)			00.10					
	• FM radio (if separate rate)								
	Motel, hotel		46	80.18					
	Commercial		 1	80.18					
	Converter		•	00.10					
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s				
-	In General: Space F calls for ra					II your cable sys	tem's serv	vices that were	
F	not covered in space E, that is, t								
	service for a single fee. There an	•			•		• •		
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		usually	billed. If ally to		larged on a van	able hei-h	lografii basis,	
ransmissions:	Block 1: Give the standard ra		he cabl	e system for ea	ach of the	applicable servi	es listed.		
Rates	Block 2: List any services that								
	listed in block 1 and for which a		,		shed. List	these other ser	ices in the	e form of a	
			de the ra						
	brief (two- or three-word) descrip	ption and inclue		ate for each.			1		
	brief (two- or three-word) descrip	BLO	CK 1					BLOCK 2	
	brief (two- or three-word) descrip CATEGORY OF SERVICE		CK 1 CATEG	GORY OF SER	-	RATE	CATEG	BLOCK 2 DRY OF SERVICE	E RATE
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	BLO	CK 1 CATEG Installa	GORY OF SER ation: Non-res	-	RATE	CATEG		E RATE
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	BLO	CK 1 CATEG Installa • Mot	ORY OF SER ation: Non-res	-	RATE	CATEGO		E RATE
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	BLO	CK 1 CATEG Installa • Mot • Cor	GORY OF SER ation: Non-res tel, hotel mmercial	-	RATE	CATEGO		E RATE
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	BLO	CK 1 CATEG Installa • Mot • Cor • Pay	GORY OF SER ation: Non-res tel, hotel nmercial / cable	idential	RATE	CATEGO		E RATE
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection	BLO	CK 1 CATEC Installa • Mot • Cor • Pay • Pay	GORY OF SER ation: Non-res tel, hotel nmercial / cable / cable-add'l ch	idential	RATE	CATEGO		ERATE
	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	BLOO	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire	GORY OF SER ation: Non-res tel, hotel nmercial / cable / cable-add'l ch # protection	idential	RATE	CATEGO		ERATE
	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	BLO	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur	GORY OF SER ation: Non-res tel, hotel mmercial cable cable-add'l ch protection glar protection	idential	RATE	CATEGO		ERATE
	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 • Additional set(s)	BLOO	CK 1 CATEG Installa • Mol • Cor • Pay • Pay • Fire • Bur • Bur	GORY OF SER ation: Non-res tel, hotel mmercial (cable (cable-add'l ch protection glar protection services:	idential	RATE	CATEGO		ERATE
	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 • Additional set(s) • FM radio (if separate rate)	BLOO	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s	GORY OF SER ation: Non-res tel, hotel mmercial (cable (cable-add'l ch protection glar protection services: connect	idential	RATE	CATEGO		ERATE
	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 • Additional set(s)	BLOO	CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s	GORY OF SER ation: Non-res tel, hotel mmercial (cable (cable-add'l ch protection glar protection services:	idential	RATE	CATEGO		ERATE
	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 • Additional set(s) • FM radio (if separate rate)	BLOO	CK 1 CATEG Installa • Mol • Cor • Pay • Pay • Fire • Bur Other s • Rec • Dis	GORY OF SER ation: Non-res tel, hotel mmercial (cable (cable-add'l ch protection glar protection services: connect	idential	RATE	CATEGO		ERATE

counting Period: 2	2020/2			FORM SA1-2E. P/
Name	LEGAL NAME OF OWNER OF			SYSTEN
	COMMZOOM COMMU	÷		038
G Primary Transmitters: Television	carried by your cable syster 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 informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio	also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	(1) stations carried only on a part ne carriage of certain network prog 1(e)(2) and (4))]; and (2) certain st arried by your cable system on a si ne Special Statement and Program d both on a substitute basis and all see page (v) of the general instruc- orogram services such as HBO, ES e-air designation. For example, rep vision station for broadcasting over station, an independent station, or for network multicast), "I" (for inde or "E-M" (for noncommercial educa- tictions in the paper SA1-2 form. the community to which the statio	t-time basis under grams [sections tations carried on a substitute program in Log)—if the lso on some other ctions. SPN, etc. Identify each port multistream er the air in its community r a noncommercial ependent), "I-M" ational multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KABB	29	N	SAN ANTONIO, TX
dd Rows as Necessary	KENS	5	N 	SAN ANTONIO, TX
	KLRN	9	E	SAN ANTONIO, TX
	WOAI	4	N	SAN ANTONIO, TX
	KPXL	26	l	UVALDE, TX
	KMYS	35	l	KERRVILLE, TX
	KSAT	12	N	SAN ANTONIO, TX
	KVDA	60	Ν	SAN ANTONIO, TX
	KNIC	17	Ν	SAN ANTONIO, TX

EGAL NAME OF								SYSTEM 0388
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) n the basis of a for detailed info aper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Cc sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s 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 his point, see pa ed by the cable s e station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	?) it can ertain st eneral i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
ONEL OION		0,0		O/ LE OIGH		0/0		
		1		Г				
				 		·		

Accounting Perio							FOR	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF							SYSTEM ID#
Name	COMMZOOM COMMU	NICATION	NS, LLC					038834
	SUBSTITUTE CARRIAG							
1					-	tion that w	our ochlo ova	tom corriad on a
•	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE				
Special Statement and	During the accounting per	riod, did you	ur cable syster	m carry, on a substitute ba	isis, any noni	network tel	evision prog	ram
Program Log	broadcast by a distant sta	tion?					YES	× NO
i rogram zog	-				- "/"	L	_	
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you l	must comp	liete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI In General: List each subs			ate line. Use abbreviation	s wherever n	ossible if t	heir meanin	n is
	clear. If you need more spa				o wherever p	0001010, 11 1		910
				vision program ("substitute				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general categor							
	"NBA Basketball: 76ers vs.					, -		
				er "Yes." Otherwise enter				
				casting the substitute prog the community to which th		consod by	the ECC or	in
	the case of Mexican or Car							
	Column 5: Give the mor	nth and day		stem carried the substitute			ls, with the r	nonth
	first. Example: for May 7 gi							. (.) .
	to the nearest five minutes.			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."		a program car		1. 10 p.m. to t	5.20.00 p.m	i. Should be	
				n was substituted for prog				
	to delete under FCC rules a							ogram
	was substituted for programe ffect on October 19, 1976		your system w	as permitted to delete unit		s and regul	auons m	
					r 1			1
						N SUBST		
	S	1	E PROGRAM			AGE OCC		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		TIMES — TO	
							-	
							_	
							_	
						+		
							_	
						+		
							_	
							_	
						+		
							_	
							_	
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1								
							-	

Accounting Period:	2020/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: COMMZOOM COMMUNICATIONS, LLC	S	YSTEM ID# 038834
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En 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 (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.	ission service amount, see	3,039.05 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> 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 accounting period is \$52.00	this six-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 \$137,1		
	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,	,600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing For and			
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!

Accounting Period:	2020/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: COMMZOOM COMMUNICATIONS, LLC	SYSTEM ID# 038834
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	10 141
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.) Name JACOB T. GRAY	₽ 210-736-3376, EXT 1004
Information	Address Address 2438 BOARDWALK ST (Number, street, rural route, apartment, or suite number) SAN ANTONIO, TX 78217 (City, town, state, zip)	
	Email CFO@COMMZOOM.COM Fax (optional) 210-403-26	88
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as one in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained here are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	e B; or e system as identified wwner of the cable system
	X /s/ JACOB T. GRAY 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: JACOB T. GRAY	-
	Title: CFO/COO (Title of official position held in corporation or partnership) Date: MARCH 01, 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.

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: Image: Concerning	ounting Period: 2020)/2		FORM SA1-2E. PAG
SPECIAL STATEMENT CONTROL GADE SPECIAL STATEMENT Act of 1980 amended Tile 17, section 111(g)(1)(A), of the Copylight Act by adding the following section 27 transmissions of primary broadcast transmitters, the system shall not include sub- scribers and anometic objected from subscribers receiving secondary transmissions pursuant to section 119. P 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 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? P No YES. Enter the total here and list the satellite carrier(s) below. \$ Name Naming Address Maing Address \$ Name \$ <td>L NAME OF OWNER</td> <td>OF CABLE SYSTEM:</td> <td></td> <td>SYSTEM</td>	L NAME OF OWNER	OF CABLE SYSTEM:		SYSTEM
The Satellite Home Verwer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: P "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic sorbers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." P For more information on when to axclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. P During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier to satellite carrier(s) below. \$ No Image Address Image Address Maring Address \$ \$ No Image Address Image Address No Image Address \$ No must complete this worksheet for those royally payments submitted as a result of a late payment. \$ \$ For an explaned of interest assessment, see gage (viii) of the general instructions located in the paper SA1-2 form. Interest Assess Interest Assess Line 1 Enter the amount of iate payment or underpayment. \$ \$ 0.00774 Line 2 Multiply line 1 by the interest rate* and enter the sum here \$. . . In a 3 Multiply line 3 by 0.00274** and enter here in space		NUNICATIONS, LLC		0388
NO YES. Enter the total here and list the satellite carrier(s) below\$ Name Malling Address Malling Address Malling Address Malling 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. Image Address 0 days Line 2 Multiply line 1 by the interest rate* and enter the sum here 0.677 x 0 days Line 3 Multiply line 2 by the number of days late and enter the sum here	The Satellite Home lowing sentence: "In determini service of pr scribers and For more informatio located in the paper During the accounting	Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the ing the total number of subscribers and the gross amounts paid to the cable system for the bar roviding secondary transmissions of primary broadcast transmitters, the system shall not includ amounts collected from subscribers receiving secondary transmissions pursuant to section 1 on on when to exclude these amounts, see the note on page (vii) of the general instructions r SA1-2 form.	asic ude sub- 119."	P Special Statemen Concerning Gros Receipts Exclusio
Name Name Mailing Address Mailing Address INTEREST ASSESSMENT Mailing Address 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. Interest Assess Line 1 Enter the amount of late payment or underpayment \$ 67.00 x 1% Line 2 Multiply line 1 by the interest rate* and enter the sum here 0.67 x 0 days Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing/interest-rate.pdf. For further assistance please list below the owner, address, first community served, ID number, and 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.		arriers to satellite dish owners?		
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