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

STATEMI	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:	
	ry Transmissions by	DATE RECEIVED	AMOUNT	_	
	ms (Short Form)	8/30/21	\$	<u>coplicsoa@copyright.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at:	
General instru	ictions are located	0/30/21			
in the first tab	of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150	
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))		
		1			
	2021/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31		
		-			
	20211	Barcode Data Filing Period (optiona	I - see instructions)		
Accounting Period					
	Instructions:				
В	Give the full legal name of the owner of t title of the subsidiary, not that of the par		sidiary of another corporation, give the full	corporate	
Owner	List any other name or names under whi	ch the owner conducts the business of	the cable system.		
			n the last day of the accounting period shoul	d submit a	
	single statement of account and royalty f				
	Check here if this is the system's first filir	g. If not, enter the system's ID numbe	r assigned by the Licensing Division.	063687	
	LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM	Λ		
	CEQUEL COMMUNICATIONS LLC				
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFEREN	T)		
	SUDDENLINK COMMUNICATIONS				
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM			
	3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite r	umber)			
	TYLER, TX 75701				
	(City, town, state, zip)	none or trade names used to ide	antify the business and operation of t	ha avetam uplace these	
С	names already appear in space B. In line				
System	IDENTIFICATION OF CABLE SYSTEM:				
	ROBINSON CORRECTION				
	MAILING ADDRESS OF CABLE SYSTEN	l:			
	2 (Number, street, rural route, apartment, or suite r	umber)			
	(City, town, state, zip code)				
Privacy Act Notic	e: Section 111 of title 17 of the United States Code au	thorizes the Copyright Offce to collect th	ne personally identifying information (PII) reque	ested 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 ID					
Name	CEQUEL COMMUNICATIONS LLC	06368					
D Area Served	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter knowr as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.						
Serveu							
	CITY OR TOWN	STATE					
First		IL					
Community	(ROBINSON CORRECTIONAL CENTER)	IL.					
dd Rows as Necessary							
au nows as necessary							

								FORM SA1-			
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:										
	CEQUEL COMMUNICAT			06368							
-	SECONDARY TRANSMISSION	SERVICE: SI	JBSCR	IBERS AND R	ATES						
E	In General: The information in s			-		•					
<u> </u>	system, that is, the retransmission										
Secondary Transmission	about other services (including p						inose exist	ing on the			
Service: Sub-	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										
scribers and	<b>Number of Subscribers:</b> 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										
Rates	each category by counting the n			0,0			,	s charged			
	separately for the particular serv					•	,	na and the			
	<b>Rate:</b> Give the standard rate of unit in which it is generally billed	-	-	•				-			
	category, but do not include disc	· ·		,	iny standa		5 Within a				
	Block 1: In the left-hand block				ries of sec	ondary transmis	sion servi	ce that cable			
	systems most commonly provide										
	that applies to your system. Not			-		-					
	categories, that person or entity subscriber who pays extra for ca					0,	•				
	first set" and would be counted of										
	Block 2: If your cable system	has rate categ	ories fo	r secondary tra	nsmission	service that are	different f	rom those			
	printed in block 1 (for example, t						,.				
	with the number of subscribers a sufficient.	and rates, in th	e right-l	hand block. A t	vo- or thre	e-word descript	ion of the s	service is			
		DCK 1					BLOCK	(2			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF		NO. OF SUBSCRIBERS	RATE		
	Residential:	SUBSCRID	EKS	RATE	CAT	LOOKT OF SEP	VICE	SUBSCRIBERS	NAT		
	Service to first set		0	-							
	Service to additional set(s)		Ŭ	- 0							
	• FM radio (if separate rate)		<b>v</b>								
	Motel, hotel										
	Commercial		79	42.41							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	S						
F	In General: Space F calls for ra	•	,		-	• •					
I	not covered in space E, that is, t service for a single fee. There ar					,	,				
Services	furnished at cost or (2) services	•			0		0.	,			
Other Than											
Secondary	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.										
Transmissions:	<b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed.										
Rates	<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) descrip										
		BLO	CK 1				BLOCK 2				
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RATE		
	Continuing Services:		Install	ation: Non-res	idential						
	• Pay cable	-	• Mo	tel, hotel							
	Pay cable—add'l channel	-	• Co	mmercial							
	Fire protection		•Pa	y cable							
	•Burglar protection		•Pa	y cable-add'l ch	annel						
	Installation: Residential		• Fire	e protection							
	• First set	-	• Bu	rglar protection							
	<ul> <li>Additional set(s)</li> </ul>	-	Other	services:							
	• FM radio (if separate rate)		•Re	connect		-					
	• Converter		• Dis	connect							
	1	I					Γ				
			•Ou	tlet relocation		-					
				tlet relocation ve to new addr	ess	-					

ng Period:	2021/1			FORM SA1-2E. PAG					
ame	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM I					
ame		ATIONS LLC		06368					
	PRIMARY TRANSMITTERS: TELEVISION								
G mary mitters: vision	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. <b>Substitute Basis Stations</b> : With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, 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 stations, see page (v) of the general instructions. <b>Column 1:</b> 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. <b>Column 2:</b> 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. <b>Column 3:</b> 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 noncommercial educational), or "E-M" (for noncommercial educational multicast). For the maning of these terms, see page (v) of the general instructional multicast). For the maning of these terms, see page (v) of the general instructions. <b>Column 2:</b> Give the channel number the FCC assigned to the television station for broadcasting over the air in								
		dian stations, if any, give the name of th	2	5					
	14/ 4 14/1 / 4	20	N						
		38	N	TERRE HAUTE, IN					
	WTHI-1	10	N	TERRE HAUTE, IN					
cessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
≥cessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
ecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
cessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
cessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
ecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
cessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
ecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
ecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
ecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
lecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
lecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
lecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
Vecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
Vecessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
Necessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
Necessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
5 Necessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
s Necessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
s Necessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					
s Necessary	WTHI-1	10	N	TERRE HAUTE, IN					
	WTHI-2	10.2	I-M	TERRE HAUTE, IN					
	WTWO-1	2	N	TERRE HAUTE, IN					

CEQUEL CO	MMUNICA	TIONS	LLC						0630
	every radio s	tation ca	rried on a separate and discr nerally receivable by your cat						н
eceivable if (1) in the basis of i for detailed info aper SA1-2 for <b>Column 1:</b> lo <b>Column 2:</b> S <b>Column 3:</b> If ignal, indicate <b>Column 4:</b> G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Co sign of e he static ion's sign g a check n's locatio	I-Band FM Carriage: Under of tem whenever it is received a ved at the headend, with the pyright Office regulations on each station carried. In is AM or FM. hal was electronically process of mark in the "S/D" column. on (the community to which the the community with which the	at s th se	the system's he ystem's FM ante is point, see pag d by the cable s e station is licens	adend, and (2 nna, during c ge (v) of the g ystem as a se sed by the FC	ertain st ertain st eneral ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
OALL SIGN		30	LOCATION OF STATION	H	CALL SIGN		3/0	LOGATION OF STATION	
				••					

	od: 2021/1						L. L.	ORM SA1-2E. PAGE 5		
Name								SYSTEM ID#		
	CEQUEL COMMUNIC	ATIONS L						063687		
I	SUBSTITUTE CARRIAG In General: In space I, iden substitute basis during the a	tify every no accounting p	nnetwork telev period, under sp	<i>ision program,</i> broadcast by becific present and former F	a <i>distant</i> sta CC rules, reg	ulations, o	r authoriza	ations. For a further		
Substitute	explanation of the programn	ning that mu	ist be included	in this log, see page (v) of t	he general ins	structions i	n the pape	er SA1-2 form.		
Carriage: Special	1. SPECIAL STATEMEN									
Statement and	с с.		ur cable systei	m carry, on a substitute ba	sis, any nonr	etwork te				
Program Log	broadcast by a distant station?									
	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 p	orogram		
	log in block 2. 2. LOG OF SUBSTITUT In General: List each subs			ate line. Use abbreviations	s wherever po	ossible, if	their mea	ning is		
	period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. <b>Column 2:</b> If the program	e of every no a distant sta egulations, o ries like "mo . Bulls." m was broa	onnetwork tele tion and that y or authorizatio ovies" or "bask idcast live, ent	vision program ("substitute rour cable system substitut ns. See page (v) of the ge	ed for the pro neral instruct im titles, for e 'No."	ogrammin ions for fu	, g of anoth rther infor	er station mation.		
	Column 4: Give the bro the case of Mexican or Cal Column 5: Give the mo first. Example: for May 7 gi	adcast stati nadian stati nth and day ive "5/7."	on's location ( ons, if any, the when your sy	the community to which the community with which the stem carried the substitute	e station is lic e station is id e program. Us	entified). se numera	als, with th	ne month		
	Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in									
	effect on October 19, 1976	1	WHEN SUBSTITUTE CARRIAGE OCCURRED			7. REASON FOR DELETION				
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. FROM	TIMES			
					·					
					·					
					· · · · · · · · · · · · · · · · · · ·					

Accounting Period:	<b>2021/1</b> FORM SA1-2E. PAG	GE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM	
Hame	CEQUEL COMMUNICATIONS LLC 0630	687
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.	
	COPYRIGHT ROYALTY FEE	
L Copyright Royalty Fee	Instructions: To compute the royalty fee you owe Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$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	0
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 \$ 52.00	0
	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	
		<u> </u>
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
	1. Enter the amount of gross receipts from space K	
	2. Base amount under statutory formula \$ 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 0.00	
	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	
Due	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	0
	EFT Trace # or TRANSACTION ID #	
	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:	2021/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 063687
<b>M</b> 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 .	5 44
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		(903) 579-3152
	Address 3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number) TYLER, TX 75701 (City, town, state, zip)	
	Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional)	
<b>O</b> Certification	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)         • 1, the undersigned, hereby certify that (Check one, but only one, of the boxes.)         (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space         (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or         X       (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ov 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 hereizare 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)]         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:       ALAN DANNENBAUM         Title:       SVP, PROGRAMMING         (Title of official position held in corporation or partnership)	system as identified /ner of the cable system
	Date: 7/22/2021	

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 it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.

unting Period: 2		FORM SA1-2E. PAGE
AL NAME OF OW	IER OF CABLE SYSTEM:	SYSTEM II
	UNICATIONS LLC	06368
The Satellite He lowing sentence "In deter service scribers	mining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statemen Concerning Gross Receipts Exclusio
	nation on when to exclude these amounts, see the note on page (vii) of the general instructions aper SA1-2 form.	
-	ounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions te carriers to satellite dish owners?	
	the total here and list the satellite carrier(s) below	
Name Mailing Address	Image: Name     Mailing Address	
	ASSESSMENT	
You must comp	blete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. tion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter tl	ne amount of late payment or underpayment	Interest Assessme
	x	
Line 2 Multinh	/ line 1 by the interest rate* and enter the sum here	
	·	
	xdays	
Line 3 Multiply	line 2 by the number of days late and enter the sum here	
	x 0.00274	
	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	
	e interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf.</i> For further assistance please e Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
** This is th	e decimal equivalent of 1/365, which is the interest assessment for one day late.	
	re filing this worksheet covering a statement of account already submitted to the Copyright Office, please wner, address, first community served, ID number, and accounting period as given in the original filing.	
-		
list below the o		
list below the or Owner		
list below the o		
list below the or Owner		
list below the or Owner Address	/ served	

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