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

Return completed workbook

for Secondary Cable Systen	NT OF ACCOUNT y Transmissions by ns (Short Form) tions are located f this workbook ACCOUNTING PERIOD COVERED	DATE RECEIVED	AMOUNT \$ ALLOCATION NUMBER	coplicsoa@copyright.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
General instruct	tions are located f this workbook	9/1/2020		For additional information, contact the U.S. Copyright Office Licensing Division at:
	ACCOUNTING PERIOD COVERED			
Α		BY THIS STATEMENT: (Y	YYY/(Period))	
Accounting	2020/1 20201	Period 1 = January 1 - June 30 Barcode Data Filing Period (option	Period 2 = July 1 - December 31 al - see instructions)	
Period				
В	of the subsidiary, not that of the parent co	prporation.	idiary of another corporation, give the full co	rporate title
Owner	List any other name or names under which If there were different owners during the single statement of account and royalty fe	accounting period, only the owner on	the last day of the accounting period should	
-	Check here if this is the system's first filing	: If not, enter the system's ID number	assigned by the Licensing Division.	023513
	LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
	CEQUEL COMMUNICATIONS LLC			
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFEREN	Γ)	
	SUDDENLINK COMMUNICATIONS			
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
	3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite n	umber)		
-	(City, town, state, zip)			
	INSTRUCTIONS: In line 1, give any busin names already appear in space B. In line			
System	IDENTIFICATION OF CABLE SYSTEM:			
-	¹ GATESVILLE, TX			
	MAILING ADDRESS OF CABLE SYSTEM	:		
	2 (Number, street, rural route, apartment, or suite n	umber)		
	(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#
Name	CEQUEL COMMUNICATIONS LLC	023513
D	Instructions: List each separate community served by the cable system. A "a separate and distinct community or municipal entity (including unincorp discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community as the "first community." Please use it as the first community on all future	"community" is the same as a "community unit" as defined in FCC rules: porated communities within unincorporated areas and including single, that you list will serve as a form of system identification hereafter known
Area	Note: Entities and properties such as hotels, apartments, condominiums, o identified city.	
Served		
	CITY OR TOWN	STATE
First	GATESVILLE	ТХ
Community	FORT GATES	TX
Add Rows as Necessary		

	1						FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM						
	CEQUEL COMMUNICAT	FIONS LLC						02351
-	SECONDARY TRANSMISSION	I SERVICE: SL	IBSCRIBERS	AND RATES				
E	In General: The information in s							
Coordon	system, that is, the retransmission							
Secondary Transmission	about other services (including particular about other services (including particular about the accounting period					lnose exis	ung on the	
Service: Sub-	Number of Subscribers: Both					ble systen	n, broken	
scribers and	down by categories of secondar	•	-	•				
Rates	each category by counting the n separately for the particular service				•		s charged	
	Rate: Give the standard rate of						ge and the	
	unit in which it is generally billed	-					-	
	category, but do not include disc		•					
	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					nder "Serv	ice to the	
	first set" and would be counted of Block 2: If your cable system					different	from those	
	printed in block 1 (for example, t	-		•				
	with the number of subscribers a				•			
	sufficient.							
	BLO	DCK 1 NO. OF				BLOC	K 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		TE CA	TEGORY OF SEI	RVICE	SUBSCRIBERS	RATE
	Residential:							
	Service to first set		71	34.99				
	 Service to additional set(s) 							
	• FM radio (if separate rate)							
	Motel, hotel							
	Commercial		15	45.95				
	Converter							
	Residential							
	Non-residential							
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISSIONS	: RATES				
F	In General: Space F calls for ra	•	,	•	• •			
•	not covered in space E, that is, t service for a single fee. There a				,	,		
Services	furnished at cost or (2) services		,	0		0 (/	
Other Than	amount of the charge and the ur		usually billed.	If any rates are	charged on a var	iable per-p	rogram basis,	
Secondary	enter only the letters "PP" in the Block 1: Give the standard rate		ha aabla avata	m for each of the	o oppliaablo oog <i>i</i>	ana liatad		
ransmissions: Rates	Block 2: List any services that						t were not	
	listed in block 1 and for which a	• •				-		
	brief (two- or three-word) descrip	otion and inclue	le the rate for	each.				
		BLO	CK 1				BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEGORY	OF SERVICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:		Installation: I	Non-residential				
	• Pay cable	17.00	 Motel, hot 	el				
	 Pay cable—add'l channel 	19.00	 Commerci 					
	 Fire protection 		Pay cable					
			-	-add'l channel				
	•Burglar protection			ation				
	Installation: Residential		Fire prote					
	Installation: Residential • First set	99.00	• Burglar pr	otection				
	Installation: Residential • First set • Additional set(s)		• Burglar pr Other service	otection es:				
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)		• Burglar pr Other service • Reconnec	otection e s: t	40.00			
	Installation: Residential • First set • Additional set(s)		• Burglar pr Other service • Reconnec • Disconnec	otection e s: t t				
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)		• Burglar pr Other service • Reconnec	otection s s: t st scation	40.00 25.00 99.00			

counting Period: 2	2020/1			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
	CEQUEL COMMUNIC	ATIONS LLC		023513
G Primary Transmitters: Television	carried by your cable syster FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as 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 the Column 2: Give the channel of license. For example, Wi Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these te Column 4: Give the location	ntify every television station (including in during the accounting period, <i>except</i> in effect on June 24, 1981, permitting t b)(2) and (4), or 76.63 (referring to 76.6 is explained in the next paragraph. With respect to any distant stations of les, regulations, or authorizations: in space G—but do list it in space I (f a substitute basis. also in space I, if the station was carrien in concerning substitute basis stations i's call sign. <i>Do not</i> report origination with a station according to its over-th	at (1) stations carried only on a part-tin the carriage of certain network program 51(e)(2) and (4))]; and (2) certain stati arried by your cable system on a sub- the Special Statement and Program L and both on a substitute basis and also be see page (v) of the general instruction program services such as HBO, ESPI e-air designation. For example, repor evision station for broadcasting over the station, an independent station, or a (for network multicast), "I" (for independent or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is	me basis under ms [sections ons carried on a stitute program og)—if the on some other ons. N, etc. Identify each t multistream he air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KAKW-1	62	1	KILLEEN, TX
	KCEN-1	6	N	TEMPLE, TX
ows as Necessary	KNCT-1	46	E	BELTON, TX
is as neecosary	KRMA-1	6	E	DENVER, CO
	KTBC-1	7		AUSTIN, TX
	KWKT-1	44		WACO, TX
	KWTX-1	10	N	WACO, TX
	KXXV-1	25	N	WACO, TX
	KYLE-1			BRYAN, TX
		28		BRIAN, IA

LEGAL NAME OI								SYSTEM 023
	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 for detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation about rm. dentify the call tate whether to the radio stat this by placing Sive the station	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	It the system's h system's FM an this point, see p sed by the cable ne station is lice	eadend, and (2 tenna, during c age (v) of the <u>c</u> system as a se nsed by the FC	2) it can ærtain st general in 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	
CALL SIGN		3/D	LOCATION OF STATION	CALL SIGN		3/D	LOCATION OF STATION	
						<u> </u>		
						<u> </u>		
						<u> </u>		
						·		
						·		
					+			

Accounting Perio							FOR	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF							SYSTEM ID#
Name	CEQUEL COMMUNICA	ATIONS L	LC					023513
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LC	G			
I I	In General: In space I, ident	-	-			tion that vo	our cable svs	tem carried on a
-	substitute basis during the a							
Substitute	explanation of the programm	ning that mu	ist be included	in this log, see page (v) of t	he general in	structions ir	the paper S	A1-2 form.
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
	-		reat of this no	an blank. If your anower i	- "Vee " veu	-	-	
	Note: If your answer is "No	, leave the	e rest of this pa	age blank. If your answer i	s res, you	must comp	lete the prog	gram
	log in block 2. 2. LOG OF SUBSTITUTI							
	In General: List each subs			ate line. Use abbreviation	s wherever n	ossihle ift	heir meanin	n is
	clear. If you need more spa				5 Wherever p	0001010, 11 0		910
	Column 1: Give the title	of every no	onnetwork tele	vision program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.			erball. List specific progra		example, i	LOVE LUCY	01
	_		dcast live, ent	er "Yes." Otherwise enter	"No."			
				casting the substitute prog				
	Column 4: Give the broat the case of Mexican or Car			the community to which th			the FCC or,	in
				stem carried the substitute			ls with the r	nonth
	first. Example: for May 7 gi		when your sy		s program. O	se numera		nontin
			e substitute pr	ogram was carried by you	r cable syste	m. List the	times accur	ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:0	1:15 p.m. to 6	6:28:30 p.m	i. should be	-
	stated as "6:00–6:30 p.m."	or "D" if the	listed program	n waa aubatitutad far nrag	ransming that	t vour ovet		uire d
	to delete under FCC rules			n was substituted for prog				
	was substituted for program							ogram
	effect on October 19, 1976		, ,	·		0		
			E PROGRAM	A		N SUBST		7. REASON FOR
		2. LIVE?	3. STATION'S		5. MONTH			DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY		— то	
							_	
					·			
							_	
							_	
							_	
							_	
							· · · · · · · · · · · · · · · · · ·	
							_	
							_	
							_	
							_	

Accounting Period:	2020/1	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 023513
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmiss (as identified in space E) during the accounting period. For a further explanation of how to compute this an 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.	sion service nount, se
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 \$26 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.	3,80(
	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 accounting period is \$52.00	six-month
	Line 1. Royalty fee for accounting period	\$ 52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	\$ 52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	
	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	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600	0)
	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)	<u>. </u>
	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)	15.00
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	67.00
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of 0 See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more i	

Accounting Period:	2020/1							FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER O							SYSTEM ID 02351
M Channels	CHANNELS Instructions: You must g to its subscribers, and (2) 1. Enter the total number system carried television 2. Enter the total number on which the cable syste and nonbroadcast service	the cable system's to of channels on which of broadcast stations of activated channel em carried television	total number o ch the cable s els n broadcast sta	of activated channels	during the ad	ccounting period.		9 123
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CON we can contact about this		unt.)	ATION IS NEEDED ((Identify an in	ndividual to whom		(903) 579-3152
for Further Information	Address 3015 (Number, TYLE	S SE LOOP 323 street, rural route, apart R, TX 75701 n, state, zip)	3	mber)			Telephone	(903) 579-3152
O Certification	(Agent of owner in line 1 of s	y certify that (Check of nan corporation or p r other than corpor pace B and that the of ther) I am an officer pace B. Iment of account and rect to the best of my 986)]	nust be certified one, <i>but only or</i> partnership) I : ration or partn owner is not a d of (if a corporation d hereby declar hy knowledge, ir <u>X</u> /s Enter an elect Enter signatur	d and signed in acco ne, of the boxes.) am the owner of the o ership) I am the duly corporation or partner n) or a partner (if a pa e under penalty of lan formation, and belief / Alan Dannenba tronic signature on the re using an "/s/ signat	cable system r authorized aq rship; or artnership) of w that all state f, and are mad aum e line above to ure" (e.g., /s/	Copyright Office as identified in lin gent of the owner the legal entity id ements of fact cor de in good faith.	regulations) ne 1 of space r of the cable : entified as ow	system as identified mer of the cable system
		Typed or printer Title: (Title of c	SVP, PRO	LAN DANNENE				
		Date:				8/14/2020	0	

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 STA The Satellite Hon lowing sentence: "In determ service of scribers a For more informa located in the pap During the accou	mining the total number of subscribers and the g of providing secondary transmissions of primary to and amounts collected from subscribers receivin nation on when to exclude these amounts, see the aper SA1-2 form.	on 111(d)(1)(A), of the gross amounts paid to broadcast transmitters ng secondary transmis	Copyright Act by a the cable system f a, the system shall sions pursuant to	for the basic not include sub- section 119."	SYSTEM 0235 P Special Statemen Concerning Gros
SPECIAL STA The Satellite Hon lowing sentence: "In determ service of scribers a For more informa located in the pap During the accou	TATEMENT CONCERNING GROSS REP ome Viewer Act of 1988 amended Title 17, sectio e: mining the total number of subscribers and the g of providing secondary transmissions of primary b and amounts collected from subscribers receivin nation on when to exclude these amounts, see the aper SA1-2 form.	on 111(d)(1)(A), of the gross amounts paid to broadcast transmitters ng secondary transmis	Copyright Act by a the cable system f a, the system shall sions pursuant to	for the basic not include sub- section 119."	P Special Statemen Concerning Gros
The Satellite Hon lowing sentence: "In determ service of scribers a For more informa located in the pap During the accou	ome Viewer Act of 1988 amended Title 17, sectione: mining the total number of subscribers and the g of providing secondary transmissions of primary b and amounts collected from subscribers receivin mation on when to exclude these amounts, see the aper SA1-2 form.	on 111(d)(1)(A), of the gross amounts paid to broadcast transmitters ng secondary transmis	Copyright Act by a the cable system f a, the system shall sions pursuant to	for the basic not include sub- section 119."	Special Statemer Concerning Gros
X NO	bunting period, did the cable system exclude any te carriers to satellite dish owners?	-			Receipts Exclusion
YES. Enter th	the total here and list the satellite carrier(s) below	w	\$		
Name Mailing Address		Name Mailing Address			-
•					
Line 1 Enter the	lete this worksheet for those royalty payments su tion of interest assessment, see page (viii) of the ne amount of late payment or underpayment	general instructions lo	ocated in the paper		Q Interest Assessme
	tion of interest assessment, see page (viii) of the ne amount of late payment or underpayment	general instructions lo	x		Q Interest Assessme
	tion of interest assessment, see page (viii) of the	general instructions lo	x	r SA1-2 form.	Q Interest Assessme
Line 2 Multiply li	tion of interest assessment, see page (viii) of the ne amount of late payment or underpayment	general instructions lo	x	r SA1-2 form.	Q Interest Assessme
Line 2 Multiply li Line 3 Multiply li	tion of interest assessment, see page (viii) of the ne amount of late payment or underpayment	general instructions lo	x	r SA1-2 form. - days	Q Interest Assessme
Line 2 Multiply li Line 3 Multiply li Line 4 Multiply li	tion of interest assessment, see page (viii) of the ne amount of late payment or underpayment I line 1 by the interest rate* and enter the sum her I line 2 by the number of days late and enter the s	general instructions lo	x	r SA1-2 form. - days - < 0.00274 -	Q Interest Assessme
Line 2 Multiply li Line 3 Multiply li Line 4 Multiply li in space L * To view the	tion of interest assessment, see page (viii) of the ne amount of late payment or underpayment r line 1 by the interest rate* and enter the sum her r line 2 by the number of days late and enter the s	general instructions lo	x x x x x x x x x x x x x x x x x x x	r SA1-2 form. - days - (0.00274 - erest charge)	Q Interest Assessme
Line 2 Multiply li Line 3 Multiply li Line 4 Multiply li in space L * To view the contact the	tion of interest assessment, see page (viii) of the ne amount of late payment or underpayment v line 1 by the interest rate* and enter the sum her v line 2 by the number of days late and enter the s v line 3 by 0.00274** and enter here e L, (page 6) block 1, line 2, or block 2 line 8, or b e interest rate chart click on <i>www.copyright.gov/l</i>	general instructions lo	x x x x x x x x x x x x x x x x x x x	r SA1-2 form. - days - (0.00274 - erest charge)	Q Interest Assessme
Line 2 Multiply li Line 3 Multiply li Line 4 Multiply li in space L * To view the contact the ** This is the o NOTE: If you are	tion of interest assessment, see page (viii) of the ne amount of late payment or underpayment I line 1 by the interest rate* and enter the sum her I line 2 by the number of days late and enter the s I line 3 by 0.00274** and enter here E L, (page 6) block 1, line 2, or block 2 line 8, or b e interest rate chart click on <i>www.copyright.gov/l</i> e Licensing Division at (202) 707-8150 or licensir	general instructions lo pre sum here plock 3 line 6 <i>licensing/interest-rate.</i> ng@copyright.gov. st assessment for one ccount already submit	x x x x x x x x x x x x x x x x x x x	r SA1-2 form. - days - (0.00274 - erest charge) ssistance please ht Office, please	Q Interest Assessme
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