This form is effective beginning with the January 1 to June 3	0, 2017, accounting period (2017/1)
If you are filing for a prior accounting period, contact the Licensin	g Division for the correct form.

SA1-2E Short Form

STATEMENT OF ACCOUNT			FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to
for Seconda	ary Tr	ansmissions by	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>
-		Short Form)	0/40/0000	\$	For additional information, contact the U.S. Copyright
General instru			8/16/2022	ALLOCATION NUMBER	Office Licensing Division at (202) 707-8150.
	or uni	S WORDOOK.		ALLOCATION NOMBER	
Α	ACC	OUNTING PERIOD COVERED	BY THIS STATEMENT: (YY)	YY/(Period))	
			Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		2022-1			
			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 corporat		ary of another corporation, give the full corporat	te title of the
Owner		List any other name or names under which	h the owner conducts the business of the	cable system.	
		If there were different owners during the statement of account and royalty fee payr		e last day of the accounting period should subm od.	it a single
		Check here if this is the system's first filing	g. If not, enter the system's ID number as	signed by the Licensing Division.	63088
		LEGAL NAME OF OWNER/MAILING	GADDRESS OF CABLE SYSTEM		
		Webster-Calhoun Cooperative Tele	phone Association		
		BUSINESS NAME(S) OF OWNER OF			
		MAILING ADDRESS OF OWNER OF			
		(Number, street, rural route, apartment, or suite r			
		Gowrie, IA 50543 (City, town, state, zip)			
С				ify the business and operation of the sy system, if different from the address gi	
System	1	IDENTIFICATION OF CABLE SYSTEM:	z, give the maning address of the	system, in unicient norm the address gr	
		MAILING ADDRESS OF CABLE SYSTEM	1:		
	2				
	2	(Number, street, rural route, apartment, or suite r	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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID					
	Webster-Calhoun Cooperative Telephone Association	6308					
	Instructions: List each separate community served by the cable system. A "community separate and distinct community or municipal entity (including unincorporated commu						
D	unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve						
	community." Please use it as the first community on all future filings.	as a form of system identification nerearter 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 identifie						
Area	city.						
Served							
	CITY OR TOWN	STATE					
First	Gowrie	lowa					
Community	Pilot Mound	lowa					
	Churdan	lowa					
d Rows as Necessary	Vincent	lowa					
	Thor	lowa					
	Knierim	lowa					
	Somers	lowa					
	Badger	lowa					
	Lanyon	lowa					
	Farnhamville	lowa					
	Boxholm	lowa					
	Duncombe	lowa					
	Moorland	lowa					
	Barnum	lowa					
	Clare	lowa					
	Paton	lowa					
	Lohrville	lowa					
	Manson	lowa					
	Rockwell City	lowa					
	Lake City	lowa					

	FO LEGAL NAME OF OWNER OF CABLE SYSTEM:								
Name	Webster-Calhoun Cooperative Telephone Association								
_	SECONDARY TRANSMISSION	SERVICE: SUB	SCRIBERS AND	RATES					
E	In General: The information in s	•	-		•				
. .	system, that is, the retransmission								
Secondary Transmission	about other services (including p last day of the accounting period					those exist	ting on the		
Service: Sub-						ble system	ı, broken		
scribers and	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in								
Rates	each category by counting the n	0	0,1			<i>.</i>	charged		
	separately for the particular serv Rate: Give the standard rate of						ne and the		
	unit in which it is generally billed	-					-		
	category, but do not include disc	ounts allowed fo	or advance paymer	t.					
	Block 1: In the left-hand block	•		•					
	systems most commonly provide that applies to your system. Not						0,		
	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	Ű	,						
	with the number of subscribers a								
	sufficient.	-	5		•				
	BLO	OCK 1 NO. OF				BLOCK	K 2 NO. OF		
	CATEGORY OF SERVICE	SUBSCRIBER	RS RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RATE	
	Residential:			Desis			504		
	Service to first set		169 37.95				561	93.9	
	Service to additional set(s)			Extend	lea		796	###1	
	• FM radio (if separate rate)								
	Motel, hotel Commercial								
	Converter								
	Residential								
	Non-residential								
	- Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRAN	SMISSIONS: RAT	ES					
F	In General: Space F calls for rat	•	,		• •				
•	not covered in space E, that is, t service for a single fee. There a								
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the								
Fransmissions: Rates	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								
nutoo	BIOCK 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a								
	brief (two- or three-word) descrip								
		BLOC	K 1				BLOCK 2		
	CATEGORY OF SERVICE	RATE C	CATEGORY OF SE	RVICE	RATE	CATEG	ORY OF SERVICE	RATE	
	Continuing Services:		nstallation: Non-ro	esidential					
	• Pay cable		• Motel, hotel						
	Pay cable—add'l channel		Commercial						
	Fire protection		• Pay cable						
	•Burglar protection		• Pay cable-add'l	channel					
	Installation: Residential		Fire protection						
	• First set		Burglar protection	n					
	Additional set(s) EM radio (if separate rate)	C	• Reconnect						
	 FM radio (if separate rate) Converter 		Reconnect Disconnect						
	COnventer		DISCOTTIECT						
			Outlet releastion						
			 Outlet relocation Move to new ad 						

lame	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEI 63					
	Webster-Calhoun Cooperative Telephone Association								
	PRIMARY TRANSMITTERS: TELEVISION								
G Primary Transmitters: Television	carried by your cable system 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 rule • Do <i>not</i> list the station here in station was carried <i>only</i> on a • List the station here, and als basis. For further information Column 1: List each station's multicast stream associated w "WETA-2" as the same on the Column 2: Give the channel of license. For example, WRC Column 3: Indicate in each of educational station, by enterin (for independent multicast), " For the meaning of these terr	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 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 SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the							
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION					
			E						
	IowaPBS -PBS HD	11.1	E-M	Des Moines					
	IowaPBS -PBS Kids 2 IowaPBS -World Chai	11.2	E-M	Des Moines Des Moines					
s as Necessary									
	IowaPBS -Create KCCI-HD -CBS	11.4 8.1	E-M	Des Moines Des Moines					
			N						
	KCCI-SD -Me-TV	8.2	N-M	Des Moines					
	KCCI-MY -MyN/Heroe	8.3	N-M	Des Moines					
	KCWI-HD -CW	23.1	1	Des Moines					
	KCWI-Quest	23.4	I I-M	Des Moines					
	KCWI-Quest KDMI -TCT	23.4 19	<u> </u>	Des Moines Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX	23.4 19 17.1	I N	Des Moines Des Moines Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet	23.4 19 17.1 17.2	I N N-M	Des Moines Des Moines Des Moines Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge!	23.4 19 17.1 17.2 17.3	I N N-M N-M	Des Moines Des Moines Des Moines Des Moines Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge! KDSM-TBD	23.4 19 17.1 17.2 17.3 17.4	I N N-M N-M N-M	Des Moines Des Moines Des Moines Des Moines Des Moines Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge! KDSM-TBD WHO-HD -NBC	23.4 19 17.1 17.2 17.3 17.4 13.1	I N N-M N-M N-M N-M N	Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge! KDSM-TBD WHO-HD -NBC WHO-DT -SportsGrid	23.4 19 17.1 17.2 17.3 17.4 13.1 13.2	I N N-M N-M N-M N N-M	Des Moines Des Moines Des Moines Des Moines Des Moines Des Moines Des Moines Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge! KDSM-TBD WHO-HD -NBC WHO-HD -NBC WHO-DT -SportsGrid WHO-DT -Antenna TV	23.4 19 17.1 17.2 17.3 17.4 13.1 13.2 13.3	I N N-M N-M N-M N-M N	Des MoinesDes Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge! KDSM-TBD WHO-HD -NBC WHO-DT -SportsGrid WHO-DT -Antenna TV WHO-DT 4 -Court TV	23.4 19 17.1 17.2 17.3 17.4 13.1 13.2 13.3 13.4	I N N-M N-M N-M N N-M	Des Moines Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge! KDSM-TBD WHO-HD -NBC WHO-HD -NBC WHO-DT -SportsGrid WHO-DT -Antenna TV	23.4 19 17.1 17.2 17.3 17.4 13.1 13.2 13.3	I N N-M N-M N-M N N-M N-M	Des MoinesDes Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge! KDSM-TBD WHO-HD -NBC WHO-DT -SportsGrid WHO-DT -Antenna TV WHO-DT4 -Court TV	23.4 19 17.1 17.2 17.3 17.4 13.1 13.2 13.3 13.4	I N N-M N-M N-M N-M N-M N-M N-M N-M	Des Moines Des Moines					
	KCWI-Quest KDMI -TCT KDSM-FOX KDSM-Comet KDSM-Charge! KDSM-TBD WHO-HD -NBC WHO-DT -SportsGrid WHO-DT -Antenna TV WHO-DT -Court TV WOI-HD -ABC	23.4 19 17.1 17.2 17.3 17.4 13.1 13.2 13.3 13.4 5.1	I N N-M N-M N-M N-M N-M N-M N-M N-M N-M	Des MoinesDes Moines					

EGAL NAME OF Vebster-Cal			e Telephone Associatio	n				SYSTEM I 630
PRIMARY TRANSMITTERS: RADIO In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.								
eceivable if (1) on the basis of a cor detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: C	it is carried by monitoring, to prmation abour m. dentify the call tate whether to the radio stat this by placing Sive the station	y the sys be recei t the Cop sign of e he static ion's sign a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. In is AM or FM. hal was electronically processes mark in the "S/D" column. on (the community to which the the community with which the s	the system's hea ystem's FM anter is point, see page ed by the cable sy e station is licens	adend, and (2) nna, during ce e (v) of the ger ystem as a sep red by the FCC	it can b rtain sta neral ins	e expected, ted intervals. tructions in the. nd discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio							FOR	M SA1-2E. PAGE 5.		
Name	LEGAL NAME OF OWNER OF O			sociation				SYSTEM ID# 63088		
Substitute	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station, tha substitute basis during the accounting period, under specific present and former FCC rules, regulations, explanation of the programming that must be included in this log, see page (v) of the general instructions							For a further		
Substitute Carriage: Special Statement and Program Log	 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in 									
	the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	th and day e "5/7." es when the Example: a er "R" if the nd regulatic ming that y	when your syst substitute prog program carrie listed program ons in effect du	em carried the substitute gram was carried by your ed by a system from 6:01: was substituted for progra ring the accounting period s permitted to delete unde	program. Use cable system 15 p.m. to 6:2 amming that y l; enter the let er FCC rules a	e numerals, . List the tim 28:30 p.m. s your system ter "P" if the	hes accurate hould be was <i>require</i> listed progr pons in TUTE	ly d		
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. 1 FROM	TIMES — TO	DELETION		
							_	·		
								·		
								·		
								·		
l							_			
							_			
l										

Accounting Period:	2022-1	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Webster-Calhoun Cooperative Telephone Association	SYSTEM ID#
		63088
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enternational and amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmit (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.	ssion 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 \$2 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. 	63,800.
	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 th accounting period is \$52.00.	is 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	
	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)
	1. Enter the amount of gross receipts from space K \$ 398,839.95	
	2. Base amount under statutory formula \$ 263,800.00	
	3. Subtract line 2 from line 1	
	4. Multiply line 3 by .01	1,350.40
	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	\$ 2,669.40
	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)	2,669.40
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	\$ 2,689.40
	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 mo	

Accounting Period:	2022-1				FORM SA1-2E. PAGE 7.
Name		OWNER OF CABLE SYSTEM: noun Cooperative Telephone	Association		SYSTEM ID# 63088
M Channels	to its subscrib 1. Enter the to system carr 2. Enter the to on which th	ers, and (2) the cable system's tot tal number of channels on which t	broadcast stations	counting period.	33 189
N Individual to Be Contacted		TO BE CONTACTED IF FURTHE	R INFORMATION IS NEEDED (Identify an indiv .)	vidual	
for Further Information	Name	Marcie Boerner		Telephone	(515) 352-3151
	Address	1106 Beek Street, PO E (Number, street, rural route, apartmen Gowrie, IA 50543 (City, town, state, zip)	3ox 475 nt, or suite number)		
	Email	marcieb@wccta.c	om	Fax (optional 515-352-302	5
O Certification	I, the undersign (Owr (Agen X (Offi I have examine are true, comp	ned, hereby certify that (Check one, ner other than corporation or part in tof owner other than corporation in line 1 of space B and that the c icer or partner) I am an officer (if a in line 1 of space B. ed the statement of account and here lete, and correct to the best of my k ction 1001(1986)] Typed or printed na Title:	amership) I am the owner of the cable system as in on or partnership) I am the duly authorized agent owner is not a corporation or partnership; or corporation) or a partner (if a partnership) of the I reby declare under penalty of law that all statement mowledge, information, and belief, and are made in X /s/ Daryl Carlson hter an electronic signature on the line above to certain ther signature using an "/s/ signature" (e.g., /s/ John	Identified in line 1 of space E t of the owner of the cable so legal entity identified as own nts of fact contained herein in good faith.	ystem as identified
		Date:		8/16/2022	

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Accounting Period: 2022-1	FORM SA1-2E. PAGE 8
EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Nebster-Calhoun Cooperative Telephone Association	63088
 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
X NO YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address Mailing Address	
II 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 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	
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	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner	
Address	
ID number First community served Accounting period	
Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) request	ed on this

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.