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 COPYRIG	FOR COPYRIGHT OFFICE USE ONLY					
or Seconda	ary Transmissions by	DATE RECEIVED	AMOUNT	 coplicsoa@copyright.gov 				
General instru	ems (Short Form) uctions are located o of this workbook	02/07/2023	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at Tel: (202) 707-8150				
Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT: ()	YYYY/(Period))					
	2019/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31					
		Barcode Data Filing Period (optiona	I - see instructions)					
Accounting Period								
В	Instructions: Give the full legal name of the owner of title of the subsidiary, not that of the p		sidiary of another corporation, give the full	corporate				
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							
	ProVision LLC							
	BUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFEREN	T)					
	MAILING ADDRESS OF OWNER	OF CABLE SYSTEM						
	PO Box 1728 (Number, street, rural route, apartment, or sui							
	(City, town, state, zip)							
С	INSTRUCTIONS: In line 1, give any bu							
System	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 IDENTIFICATION OF CABLE SYSTEM:							
	I MAILING ADDRESS OF CABLE SYSTEM:							
		te numbër)						
	(City, town, state, zip code)							

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 ID#
Numo	ProVision LLC	61979
D	Instructions: List each separate community served by the cable system. A "com "a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that as the "first community." Please use it as the first community on all future filing	ed communities within unincorporated areas and including single, /ou list will serve as a form of system identification hereafter known
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mo identified city.	bile home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	Johnston	IA
Community	(Mansions Of Hemingway)	*******
	๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛	
lows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:						-2E. PAGE
Name	ProVision LLC								
E Secondary Transmission Service: Sub- scribers and Rates	ProVision LLC 6197 SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be). Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable								
	systems most commonly provide that applies to your system. Not categories, that person or entity subscriber who pays extra for ca first set" and would be counted c Block 2: If your cable system I printed in block 1 (for example, t with the number of subscribers a sufficient.	e: Where an in should be cound ble service to once again und has rate catego iers of services	ndividua nted as additior ler "Ser ories fo s that in	al or organizatio a subscriber in nal sets would b vice to addition r secondary tra nclude one or m	n is receiv each app e included al set(s)." nsmission ore secon	ing service that licable category d in the count un service that are dary transmissi	: falls unde y. Example nder "Serv e different ons), list th	r different e: a residential ice to the from those nem, together	
	BLC	DCK 1					BLOC		
		NO. OF		DATE	CAT			NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CATI	EGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Service to first set		11	18.95					
	Service to additional set(s)			10.55					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								•••••
	- Non-residential								
F Services Other Than Secondary ransmissions: Rates	SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: 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.							nsmission) services both the program basis, t were not	
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RA
	Continuing Services:			ation: Non-res	idential				
	• Pay cable			otel, hotel					ļ
	Pay cable—add'l channel			mmercial					
	Fire protection			y cable					ļ
	•Burglar protection			y cable-add'l ch	annel				
	Installation: Residential			e protection					
	• First set	49.95		rglar protection					
	• Additional set(s)			services:					
	• FM radio (if separate rate)			connect		27.50			
	Converter			sconnect					
			• Ou	Itlet relocation					
				ove to new addr					1

counting Period: 2	2019/2			FORM SA1-2E. PAGE 3				
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#				
Name	ProVision LLC	61979						
	PRIMARY TRANSMITTERS:	TELEVISION						
G Primary Transmitters: Television	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations or authorizations: • Do <i>not</i> list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried <i>only</i> on a substitute basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network, "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for network), "N-M" (for network multicast), "I" (for independent), "I-M"							
	For the meaning of these te Column 4: Give the location	erms, see page (iv) of the general instru n of each station. For U.S. stations, list	uctions in the paper SA1-2 form. t the community to which the station	n is licensed by the				
	FCC. For Mexican or Canac	dian stations, if any, give the name of t	he community with which the station	n is identified.				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	woi	5	N	Ames, IA				
	KDSM	17	 	Des Moines, IA				
Rows as Necessary	KCCI	8	N	Des Moines, IA				
	KFPX	39	l	Newton, IA				
	KDIN	11	E	Des Moines, IA				
	who	13	N	Des Moines, IA				
	ксш	23		Ames, IA				
		• · · · · · · · · · · · · · · · · · · ·						
		•						

EGAL NAME OF ProVision LI								SYSTEM I 619
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) in the basis of i 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 abour m. lentify the call tate whether t the radio stat this by placing sive the station	y the sys be recein the Co sign of e the static ion's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see pag ed by the cable s re station is licens	adend, and (2 nna, during ca ge (v) of the g ystem as a se wed by the FC4) it can ertain st eneral ii eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S, II AITY,		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
CALL SIGN		5/0	LOCATION OF STATION	CALL SIGN		5/0	LOCATION OF STATION	

	od: 2019/2						FORM	VI SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	ProVision LLC							61979
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	INT AND PROGRAM LO	G			
I	In General: In space I, ident							
Orthoday	substitute basis during the a explanation of the programn							
Substitute Carriage:					ne general ins		ii tile paper o	
Special	1. SPECIAL STATEMEN	-		m carry, on a substitute ba		otwork to	lovision prog	rom
Statement and	о О		ui cable syster	in carry, on a substitute ba	515, any nom		· •	
Program Log	broadcast by a distant sta	luon?					YES	× NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer is	s "Yes," you r	nust comp	plete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI In General: List each subs			ate line. Use abbreviation	s wherever po	ossible if	their meaning	a is
	clear. If you need more spa							9.0
				vision program ("substitute				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general catego							
	"NBA Basketball: 76ers vs.	Bulls."				•		
				er "Yes." Otherwise enter ' casting the substitute progr				
				the community to which th		censed by	the FCC or,	in
	the case of Mexican or Car							
	Column 5: Give the more first. Example: for May 7 gi		when your sy	stem carried the substitute	e program. Us	se numera	als, with the n	nonth
			e substitute pr	ogram was carried by you	r cable svstei	n. List the	times accura	atelv
	to the nearest five minutes							5
	stated as "6:00–6:30 p.m."							ine el
	to delete under FCC rules			n was substituted for prog luring the accounting peric				
	was substituted for program							- 9
	effect on October 19, 1976							
		•						
		•			WHF		ITUTE	
	S	UBSTITUT	E PROGRAM	1	CARRI	N SUBST	CURRED	7. REASON FOR DELETION
	S 1. TITLE OF PROGRAM			4. STATION'S LOCATION		AGE OCO		7. REASON FOR DELETION
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
		UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		

Accounting Period:	2019/2 FORM SA1	-2E. PAGE 6.
Name		STEM ID#
	ProVision LLC	61979
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total c all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se 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.	151.36 s receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,80(• Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(See page (vi) of the general instructions located in the paper SA1-2 form for more information.	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-month accounting period is \$52.00	
	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 \$137,100)	
	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	0.00
	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) \$ 1,319.00	
	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 Fee and Total Remittance 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)	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	67.00
	EFT Trace # or TRANSACTION ID # 26NABHN4	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.	

Accounting Period:	2019/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: ProVision LLC	SYSTEM ID# 61979
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	7 30
N Individual to 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 Information	Name Donelda Koble Telephone 70	1 838-5776
	Address PO Box 1728 (Number, street, rural route, apartment, or suite number) Minot, ND 58702 (City, town, state, zip) Email Fax (optional)	
	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
O Certification	 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 B; of (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner 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 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)] 	em as identified
	X /s/ Darla Whitty 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: Darla Whitty Title: Vice President (Title of official position held in corporation or partnership)	
	Date: 2-4-20	

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.

By Carbon LLC SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONE Special Statistic from Viewer Act of 1988 amended Tile 17, section 1114(11(1)(1) of the Copyright Act by adding the following sentences The determining the total number of subscribers and the gross amounts paid to the able system for the basis series and amounts collected from subscribers for early and the gross amounts paid to the general instructions coated in the paper SA1-2 form. Driving the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmission made by satellite carriers to satellite dish owners? No Texes from the total here and list the satellite carrier(s) below. S Nume Maing Address Nume Line 1 Enter the total here and enter the sum here x	unting Period: 2019/2	FORM SA1-2E. PAGE 8
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Copyright Act by adding the follows: The Satellite Home Viewer Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Capyright Act by adding the follows: The Satellite Home Viewer Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Capyright Act by adding the follows: The Satellite Home Viewer Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Capyright Act by adding the follows: The Satellite Interming the total number of subscribers and the gross amounts paid to the cable system for the basic sections and amount Solided from subscribers receiving satellites present spectral pactometry transmissions pursuant to section 119. For more information on when to exclude these amounts, see the note on page (4i) of the general instructions located in the paper SA1-2 form. The Satellite carriers to satellite carrier(s) below: The Sate and the satellite carrier(s) below: The Sate and the satellite carrier(s) below: The sate and cancellite distribution of the general instructions located in the paper SA1-2 form. The analysis address The an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. The a subland Address The a Multiply line 1 by the interest rate* and enter the sum here The analysis address in the sate and enter the sum here The analysis address in the sate and carder here The in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6. The Sate and the Lobasing Division at (202) 707-3160 or locensing/@copyright.com The dential equivalent of 1385, which is the interest assessment for one day late. The sate mate chart click on www.copyright gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-3160 or locensing/@copyright.com The division at (202) 707-3160 or locensing/@copyright.com The division at (202) 707-3160 or locensing/@copyr		SYSTEM ID#
The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following seminors: P Indetermining the total number of subscribers and the gross amounts paid to the cable system for the basic or providing secondary transmissions opursuant to section 119.° P For more information on when to exclude these amounts, see the note on page (wil) of the general instructions Concerning the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. S During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. S Name Name Maining Address Numatic complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest rate' and enter the sum here. x 0.00274 Line 1 Enter the amount of late payment or underpayment. x 0.00274 Line 3 Multiply line 1 by the interest rate' and enter the sum here. x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter the sum here and stoches ang/microssing/interest-rate pdf. For further assistance please constant the Licensing Oxision at (202) 707-8150 or increasing/@copyright.gov/itensing/interest-rate pdf. For further assistance please constant the Licensing Oxision at (202) 707-8150 or increasing/@copyright.gov/itensing/interest-rate pdf. For further assistance please constant the Licensing Oxision at (202) 707-8150 or increasing@copyright.gov/itensing/interest-rate pdf. For further assistance please constant the Licensing Oxision at (202) 707-8150 or increasing@copyright.gov/itensing/interest-rate pdf. For further assistance please constant the Licensing Oxision at (202) 707-8150	Vision LLC	61979
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 VES. Enter the total here and list the satellite carrier(s) below. \$ Name Name Maining Address Name Interest ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Line 1 Enter the amount of late payment or underpayment	The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing 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 sub-	Special Statement Concerning Gross
made by satellite carriers to satellite dish owners? No VES. Enter the total here and list the satellite carrier(s) below. \$ Name Maing Address Maing Address Maing Address INTEREST ASSESSMENT Name 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 (vili) of the general instructions located in the paper SA1-2 form. Interest Assessment Line 1 Enter the amount of late payment or underpayment.		Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below. \$ Name Maining Address Maining Address Maining Address INTEREST ASSESSMENT Maining 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. 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 where complete the sum here complete the su	made by satellite carriers to satellite dish owners?	
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(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@copyright.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 First community served	Line 4 Multiply line 3 by 0.00274** and enter 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@copyright.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.		
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