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 Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY					
DATE RECEIVED	AMOUNT				
8/26/2022	\$				
	ALLOCATION NUMBER				

Return completed workbook by email to:

### coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	COUNTING REPLAN COVERED BY THIS STATEMENT. (VOCAVIII)						
^	ACCOUNTING 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							
	Instructions:						
В	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 the subsidiary, not that of the parent corporation.	of					
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 sing statement of account and royalty fee payment covering the entire accounting period.	le					
	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						
	DIRECTV, LLC						
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)						
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM						
	2260 E Imperial Hwy Room 839 (Number, street, rural route, apartment, or suite number)						
	El Segundo, CA 90245						
	(City, town, state, zip)						
С	STRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system uses already appear in space B. In line 2, give the mailing address of the system, if different from the address given in						
System	IDENTIFICATION OF CABLE SYSTEM:	-					
	1						
	MAILING ADDRESS OF CABLE SYSTEM:						
	2 (Number street rural route anartment or suite number)						
	(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 Offce'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.

Accounting Period:	2022/1							
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b.  SYSTEM ID#						
Name								
	Instructions: List each separate community served by the cable system. A "commun	63596 aity" 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							
U	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.							
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.							
Served	Grey.							
	CITY OR TOWN	STATE						
First	Panama City	FL						
Community	Bay Unincorporated County	FL						
	Callaway	FL						
Add Rows as Necessary	Lynn Haven	FL						
	Panama City Beach	FL						
	Parker	FL						
	Springfield	FL						

Accounting Period: 2022/1

FORM SA1-2E. PAGE 2.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Name

**DIRECTV, LLC** 

#151 EWI ID# 63596

## Ε

### Secondary Transmission Service: Subscribers and Rates

#### 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 of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the 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 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 separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

**Block 1:** In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

**Block 2:** If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BL	OCK 1		BLOCK 2			
	NO. OF			NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:						
Service to first set	699	\$19	HD Tech Fee	658	\$10.00	
Service to additional set(s)			Set-Top Box	706	\$0-\$15	
					\$8.99-	
• FM radio (if separate rate)			Broadcast TV Surcharge	699	\$9.99	
Motel, hotel						
Commercial	7	\$20				
Converter						
Residential						
Non-residential						
	***************************************			1	4	

## F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the 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.

**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 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 1				BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
					\$0-
• Pay cable		Motel, hotel		Video on Demand	\$100
					\$0-
<ul> <li>Pay cable—add'l channel</li> </ul>	\$5-\$199	Commercial		Service Activation Fee	\$35
					\$0-
Fire protection		• Pay cable		Credit Management Fe	\$449
•Burglar protection		Pay cable-add'l channel		Dispatch on Demand	\$99
					\$0-
Installation: Residential		Fire protection		Wireless Receiver	\$49
First set	\$0-\$199	Burglar protection		HD Premium Tier	\$10
<ul> <li>Additional set(s)</li> </ul>		Other services:		DVR Upgrade Fee	\$105
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect	\$0-\$35	Vacation Hold	\$7
Converter		Disconnect		Program Downgrade F	\$5
		Outlet relocation	\$0-\$55	Non-return Equipment	0-\$150
		Move to new address			

Accounting Period: 2022/1 FORM SA1-2E. PAGE 3.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:
DIRECTV, LLC S4596

PRIMARY TRANSMITTERS: TELEVISION

# G

### Primary Transmitters: Television

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, *except* (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 *not* 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 *only* 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. *Do not* 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 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 FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION 4. LOCATION OF STATION WECPL2/WECPH2 18/1018 ı Panama City, FL WECPLD/WECPLH 18/1018 Ν Panama City, FL Ε WFSG/WFSGHD 56/1056 Panama City, FL WJHG/WJHGHD 7/1007 Ν Panama City, FL WJHGD2/WJHGH2 7/1007 Panama City, FL WMBB/WMBBHD 13/1013 Ν Panama City, FL WPCT/WPCTHD 47/1047 Panama City, FL WPGX/WPGXHD 28/1028 ı Panama City, FL

Add Rows as Necessary

U.S. Copyright Office

ccounting Period:					A1-2E. PAGE				
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: DIRECTV, LLC			S	YSTEM II 6359				
<b>K</b> Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and th all amounts (gross receipts) paid to your cable system by subscribers for the syste (as identified in space E) during the accounting period. For a further explanation of 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.	em's sec f how to	condary transm compute this a	nission service amount, see	<b>2,719.57</b> oss receipts)				
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 \$263,800  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.  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 accounting period is \$52.00	e that yo	u must pay for	this 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 mo	ore than \$137	,100)					
	1. Base amount under statutory formula	i	263,800.00	<u> </u>					
	2. Enter amount of gross receipts from space K	i	182,719.57	, —					
	3. Subtract line 2 from line 1	i	81,080.43	<u> </u>					
	4. Enter the amount of gross receipts from space K		\$	182,719.57					
	5. Enter the amount from line 3		\$	81,080.43					
	6. Subtract line 5 from line 4		\$	101,639.14					
	7. Multiply line 6 by .005 (enter figure here)			\$	508.20				
	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	d 8		. \$	508.20				
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)								
	Enter the amount of gross receipts from space K								
	2. Base amount under statutory formula	i	263,800.00	<del>-</del>					
	3. Subtract line 2 from line 1			_					
	4. Multiply line 3 by .01			<del>_</del>					
	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								
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5,								
	FILING FEE AND TOTAL REMITTANCE DUE								
Filing Fee and otal Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	508.20					
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			\$	528.20				
	Important: Your remittance must be in the form of an electronic paymer See page i of the general instructions in the paper SA1-2 f		-		nts!				

Accounting Period:	2022/1					FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OW DIRECTV, LLC	VNER OF CABLE SYSTEM:				SYSTEM ID# 63596
M Channels	to its subscribers,	, and (2) the cable system's	total nun	els on which the cable system carried tel nber of activated channels during the acc	counting period.	16
	on which the ca	number of activated channe able system carried televisi ast services	on broad	cast stations		584
N Individual to Be Contacted		BE CONTACTED IF FURT bout this statement of accounts the statement of accounts the statement of accounts are statement of accounts to the statement of accounts are statement of account and account are statement are statement of account and account are statement of account and account are statement are statement are statement and account are statement are statement and account are statement and account are statement and account are statement and account account are statement and account and account are statement and account account and account are statement are statement and account account and account account are statement and account account account account and account account account and account accou		ORMATION IS NEEDED (Identify an ind	lividual to whom	
for Further Information	Name	Myriam Nassif			Telephone 31	0-964-1930
	(	2260 E Imperial Hwy Number, street, rural route, apart El Segundo, CA 902 (City, town, state, zip)	ment, or su	839 te number)		
	Email	mn112s@att.c	om		Fax (optional	
O Certification	I, the undersigned,      (Owner of the content	other than corporation or portion of space B and that the or partner) I am an officer (a line 1 of space B.  The statement of account and and correct to the best of medium or partner) and correct to the best of medium or partner of account and and correct to the best of medium or partner or partn	ne, but or partnersh ation or pare owner if a corpor hereby de by knowled	ritified and signed in accordance with Co  rity one, of the boxes.)  ip) I am the owner of the cable system as  partnership) I am the duly authorized ager is not a corporation or partnership; or  ration) or a partner (if a partnership) of the  ecclare under penalty of law that all stateme age, information, and belief, and are made  /s/ William Kuhn  electronic signature on the line above to ce gnature using an "/s/ signature" (e.g., /s/ Jol  William Kuhn	identified in line 1 of space B; or not of the owner of the cable syste legal entity identified as owner of ents of fact contained herein in good faith.	m as identified
		Title:	AVP -	- Finance		
		Date:			August 25, 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 fling, a determination that would be made by a court of law.

ounting Period: 2022/1	FORM SA1-2E. PAGE 8.
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
RECTV, LLC	63596
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	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	<u>-</u>
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.	Q Interest Assessment
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 <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.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) 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.