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       coplicsoa@loc.gov         Cable Systems (Short Form)       8/25/21       \$       coplicsoa@loc.gov       For additional information contact the U.S. Copyrig         General instructions are located in the first tab of this workbook       8/25/21       ALLOCATION NUMBER       For additional information contact the U.S. Copyrig         A       ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))       (YYYY/(Period)) |
|---|
| Cable Systems (Short Form)         General instructions are located         in the first tab of this workbook         ALLOCATION NUMBER   |
| General instructions are located<br>in the first tab of this workbook     8/25/21     Image: Contact the U.S. Copyrig<br>Office Licensing Division<br>Tel: (202) 707-8150   |
| in the first tab of this workbook           ALLOCATION NUMBER   |
|   |
| A ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))  |
| A ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))  |
| A ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))  |
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| 2021/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31   |
|   |
| Barcode Data Filing Period (optional - see instructions)  |
| Accounting  |
| Period  |
| Instructions:   |
| B 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   |
|   |
| W T SERVICES INC BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)   |
|   |
| MAILING ADDRESS OF OWNER OF CABLE SYSTEM  |
| PO BOX 1776   |
| (Number, street, rural route, apartment, or suite number)   |
| HEREFORD, TX 79045-1776<br>(City, town, state, zip)   |
| C 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   |
| ······································  |
| 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: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this   |

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 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.

| Name                 | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM  |
|----------------------|---|---|
| Name                 | W T SERVICES INC  | 60  |
| D                    | Instructions: List each separate community served by the cable system. A "cor<br>"a separate and distinct community or municipal entity (including unincorpora<br>discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that<br>as the "first community." Please use it as the first community on all future filir | ted communities within unincorporated areas and including sing<br>t you list will serve as a form of system identification hereafter kn<br>ngs. |
| Area<br>Served       | Note: Entities and properties such as hotels, apartments, condominiums, or m identified city.   | obile home parks should be reported in parentheses below the  |
|                      | CITY OR TOWN  | STATE   |
| First                | FRIONA  | TX  |
| Community            | BOVINA  | TX  |
|                      |   |   |
| dd Rows as Necessary |   |   |
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|                               | LEGAL NAME OF OWNER OF C   | ABLE SYSTEM     |                  |                  |             |                  |               | FORM SA1       | TEM II           |
|-------------------------------|--|-----------------|------------------|------------------|-------------|------------------|---------------|----------------|------------------|
| Name                          | W T SERVICES INC   |                 |                  |                  |             |                  |               | 0.0            | 609 <sup>,</sup> |
|                               |  |                 |                  |                  |             |                  |               |                |                  |
| E                             | SECONDARY TRANSMISSION<br>In General: The information in s   |                 |                  |                  |             | rv transmission  | service of    | the cable      |                  |
|                               | system, that is, the retransmission  | •               |                  | -                |             | •                |               |                |                  |
| Secondary                     | about other services (including p  |                 |                  |                  |             |                  | those exis    | ting on the    |                  |
| Transmission<br>Service: Sub- | last day of the accounting period<br>Number of Subscribers: Both   |                 |                  |                  |             |                  | ible system   | broken         |                  |
| scribers and                  | down by categories of secondar   | •               |                  |                  |             |                  |               |                |                  |
| Rates                         | each category by counting the n  |                 |                  | 0,0              |             | •                | •             | s charged      |                  |
|                               | separately for the particular serv<br>Rate: Give the standard rate c   |                 |                  |                  |             | •                | ,             | ge and the     |                  |
|                               | unit in which it is generally billed   |                 |                  |                  |             |                  |               |                |                  |
|                               | category, but do not include disc  | counts allowed  | for adva         | nce payment.     |             |                  |               |                |                  |
|                               | Block 1: In the left-hand block  |                 |                  | -                |             | •                |               |                |                  |
|                               | systems most commonly provide that applies to your system. Not   |                 |                  |                  |             |                  |               |                |                  |
|                               | categories, that person or entity  |                 |                  | -                |             | -                |               |                |                  |
|                               | subscriber who pays extra for ca   |                 |                  |                  |             | d in the count u | nder "Servi   | ice to the     |                  |
|                               | first set" and would be counted of<br>Block 2: If your cable system  |                 |                  |                  |             | service that ar  | a different t | from those     |                  |
|                               | printed in block 1 (for example, t   | -               |                  | •                |             |                  |               |                |                  |
|                               | with the number of subscribers a   |                 |                  |                  |             |                  |               |                |                  |
|                               | sufficient.  |                 |                  |                  |             |                  |               |                |                  |
|                               | BLC  | DCK 1<br>NO. OF |                  |                  | ┟┨────      |                  | BLOCK         | K 2<br>NO. OF  | r                |
|                               | CATEGORY OF SERVICE  | SUBSCRIBE       | ERS              | RATE             | CATI        | EGORY OF SE      | RVICE         | SUBSCRIBERS    | RA               |
|                               | Residential:   |                 |                  |                  |             |                  |               |                |                  |
|                               | Service to first set   |                 | 94               | 92.50            |             | NG HOME          |               | 1              | ##1              |
|                               | <ul> <li>Service to additional set(s)</li> </ul>   |                 |                  |                  |             | OVERNMEN         |               | 4              | •                |
|                               | • FM radio (if separate rate)  |                 |                  |                  |             | GOVERNM          |               | 1              | -                |
|                               | Motel, hotel   |                 |                  |                  |             | Y GOVERN         | MENT          | 2              | -                |
|                               | Commercial   |                 |                  |                  | NON-P       |                  |               | 4              | •                |
|                               | Converter  |                 |                  |                  | HOSPI       | IAL              |               | 1              | ##1              |
|                               | Residential  |                 |                  |                  |             |                  |               |                |                  |
|                               | Non-residential  |                 |                  |                  |             |                  |               |                |                  |
|                               | SERVICES OTHER THAN SEC  | ONDARY TRA      | NSMISS           | SIONS: RATE      | ES          |                  |               |                |                  |
| F                             | In General: Space F calls for rate   |                 |                  |                  |             |                  |               |                |                  |
| •                             | not covered in space E, that is, t<br>service for a single fee. There ar   |                 |                  |                  |             |                  |               |                |                  |
| Services                      | furnished at cost or (2) services  | •               |                  |                  | •           |                  | • •           | ,              |                  |
| Other Than                    | amount of the charge and the ur  |                 | usually          | billed. If any r | ates are cl | narged on a var  | iable per-p   | rogram basis,  |                  |
| Secondary                     | enter only the letters "PP" in the   |                 | ha cabla         | system for a     | ach of the  | applicable conv  | ioon lintod   |                |                  |
| ransmissions:<br>Rates        | <b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed.<br><b>Block 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.  |                 |                  |                  |             |                  |               |                |                  |
|                               |  | BLOO            | CK 1             |                  |             |                  |               | BLOCK 2        |                  |
|                               | CATEGORY OF SERVICE  | RATE            | CATEG            | ORY OF SEF       | VICE        | RATE             | CATEG         | ORY OF SERVICE | RA               |
|                               | Continuing Services:   |                 |                  | tion: Non-res    | sidential   |                  |               |                |                  |
|                               | • Pay cable  |                 |                  | el, hotel        |             | 55.36            |               |                | 22               |
|                               | Pay cable—add'l channel  |                 |                  | mercial          |             | 55.36            |               |                | 17.              |
|                               | Fire protection  |                 | • Pay            |                  |             |                  | SHOW          | TIME PREMIUN   | 20.              |
|                               | •Burglar protection  |                 |                  | cable-add'l cl   | nannel      |                  |               |                |                  |
|                               | <ul> <li>Installation: Residential</li> <li>First set</li> </ul>   | EE 26           |                  | protection       | 2           |                  |               |                |                  |
|                               |  | 55.36           |                  | lar protection   | I           |                  |               |                |                  |
|                               | • Additional set(s)  |                 |                  | GI VICE3.        |             | 55.00            |               |                | l                |
|                               | Additional set(s)     FM radio (if separate rate)  |                 | • Ron            | onnect           |             |                  |               |                |                  |
|                               | • FM radio (if separate rate)  |                 |                  | onnect           |             | 55.36            |               |                |                  |
|                               |  |                 | • Disc           | onnect           |             |                  |               |                |                  |
|                               | • FM radio (if separate rate)  |                 | • Disc<br>• Outl |                  | ress        | 55.36<br>55.36   |               |                |                  |

| ounting Period:                             | 2021/1   |   |   |   | FORM SA1-2E. PAGE 3. |
|---|--|---|---|---|----------------------|
| Name  | LEGAL NAME OF OWNER OF   | F CABLE SYSTEM:   |   |   | SYSTEM ID#           |
| Hamy  | W T SERVICES INC   |   |   |   | 60914                |
|   | PRIMARY TRANSMITTERS:  | TELEVISION  |   |   |                      |
| G<br>Primary<br>Transmitters:<br>Television | carried by your cable system<br>FCC rules and regulations in<br>76.59(d)(2) and (4), 76.61(6<br>substitute program basis, a<br><b>Substitute Basis Stations</b>          | entify every television station (including t<br>m during the accounting period, <i>except</i><br>in effect on June 24, 1981, permitting th<br>e)(2) and (4), or 76.63 (referring to 76.61<br>is explained in the next paragraph.<br>With respect to any distant stations ca<br>ules, regulations, or authorizations:        | (1) stations carried only on a part<br>e carriage of certain network prog<br>1(e)(2) and (4))]; and (2) certain st                                | t-time basis under<br>grams [sections<br>tations carried on a |                      |
|   | <ul> <li>Do not list the station here station was carried only on</li> <li>List the station here, and a</li> </ul>   | e in space G—but do list it in space I (th<br>a substitute basis.<br>also in space I, if the station was carried  | l both on a substitute basis and al   | so on some other  |                      |
|   | Column 1: List each station<br>multicast stream associated<br>"WETA-2" as the same on the<br>Column 2: Give the channel  | el number the FCC assigned to the telev   | rogram services such as HBO, ES<br>-air designation. For example, rep   | SPN, etc. Identify each<br>port multistream                   |                      |
|   | <b>Column 3:</b> Indicate in each<br>educational station, by enter<br>(for independent multicast),<br>For the meaning of these ter<br><b>Column 4:</b> Give the location | /RC is channel 4 in Washington, D.C.<br>In case whether the station is a network stering the letter "N" (for network), "N-M" (for<br>, "E" (for noncommercial educational), or<br>erms, see page (iv) of the general instruc-<br>on of each station. For U.S. stations, list<br>idian stations, if any, give the name of th | for network multicast), "I" (for inde<br>r "E-M" (for noncommercial educa<br>ctions in the paper SA1-2 form.<br>the community to which the statio | pendent), "I-M"<br>tional multicast).<br>n is licensed by the |                      |
|   | 1. CALL SIGN   | 2. B'CAST CHANNEL NUMBER  |   |   |                      |
|   |  |   | 3. TYPE OF STATION  | 4. LOCATION O   | FSTATION             |
|   | KACV-TV  | 2   | E-M   | AMARILLO, TX  |                      |
|   | KAMR-TV  | 4   | Ν   | AMARILLO, TX  |                      |
| dd Rows as Necessary                        | KCIT   | 14  | N   | AMARILLO, TX  |                      |
|   |  | 7   | N   | AMARILLO, TX  |                      |
|   | KVII-TV  |   |   |   |                      |
|   | KVII-IV<br>KFDA-TV   | ,<br>10   | N   | AMARILLO, TX  |                      |
|   |  |   |   |   |                      |
|   | KFDA-TV  | 10  | N   | AMARILLO, TX  |                      |
|   | KFDA-TV<br>KPTF  | 10<br>13  | N   | AMARILLO, TX<br>FARWELL, TX                                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |
|   | KFDA-TV<br>KPTF<br>KTMO-LP   | 10<br>13<br>25  | N<br> <br> <br> <br>  | AMARILLO, TX<br>FARWELL, TX<br>AMARILLO, TX                   |                      |

| N T SERVIC  | F OWNER OF (  |  | ISTEMI.   |   |   |  |   | SYSTEM<br>609                    |
|---|---|--|---|---|---|--|---|----------------------------------|
|   | t every radio s   | station ca   | arried on a separate and discre<br>nerally receivable by your cab   |   |   |  |   | н                                |
| eceivable if (1)<br>in the basis of<br>or detailed info<br>aper SA1-2 fo<br>Column 1: lo<br>Column 2: S<br>Column 3: lf<br>ignal, indicate<br>Column 4: C | it is carried b<br>monitoring, to<br>prmation abou<br>rm.<br>dentify the call<br>state whether f<br>the radio stat<br>this by placing<br>Sive the station | y the sys<br>be recein<br>at the Co<br>I sign of e<br>the static<br>tion's sign<br>g a chech<br>n's location | I-Band FM Carriage: Under C<br>tem whenever it is received at<br>ved at the headend, with the s<br>opyright Office regulations on t<br>each station carried.<br>on is AM or FM.<br>nal was electronically processes<br>(mark in the "S/D" column.<br>on (the community to which the<br>the community with which the | t the system's he<br>system's FM ante<br>his point, see pag<br>ed by the cable s<br>e station is licens | adend, and (2<br>nna, during c<br>ge (v) of the g<br>ystem as a se<br>sed by the FC | ?) it can  <br>ertain st<br>eneral ir<br>eparate a | be expected,<br>ated intervals.<br>Instructions in the.<br>and discrete | Primary<br>Transmitters<br>Radio |
| CALL SIGN   | AM or FM  | S/D  | LOCATION OF STATION   | CALL SIGN   | AM or FM  | S/D  | LOCATION OF STATION   |                                  |
|   |   |  |   |   |   | 5,5  |   |                                  |
| NNK<br>PAN  | FM  | X  | DIMMITT, TX   |   |   |  |   |                                  |
| PAN   | FM  | X  | HEREFORD, TX  |   |   |  |   |                                  |
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|   |   | <b>†</b>   |   |   |   |  |   |                                  |
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| Accounting Perio         | od: 2021/1   |               |                   |   |                 |                                 | FORM  | I SA1-2E. PAGE 5. |
|--------------------------|--|---------------|-------------------|---|-----------------|---------------------------------|---|-------------------|
|                          | LEGAL NAME OF OWNER OF                                   | CABLE SYS     | STEM:             |   |                 |                                 |   | SYSTEM ID#        |
| Name                     | W T SERVICES INC   |               |                   |   |                 |                                 |   | 60914             |
|                          | SUBSTITUTE CARRIAG                                       | E: SPECI      | AL STATEME        | NT AND PROGRAM LC   | G               |                                 |   |                   |
|                          | In General: In space I, ident                            | tifv everv no | nnetwork telev    | <i>ision program.</i> broadcast by                          | / a distant sta | tion. that vou                  | Ir cable svs  | em carried on a   |
|                          | substitute basis during the a                            |               |                   |   |                 |                                 |   |                   |
| Substitute               | explanation of the programn                              | ning that mu  | ist be included   | in this log, see page (v) of t                              | he general ins  | structions in                   | the paper S   | A1-2 form.        |
| Carriage:                | 1. SPECIAL STATEMEN                                      | T CONCE       | RNING SUBS        | TITUTE CARRIAGE   |                 |                                 |   |                   |
| Special<br>Statement and | <ul> <li>During the accounting pe</li> </ul>             | riod, did yo  | ur cable syster   | m carry, on a substitute ba                                 | isis, any nonr  | network telev                   | vision prog   | am                |
| Program Log              | broadcast by a distant sta                               | ation?        |                   |   |                 |                                 | YES   | X NO              |
|                          | Note: If your answer is "No                              | o". leave the | e rest of this pa | age blank. If vour answer i                                 | s "Yes." vou r  | nust comple                     | -   |                   |
|                          | log in block 2.  | , louvo ale   |                   | ge blank. If year anower is                                 | 5 100, you i    |                                 |   |                   |
|                          | 2. LOG OF SUBSTITUT                                      | E PROGR       | AMS               |   |                 |                                 |   |                   |
|                          | In General: List each subs                               | titute progr  | am on a separ     |   | s wherever p    | ossible, if th                  | eir meaning   | ) is              |
|                          | clear. If you need more spa                              |               |                   |   |                 |                                 |   |                   |
|                          | period, was broadcast by a                               |               |                   | vision program ("substitute                                 |                 |                                 |   |                   |
|                          | under certain FCC rules, re                              |               |                   |   |                 |                                 |   |                   |
|                          | Do not use general catego                                |               |                   |   |                 |                                 |   |                   |
|                          | "NBA Basketball: 76ers vs.                               |               | 1                 | ۵ <i>(</i> ۳ <i>0</i> )                                     | «NI "           |                                 |   |                   |
|                          |  |               |                   | er "Yes." Otherwise enter "<br>casting the substitute progr |                 |                                 |   |                   |
|                          |  |               |                   | the community to which th                                   |                 | censed by th                    | ne FCC or,  | in                |
|                          | the case of Mexican or Ca                                |               |                   |   |                 |                                 |   |                   |
|                          |  | ,             | when your sy      | stem carried the substitute                                 | e program. Us   | se numerals                     | , with the n  | nonth             |
|                          | first. Example: for May 7 gi                             |               | e substitute pr   | ogram was carried by you                                    | r cable system  | m list the ti                   | mes accur   | ately             |
|                          | to the nearest five minutes                              |               |                   |   |                 |                                 |   | atery             |
|                          | stated as "6:00–6:30 p.m."                               | •             |                   |   | •               |                                 |   |                   |
|                          |  |               |                   | n was substituted for prog                                  |                 |                                 |   |                   |
|                          | to delete under FCC rules<br>was substituted for prograr |               |                   |   |                 |                                 |   | ogram             |
|                          | effect on October 19, 1976                               | •             | ,                 |   |                 | ana iogula                      |   |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          | s  | UBSTITUT      | E PROGRAM         | 1   |                 | N SUBSTIT<br>AGE OCCL           |   | 7. REASON FOR     |
|                          | 1. TITLE OF PROGRAM                                      | 2. LIVE?      | 3. STATION'S      |   | 5. MONTH        | 6. TI                           | MES   | DELETION          |
|                          |  | Yes or No     | CALL SIGN         | 4. STATION'S LOCATION                                       | AND DAY         | FROM -                          | – то  |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          |  |               |                   |   |                 |                                 | _   |                   |
|                          |  |               |                   |   |                 |                                 | _   |                   |
|                          |  |               |                   |   |                 | -                               | -   |                   |
|                          |  | 1             |                   |   |                 | _                               | _   |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          |  | +             |                   |   |                 |                                 |   |                   |
|                          |  |               |                   |   |                 |                                 | -   |                   |
|                          |  |               |                   |   |                 |                                 | -   |                   |
|                          |  |               |                   |   |                 |                                 | -   |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          |  |               |                   |   |                 | _                               | _   |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          |  |               |                   |   | ·               |                                 | <u>-</u>  |                   |
|                          |  |               |                   |   |                 | -<br>-<br>-<br>-<br>-<br>-<br>- |   |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          |  |               |                   |   | ·               |                                 | -<br>-<br>-<br>-<br>-   |                   |
|                          |  |               |                   |   | ·               |                                 |   |                   |
|                          |  |               |                   |   | ·               |                                 |   |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |
|                          |  |               |                   |   | ·               |                                 | -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>- |                   |
|                          |  |               |                   |   |                 |                                 |   |                   |

| Accounting Period:            | 2021/1   |   | FORM SA                       | 1-2E. PAGE 6.                   |
|-------------------------------|--|---|-------------------------------|---------------------------------|
| Name                          | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>W T SERVICES INC   |   | SI                            | /STEM ID#<br>60914              |
| K<br>Gross Receipts           | GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the all amounts (gross receipts) paid to your cable system by subscribers for the system (as identified in space E) during the accounting period. For a further explanation of I 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 | n's secondary transm<br>how to compute this a | ission service<br>amount, see | <b>1,419.82</b><br>ss receipts) |
| L<br>Copyright<br>Royalty Fee | COPYRIGHT ROYALTY FEE<br>Instructions: To compute the royalty fee you owe:<br>• Complete block 1, block 2, or block 3.<br>• Use block 1 if the amount of gross receipts in space K is \$137,100 or less<br>• Use block 2 if the amount of gross receipts in space K is more than \$137,100 but le<br>• Use block 3 if the amount of gross receipts in space K is more than \$263,800 but le<br>See page (vi) of the general instructions located in the paper SA1-2 form for more inform   | ss 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 $52.00$   | that you must pay for                         | 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 (b  | ut more than \$137,1                          | 00)                           |                                 |
|                               | 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   | · · · · · ·                                   | <u> </u>                      |                                 |
|                               | 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  | 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   | 263,800.00                                    |                               |                                 |
|                               | 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) $\ldots \ldots$  | <b>\$</b>                                     | 1,319.00                      |                                 |
|                               | 6. Interest charge. Enter the amount from line 4, space Q, page 8  | ···· <u> </u>                                 | 0.00                          |                                 |
|                               | 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and  | nd 6  |                               |                                 |
|                               | FILING FEE AND TOTAL REMITTANCE DUE  |   |                               |                                 |
| Filing Fee and                |  |   |                               |                                 |
| Total Remittance<br>Due       | 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)  | \$  | 52.00                         |                                 |
|                               | 2. Filing Fee (See the instructions for more information on filing fee calculations)   | <u>\$</u>                                     | 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<br>See page i of the general instructions in the paper SA1-2 for   |   |                               | nts!                            |

| Accounting Period:                 | 2021/1   | FORM SA1-2E. PAGE 7. |
|------------------------------------|--|----------------------|
| Name                               | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br>W T SERVICES INC   | SYSTEM ID#<br>60914  |
| M<br>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         on which the cable system carried television broadcast stations and nonbroadcast services  | 8                    |
| N<br>Individual to<br>Be Contacted | INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)   |                      |
| for Further<br>Information         | Name RICH KENDRICK Telephone 806-30  | 64-3331              |
|                                    | Address PO BOX 1776<br>(Number, street, rural route, apartment, or suite number)<br>HEREFORD, TX 79045-1776<br>(City, town, state, zip)  |                      |
|                                    | Email BEANCNTR@WTRT.NET Fax (optional) 806-276-5219  |                      |
| O<br>Certification                 | CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) <ul> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system a in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the inline 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein 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)]</li> </ul> There 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: Amy Linzey Title: <ul> <li>(C.E.O.</li> <li>(Title of official position here in corporation or partnership)</li> </ul> |                      |
|                                    | Date: 08-25-2021   |                      |

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 fing, a determination that would be made by a court of law.

| T SERVICES INC       609         SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS       Image: Concerning Gross receipts for the Copyright Act by adding the following sentence:       Image: Concerning Gross amounts paid to the cable system of 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."       Image: Concerning Gross receipts for secondary transmissions and the paper SA1-2 form.       Special Statement concerning Gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?       Image: Concerning Gross receipts for secondary transmissions and by satellite carriers to satellite dish owners?       Image: Concerning Gross receipts for secondary transmissions and by satellite carriers to satellite carrier(s) below.       Image: Concerning Gross receipts for secondary transmissions and by satellite carriers to satellite carrier(s) below.       Image: Concerning Gross receipts for secondary transmissions       Image: Concerning Gross receipts for secondary transmissions and by satellite carrier(s) below.       Image: Concerning Gross receipts for secondary transmissions       Image: Concerning Gross receipts for secondary transmissions for many provection for the secondary transmissions |  | FORM SA1-2E. PAGE  |
|--|--|--|
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended The 17, section 111(a)(1)(A), of the Copyright Act by adding the following sectorizer, and manutes Calcined from subscribers reading sectorizer interventions prusuant to section 119.  For more information on when to exclude these amounts, see the note on page (W) of the general instructions bucated in the paper SA1-2 form.  During the accounting period, dift the cable system exclude any amounts of gross receipts for secondary transmissions musuant to section 119.  For more information on when to exclude these amounts, see the note on page (W) of the general instructions bucated by satellite carriers to satellite did owners?  No  YES. Enter the total here and list the satellite carrier(s) below.  INTEREST ASSESSMENT  You must complete this worksheel for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest rates' and enter the sum here.  Line 1 Enter the amount of late payment or underpayment.  Line 2 Multiply line 1 by the interest rate' and enter the sum here.  Norree interest the interest rate chart dick on www. copyright gov/Renstang/inforest-rate, gd.  For lays a by 0.00274 <sup>11</sup> and enter here in space L, (gage B) block 1, line 2, or block 2 line 8, or block 3 line 6  |  | SYSTEM II  |
| The Statellite Home Verwer Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Copyright Act by adding the fol-<br>lowing sentence:       P         The determining the total number of subacribers and the gross amounts paid to the cable system for the basic<br>soriers and amounts collected 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<br>cocated in the paper SA1-2 form.       P         Image address       Image address       Image address         Image address       Image address       Image address       Image address         Image address       Image address       Image address       Image address       Image address         Image address       Image address       Image address       Image address       Image address       Image address         Image address <t< td=""><td>SERVICES INC</td><td>6091</td></t<>   | SERVICES INC   | 6091   |
| VES. Enter the total here and list the satellite carrier(s) below.       \$         Name       Name         Maining Address       Name         Maining Address       Name         Maining Address       Maining Address         INTEREST ASSESSMENT       Maining Address         For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Q         Line 1 Enter the amount of late payment or underpayment.   | <ul> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:</li> <li>"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."</li> <li>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.</li> <li>During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions</li> </ul> | P<br>Special Statement<br>Concerning Gross<br>Receipts Exclusion |
| Name       Name         Maling Address       Maling Address         INTEREST ASSESSMENT       Maling Address         You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.<br>For an explanation of interest rate* and enter the sum here       -       -       X   | X NO   |  |
| Mailing Address       Mailing Address       Image: 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.       Image: 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.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest rates and enter the sum here   | YES. Enter the total here and list the satellite carrier(s) below  |  |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments assessment for a late payment or underpayment.       Image: Complete this worksheet for those royalty payments assessment for one day late.       Image: Complete this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.       Image: Covering Address                              |  |  |
| You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Complete this worksheet for those royalty payments assessment for a late payment or underpayment.       Image: Complete this worksheet for those royalty payments assessment for one day late.       Image: Complete this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.       Image: Covering Address                              |  |  |
| x  | For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.  | Q<br>Interest Assessmen  |
| x  |  |  |
| Line 3 Multiply line 2 by the number of days late and enter the sum here   | x  |  |
| x 0.00274         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 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@loc.gov.         ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.         NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please         list below the owner, address, first community served, ID number, and accounting period as given in the original filing.         Owner         Address         ID number   | x         Line 2 Multiply line 1 by the interest rate* and enter the sum here  |  |
| <ul> <li>in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6</li></ul>  | xdays  |  |
| <ul> <li>in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6</li></ul>  | x       days         Line 3 Multiply line 2 by the number of days late and enter the sum here  |  |
| To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.     ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.  | x days Line 3 Multiply line 2 by the number of days late and enter the sum here  |  |
| contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.         ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.         NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.         Owner       Address         ID number       ID number  | x       days         Line 3 Multiply line 2 by the number of days late and enter the sum here       -         x 0.00274       -         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       \$   |  |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please<br>list below the owner, address, first community served, ID number, and accounting period as given in the original filing.   | Line 3 Multiply line 2 by the number of days late and enter the sum here       -         x 0.00274         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 charge)  |  |
| list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number   | x  |  |
| list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number   | Line 3       Multiply line 2 by the number of days late and enter the sum here       -         Line 3       Multiply line 2 by the number of days late and enter the sum here       -         k       0.00274         Line 4       Multiply line 3 by 0.00274** and enter here       -         in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6       -         * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf.       For further assistance please         contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.       For further assistance please   |  |
| Address<br>ID number   | Line 3 Multiply line 2 by the number of days late and enter the sum here       -         k       -   |  |
| Address ID number  | x  |  |
| ID number  | x  |  |
|  | x  |  |
| First community served   | x  |  |
|  | x  |  |

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