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 COPYRIGH	HT OFFICE USE ONLY	Return completed workboo by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instructions are located in the first tab of this workbook	08/22/2022	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at Tel: (202) 707-8150

A	ACC	COUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
В		Instructions: 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	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		Zito Media	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		PO Box 665 (Number, street, rural route, apartment, or suite number)	
		Coudersport, PA 16915 (City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these es 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: Zito Media - Denmark	
		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 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 suffciency of the fling, a determination that would be made by a court of law.

		FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	
	Zito NCTNWVPAOH LLC	401
D	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated cor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis as the "first community." Please use it as the first community on all future filings.	mmunities within unincorporated areas and including single
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile he identified city.	ome parks should be reported in parentheses below the
Serveu		
First	CITY OR TOWN Denmark Township	STATE OH
First Community		
Community	Monroe Township	ОН
	Jefferson Township	ОН
ld Rows as Necessary	Sheffield Township	ОН
	Plymouth Township	ОН
	Pierpoint Township	ОН
	Dorset Township	ОН
	······································	

	LEGAL NAME OF OWNER OF C							FORM SA1	TEM I
Name								515	4011
	Zito NCTNWVPAOH LLC	,							
Е	SECONDARY TRANSMISSION								
E	In General: The information in s								
Secondary	system, that is, the retransmission about other services (including p								
Fransmission	last day of the accounting period								
Service: Sub-	Number of Subscribers: Both	h blocks in spa	ce E call	for the number	r of subsc	ribers to the cab			
scribers and	down by categories of secondary								
Rates	each category by counting the n							charged	
	separately for the particular serv Rate: Give the standard rate c							e and the	
	unit in which it is generally billed								
	category, but do not include disc	ounts allowed	for advar	nce payment.	-				
	Block 1: In the left-hand block								
	systems most commonly provide that applies to your system. Note								
	categories, that person or entity								
	subscriber who pays extra for ca								
	first set" and would be counted of								
	Block 2: If your cable system printed in block 1 (for example, t								
	with the number of subscribers a								
	sufficient.								
	BLO	DCK 1	·				BLOCK		1
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:								
	Service to first set		18	21.71					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
_	SERVICES OTHER THAN SEC In General: Space F calls for rat					l vour cable syst	em's servi	ces that were	
F	not covered in space E, that is, t		,		•	• •			
	service for a single fee. There ar								
Services	furnished at cost or (2) services								
Other Than Secondary	amount of the charge and the un enter only the letters "PP" in the		usually r	billed. If any rat	es are ch	arged on a varia	ible per-pro	ogram basis,	
ransmissions:	Block 1: Give the standard rat		he cable	system for eac	ch of the a	applicable servic	es listed.		
Rates	Block 2: List any services that	• •			-	• •			
	listed in block 1 and for which a				hed. List	these other serv	ices in the	form of a	
	brief (two- or three-word) descrip			e for each.			T		
	CATEGORY OF SERVICE	BLO RATE				RATE	CATECO	BLOCK 2 DRY OF SERVICE	RAT
	Continuing Services:	NATE		ORY OF SER\ tion: Non-resi		NATE	CATEGO	DRT OF SERVICE	IVAT
	Pay cable			el, hotel	acintiai				
	Pay cable—add'l channel			mercial					
	• Fire protection		• Pay						
	•Burglar protection		-	cable-add'l ch	annel				
	Installation: Residential			protection					
	• First set	30.00		lar protection					
	Additional set(s)	20.00	-	ervices:					
	• FM radio (if separate rate)	_0.00		onnect		30.00			
						00.00			
	· · · ,		• Disc	onnect					
	• Converter			onnect et relocation		30.00			
	· · · ,		• Outl	onnect et relocation e to new addre	ess	30.00 30.00			

accounting Period: 2	2022/1			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
Name	Zito NCTNWVPAOH L	LC		40113
G Primary Transmitters:	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e	ntify every television station (including n during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting t	y translator stations and low power tele t (1) stations carried only on a part-tin he carriage of certain network progran 61(e)(2) and (4))]; and (2) certain static	ne basis under ns [sections
Television	Substitute Basis Stations: basis under specific FCC rul • Do not list the station here station was carried only on a • List the station here, and a basis. For further information Column 1: List each station multicast stream associated "WETA-2" as the same on th Column 2: Give the channe of license. For example, WF Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	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. Iso in space I, if the station was carrien n concerning substitute basis stations 's call sign. <i>Do not</i> report origination with a station according to its over-th ne form. I number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instr- n of each station. For U.S. stations, lis	arried by your cable system on a subs the Special Statement and Program Lo ed both on a substitute basis and also of , see page (v) of the general instruction program services such as HBO, ESPN e-air designation. For example, report evision station for broadcasting over the station, an independent station, or a r (for network multicast), "I" (for indeper or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is the community with which the station is	bg)—if the on some other ns. N, etc. Identify each t multistream the air in its community noncommercial ident), "I-M" nal multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WEWS	5.1	Ν	Cleveland OH
	WJW	8.1	N	Cleveland OH
ld Rows as Necessary	WKYC	3.1	Ν	Cleveland OH
	WOIO	19	Ν	Shaker Heights OH
	WUAB	43.1		Lorain OH
	WVIZ	25.1	E	Cleveland OH
	WVPX	23.1		Akron OH
	WOIO	19.3	I	Shaker Heights OH

U.S. Copyright Office

EGAL NAME OF LITO NCTNW								SYSTEM I 401
		-						40
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) n the basis of or detailed info aper 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 Co sign of e the static ion's sig g a checl n's locati	I-Band FM Carriage: Under of them whenever it is received a wed at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see pa sed by the cable s he station is licent	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st jeneral i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
		1	1	1				
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio							FOR	RM SA1-2E. PAGE 5.
Neme	LEGAL NAME OF OWNER OF		TEM:					SYSTEM ID#
Name	Zito NCTNWVPAOH LI	LC						40113
	SUBSTITUTE CARRIAGI	E: SPECIA		NT AND PROGRAM LO	G			
Ι	In General: In space I, identi substitute basis during the a	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regul	ations, or au	thorizations.	. For a further
Substitute	explanation of the programm				e general instr	uctions in th	e paper SA1	-2 torm.
Carriage: Special	1. SPECIAL STATEMEN	-				hunder falsed	-!	
Statement and	During the accounting per	•	r cable system	carry, on a substitute basi	is, any nonne	work televi		
Program Log	broadcast by a distant sta	tion?				L	YES	X NO
	Note: If your answer is "No"	", leave the	rest of this pag	e blank. If your answer is '	"Yes," you mu	ist complete	e the progra	m
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subst clear. If you need more spa				wherever pos	sible, if thei	r meaning is	5
				ision program ("substitute	program") tha	t, during the	e accounting	9
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor	gulations, o ies like "mo	r authorization: vies" or "baske	s. See page (v) of the gene thall " List specific program	eral instruction	ns for furthe	er information	n.
	"NBA Basketball: 76ers vs.			ibali. List specific program		ampie, i Lo	We Lucy of	
				r "Yes." Otherwise enter "N				
				isting the substitute progra ne community to which the		need by the	ECC or in	
	the case of Mexican or Can						; r c c oi, in	
	Column 5: Give the mor	nth and day		tem carried the substitute			with the mo	nth
	first. Example: for May 7 giv		aubatituta pro	arom was corriad by your	aabla avatam	list the tim		sh.,
	to the nearest five minutes.			gram was carried by your or ed by a system from 6.01.1				ery
	stated as "6:00–6:30 p.m."							
				was substituted for progra				
	to delete under FCC rules a	and regulation	ons in effect du	ring the accounting period	; enter the let		e listea progi	ram
	was substituted for program	nming that v	our system wa		r FCC rules a	nd regulation	ons in	
	was substituted for program effect on October 19, 1976.		our system wa	s permitted to delete unde	r FCC rules a	nd regulatio	ons in	
			our system wa					
	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE	N SUBSTI	TUTE URRED	7. REASON FOR
	effect on October 19, 1976.			s permitted to delete unde	WHE	N SUBSTI	TUTE	
	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBSTI AGE OCC 6. 1	TUTE URRED TIMES	7. REASON FOR
	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBSTI AGE OCC 6. 1	TUTE URRED TIMES	7. REASON FOR
	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBSTI AGE OCC 6. 1	TUTE URRED TIMES	7. REASON FOR
	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBSTI AGE OCC 6. 1	TUTE URRED TIMES	7. REASON FOR
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	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBSTI AGE OCC 6. 1	TUTE URRED TIMES	7. REASON FOR
	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBSTI AGE OCC 6. 1	TUTE URRED TIMES	7. REASON FOR
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	effect on October 19, 1976.	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	N SUBSTI AGE OCC 6. 1	TUTE URRED TIMES	7. REASON FOR
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Accounting Period:	2022/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito NCTNWVPAOH LLC	S	YSTEM ID# 40113
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. If all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this 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.	mission servic s amount, see	of e 5,642.01
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 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	this six-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		
	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	7,600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
			_
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		hts!

Accounting Period:	2022/1				FORM SA1-2E. PAGE 7
Name		OF OWNER OF CABLE SYSTEM: /VPAOH LLC			SYSTEM ID 40113
M Channels	to its subscrib	pers, and (2) the cable system's	total num	els on which the cable system carried television broadcast stations ber of activated channels during the accounting period. lle	8
	on which the	otal number of activated channe e cable system carried television adcast services	n broadca	st stations	59
N Individual to Be Contacted		ct about this statement of accou		DRMATION IS NEEDED (Identify an individual to whom	
for Further Information	Name	Teri McMullen		Telephone	814-260-0434
	Address	PO Box 665			
		(Number, street, rural route, apa Coudersport PA 169		uite number)	
		(City, town, state, zip)			
	Email	teri.mcmullen@	@zitomed	lia.com Fax (optional)	
O Certification	I, the undersi (Ov (Ag X (O I have exami are true, comp	igned, hereby certify that (Check or vner other than corporation or p gent of owner other than corpor in line 1 of space B and that the fficer or partner) I am an officer in line 1 of space B. ned the statement of account and	one, but on partnershi ation or p owner is n (if a corpor hereby de	ertified and signed in accordance with Copyright Office regulations) <i>aly one</i> , of the boxes.) ip) I am the owner of the cable system as identified in line 1 of space B artnership) I am the duly authorized agent of the owner of the cable sy ot a corporation or partnership; or ration) or a partner (if a partnership) of the legal entity identified as own eclare under penalty of law that all statements of fact contained herein ge, information, and belief, and are made in good faith.	rstem as identified
				/s/James Rigas n electronic signature on the line above to certify this statement. gnature using an "/s/ signature" (e.g., /s/ John Smith)	
		Typed or printe	d name:	James Rigas	
		Title: (Title of	Presi official posit	dent tion held in corporation or partnership)	

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 telephol 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 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 t 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 lav

unting Period: 2022/1	SYSTEM
NCTNWVPAOH LLC	401
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "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." 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? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statemen Concerning Gros Receipts Exclusio
Name Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
x 1% Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
x 1%	Interest Assessme
x 1% Line 2 Multiply line 1 by the interest rate* and enter the sum here x	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here - x 1% 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 Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here - x	Interest Assessm
x 1% Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm

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 th 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.