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		FOR COPYRIG	Return completed workbook by email to	
for Seconda	INT OF ACCOUNT	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov
Cable Systems (Short Form) General instructions are located in the first tab of this workbook.		9/15/2022	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YYY	'Y/(Period))	
	2022/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	2022:	Barcode Data Filing Period (optional -	see instructions)	
Accounting Period		-		
В	Instructions: Give the full legal name of the owner of th subsidiary, not that of the parent corpora		ry of another corporation, give the full corporate	e title of the
Owner	List any other name or names under whic	h the owner conducts the business of the	cable system.	
	If there were different owners during the statement of account and royalty fee pays		last day of the accounting period should submit d.	t a single
	Check here if this is the system's first filin	g. If not, enter the system's ID number as	signed by the Licensing Division.	060598
	LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
	CEQUEL COMMUNICATIONS LLC			
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)		
	SUDDENLINK COMMUNICATIONS			
	MAILING ADDRESS OF OWNER OF 3027 S SE LOOP 323	CABLE SYSTEM		
	(Number, street, rural route, apartment, or suite r TYLER, TX 75701	number)		
	(City, town, state, zip)			
С	INSTRUCTIONS: In line 1, give any busin names already appear in space B. In line			
System	1 IDENTIFICATION OF CABLE SYSTEM:			

 System
 IDENTIFICATION OF CABLE SYSTEM:

 0SBURN, ID

 Mailing address of cable system:

 2

 (Number, street, rural route, apartment, or suite number)

 (City, town, state, zip code)

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this 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 filing, a determination that would be made by a court of law.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#					
Name	CEQUEL COMMUNICATIONS LLC	060598					
	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						
D	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 known 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						
Area Served	city.	nome parts should be reported in parentneses below the identified					
First	CITY OR TOWN OSBURN	STATE ID					
Community	ELIZABETH PARK	ID					
	KELLOGG	ID					
Add Rows as Necessary		ID ID					
	SMELTERVILLE WALLACE	ID ID					

	FOI LEGAL NAME OF OWNER OF CABLE SYSTEM:										
Name	CEQUEL COMMUNICATIONS LLC										
Е	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			-	•						
Secondary	about other services (including p										
Fransmission	last day of the accounting period	(June 30 or De	cember	31, as the ca	se may be).		-			
Service: Sub-	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken										
scribers and Rates	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										
Nates	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 c	harged for each	i catego	ry of service. I	nclude bot	th the amount of	the charge				
	unit in which it is generally billed	· ·	,		ny standaro	d rate variations	within a pa	articular rate			
	category, but do not include disc Block 1: In the left-hand block				ies of seco	ndary transmiss	ion service	a that cable			
	systems most commonly provide			-							
	that applies to your system. Note										
	categories, that person or entity						•				
	subscriber who pays extra for ca					in the count und	er "Service	e to the			
	first set" and would be counted of Block 2: If your cable system					service that are o	different fro	om those			
	printed in block 1 (for example, t										
	with the number of subscribers a	ind rates, in the	right-ha	and block. A tw	o- or three	e-word descriptio	n of the se	ervice is			
	sufficient.	OCK 1			T		BLOCK	()			
		NO. OF					BLUUR	NO. OF			
	CATEGORY OF SERVICE	SUBSCRIBE	RS	RATE	CAT	EGORY OF SEF	VICE	SUBSCRIBERS	RAT		
	Residential:										
	Service to first set	1	,208	50.00							
	 Service to additional set(s) 										
	• FM radio (if separate rate)										
	Motel, hotel			45.05							
	Commercial		52	45.95							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRAN	ISMISS	IONS: RATES							
F	In General: Space F calls for rat	e (not subscribe	er) infori	mation with res	spect to all	your cable syste	em's servi	ces that were			
Г	not covered in space E, that is, t										
Services	service for a single fee. There ar furnished at cost or (2) services	•			•		• • •				
Other Than	amount of the charge and the ur										
Secondary	enter only the letters "PP" in the	rate column.				0		0			
ransmissions:		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									
Rates											
	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.										
								BLOCK 2			
		BI OC									
	CATEGORY OF SERVICE	BLOO RATE		ORY OF SER	VICE	RATE	CATEG		RAT		
	CATEGORY OF SERVICE Continuing Services:	RATE	CATEG	ORY OF SER tion: Non-res		RATE	CATEG	ORY OF SERVICE	RAT		
		RATE	CATEG Installa			RATE	CATEG		RAT		
	Continuing Services:	RATE	CATEG Installa • Mote	tion: Non-res		RATE	CATEG		RAT		
	Continuing Services: • Pay cable	RATE 17.00	CATEG Installa • Mote • Con	tion: Non-res el, hotel		RATE	CATEG		RAT		
	Continuing Services: • Pay cable • Pay cable—add'I channel	RATE 17.00	CATEG Installa • Mote • Con • Pay	tion: Non-res el, hotel nmercial	idential	RATE	CATEG		RAT		
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	RATE 17.00	CATEG Installa • Mote • Con • Pay • Pay	tion: Non-res el, hotel nmercial cable	idential	RATE	CATEG		RAT		
	Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection	RATE 17.00	CATEG Installa • Moto • Con • Pay • Pay • Fire	tion: Non-res el, hotel nmercial cable cable-add'l ch	idential	RATE	CATEG		RAT		
	Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection Installation: Residential	RATE 17.00 19.00 99.00	CATEG Installa • Mote • Com • Pay • Pay • Fire • Burg	tion: Non-res el, hotel nmercial cable cable-add'l ch protection	idential	RATE	CATEG		RAT		
	Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection Installation: Residential • First set	RATE 17.00 19.00 99.00	CATEG Installa • Mote • Con • Pay • Pay • Fire • Burg Other s	tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection	idential	RATE	CATEG		RAT		
	Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s)	RATE 17.00 19.00 99.00	CATEG Installa • Mote • Con • Pay • Pay • Fire • Burg Other s • Rec	tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection ervices:	idential		CATEG		RAT		
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	RATE 17.00 19.00 99.00	CATEG Installa • Mote • Con • Pay • Pay • Fire • Burg Other s • Rec • Disc	tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection ervices: onnect	idential		CATEG		RAT		

	LEGAL NAME OF OWNER	OF CABLE SYSTEM:		SYSTEM					
ame	CEQUEL COMMUNI	CATIONS LLC		060					
	PRIMARY TRANSMITTERS: TELEVISION								
G imary smitters: evision	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 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. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other 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 noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper								
		on of each station. For U.S. stations, list adian stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER	,						
	KAYU-1	28		SPOKANE, WA					
	KAYU-HD1	28	I-M	SPOKANE, WA					
s as Necessary	KHQ-1	6	N	SPOKANE, WA					
as necessary	KHQ-2	6.2	I-M	SPOKANE, WA					
			N-M	SPOKANE, WA					
	KHQ-HD1	6							
	KHQ-HD1 KREM-1	6	N						
	KREM-1	2	N	SPOKANE, WA					
	KREM-1 KREM-2	2 2.2	N I-M	SPOKANE, WA SPOKANE, WA					
	KREM-1 KREM-2 KREM-HD1	2 2.2 2	N I-M N-M	SPOKANE, WA SPOKANE, WA SPOKANE, WA					
	KREM-1 KREM-2	2 2.2	N I-M	SPOKANE, WA SPOKANE, WA					
	KREM-1 KREM-2 KREM-HD1 KSPS-1	2 2.2 2 7 7 7	N I-M N-M E E-M	SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA					
	KREM-1 KREM-2 KREM-HD1 KSPS-1 KSPS-HD1	2 2.2 2 7	N I-M N-M E	SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA MOSCOW, ID					
	KREM-1 KREM-2 KREM-HD1 KSPS-1 KSPS-HD1 KUID-1	2 2.2 2 7 7 7 12	N I-M N-M E E-M E	SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA					
	KREM-1 KREM-2 KREM-HD1 KSPS-1 KSPS-HD1 KUID-1	2 2.2 2 7 7 7 12	N I-M N-M E E-M E	SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA MOSCOW, ID					
	KREM-1 KREM-2 KREM-HD1 KSPS-1 KSPS-HD1 KUID-1 KXLY-1	2 2.2 2 7 7 7 12 4	N I-M N-M E E-M E N	SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA MOSCOW, ID SPOKANE, WA					
	KREM-1 KREM-2 KREM-HD1 KSPS-1 KSPS-HD1 KUID-1 KXLY-1 KXLY-HD1	2 2.2 2 7 7 7 7 12 4 4	N I-M N-M E E-M E N I-M	SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA SPOKANE, WA MOSCOW, ID SPOKANE, WA SPOKANE, WA					

	MMUNICA	TIONS	LLC						060
	t every radio s	station ca	rried on a separate and discrence and discrence and discrence and the second second second second second second					ied on an	н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf idgnal, indicate Column 4: G	it is carried by monitoring, to prmation abou rm. dentify the call tate whether to the radio stat this by placing Sive the station	y the sys be recein t the Cop sign of e the static ion's sign g a check n's location	I-Band FM Carriage: Under 0 tem whenever it is received at ved at the headend, with the s oyright Office regulations on th each station carried. In is AM or FM. hal was electronically process at mark in the "S/D" column. on (the community to which the the community with which the	t ti sy: nis ec	he system's hea stem's FM anter point, see page by the cable sy station is licens	adend, and (2) nna, during ce e (v) of the ge ystem as a se ed by the FCC) it can b rtain sta neral ins parate a	e expected, ted intervals. tructions in the. nd discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	T	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		0,0					2,0		
				-					
				-					
				-					
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Accounting Perio							FORM	M SA1-2E. PAGE 5
	LEGAL NAME OF OWNER OF O	CABLE SYST	EM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LL	.C					060598
	SUBSTITUTE CARRIAGE	: SPECIA		T AND PROGRAM LOG				
Substitute	In General: In space I, identif substitute basis during the ac explanation of the programmi	counting pe	riod, under spec	cific present and former FC0	C rules, regula	ations, or author	rizations. F	or a further
Carriage:	1. SPECIAL STATEMENT	CONCER	NING SUBSTI	TUTE CARRIAGE				
Special Statement and	 During the accounting peri 	od, did you	r cable system	carry, on a substitute basis	s, any nonne	twork televisio	n program	1
Program Log	broadcast by a distant station?							
	Note: If your answer is "No	" loovo tho	roct of this pag	o blank. If your answor is "				NO
	Note: If your answer is "No,	leave the	rest of this pag	e blank. Il your answer is	res, you mu	ist complete ti	le program	11
	log in block 2. 2. LOG OF SUBSTITUTE	PROGRA	MS					
	In General: List each substi			te line. Use abbreviations v	wherever pos	sible, if their m	neaning is	
	clear. If you need more space	ce, please a	add additional r	ows to the tables.				
				sion program ("substitute p				
	period, was broadcast by a under certain FCC rules, reg							
	Do not use general categori							1.
	"NBA Basketball: 76ers vs.	Bulls."				1,	,	
				"Yes." Otherwise enter "N				
		•		sting the substitute progra e community to which the		nsed by the E(C or in	
	the case of Mexican or Cana						50 01, 11	
	Column 5: Give the mon	th and day		em carried the substitute p			h the mon	ith
	first. Example: for May 7 giv							
	to the nearest five minutes.			gram was carried by your o				У
	stated as "6:00–6:30 p.m."		program carrie		o p.m. to 0.2	0.00 p.m. 3100		
	Column 7: Enter the lette			was substituted for progra				
	to delete under FCC rules a							am
	was substituted for program effect on October 19, 1976.	iming that y	our system was	s permitted to delete undel	FCC rules a	ind regulations	5 IF1	
						N SUBSTITUTE		
		2. LIVE?	E PROGRAM 3. STATION'S		5. MONTH	AGE OCCUR 6. TIMI		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	то	
						_		
						_		
						_		
						_		
						_		
						_		
						_		
						_		
1	L	L	1					

Accounting Period:	2022/1	FORM SA1-2E. PAGE 6.							
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
	CEQUEL COMMUNICATIONS LLC	060598							
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. End all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	nission service							
	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 \$. 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 t accounting period is \$52.00.	his six-month							
	Line 1. Royalty fee for accounting period								
	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								
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)							
	1. Base amount under statutory formula \$ 263,800.00								
	2. Enter amount of gross receipts from space K								
	3. Subtract line 2 from line 1								
	4. Enter the amount of gross receipts from space K								
	5. Enter the amount from line 3								
	6. Subtract line 5 from line 4								
	Subtract line 5 from line 4								
	8. Interest charge. Enter the amount from line 4, space Q, page 8								
	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)								
	DLUCK 3. GRUSS RECEIPTS OF MORE THAN \$203,000 (but less than \$227	,000)							
	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	106.59							
	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	\$ 1,425.59							
	FILING FEE AND TOTAL REMITTANCE DUE								
Filing Foc and									
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	1,425.59							
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	20.00							
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$ 1,445.59							
	EFT Trace # or TRANSACTION ID #								
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for m								

Accounting Period:	2022/1					FORM SA1-2E. PAGE
Name		OWNER OF CABLE SYSTEM:				SYSTEM ID 06059
M Channels	to its subscrib 1. Enter the to system carr 2. Enter the to on which th	You must give (1) the numbers, and (2) the cable system atal number of channels on will ried television broadcast station atal number of activated chan e cable system carried televis adcast services	's total number of a nich the cable ons	ctivated channels during the	e accounting period.	ns
N Individual to Be Contacted		TO BE CONTACTED IF FUR		ON IS NEEDED (Identify an	individual	
for Further Information	Name	RODNEY HASKINS			Telepho	ne (903) 579-3152
	Address	3027 S SE LOOP 32 (Number, street, rural route, apa TYLER, TX 75701 (City, town, state, zip)	-)		
	Email	RODNEY.HA	SKINS@ALTICEU	SA.COM	Fax (optional	
	CERTIFICATION	I (This statement of account	must be certified an	d signed in accordance with	Copyright Office regulation	s)
O Certification		ned, hereby certify that (Check			n as identified in line 1 of space	e B; or
		nt of owner other than corpo in line 1 of space B and that icer or partner) I am an office	the owner is not a co	prporation or partnership; or	-	
	are true, comp	in line 1 of space B. ed the statement of account an lete, and correct to the best of ction 1001(1986)]				sin
			Enter an electroni	an Dannenbaum c signature on the line above t ing an "/s/ signature" (e.g., /s		_
		Typed or printe	ed name: ALAI	N DANNENBAUM		
		Title:	SVP, PROGI	RAMMING neld in corporation or partnership)		
		Date:			8/24/2022	

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

counting Period: 2022/1	FORM SA1-2E. PAGE 8
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
EQUEL COMMUNICATIONS LLC	060598
 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? 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below. \$ Name Name Mailing Address 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. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6 \$ -	
(interest charge) * 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.	
Owner Address ID number First community served Accounting period	

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