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

				Return completed workbook by email to
	ENT OF ACCOUNT	FUR COPTRI	GHT OFFICE USE ONLY	
	ary Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov
	ems (Short Form)	02/22/2023	\$	For additional information, contact the U.S. Copyright Office Licensing Division at
in the first tab	of this workbook.	02,22,2020	ALLOCATION NUMBER	(202) 707-8150.
A	ACCOUNTING PERIOD COVERI	ED BY THIS STATEMENT: ()	YYY/(Period))	
	2022/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
Accounting		Barcode Data Filing Period (optiona	I - see instructions)	
Period				
В	Instructions: Give the full legal name of the owner of the subsidiary, not that of the pare		sidiary of another corporation, give the full corp	porate title
Owner	List any other name or names under v	which the owner conducts the business of	the cable system.	
	-	the accounting period, only the owner or ty fee payment covering the entire accou	n the last day of the accounting period should so nting period.	ubmit a
	Check here if this is the system's first	filing. If not, enter the system's ID numbe	r assigned by the Licensing Division.	29750
	LEGAL NAME OF OWNER/MAI	LING ADDRESS OF CABLE SYSTEM	Λ	
	PINPOINT COMMUNICATIONS, I	NC.		
	BUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFEREN	Т)	
	MAILING ADDRESS OF OWNER			
	611 PATTERSON STREE (Number, street, rural route, apartment, or su			
	CAMBRIDGE, NE 69022 (City, town, state, zip)			
С			entify the business and operation of the he system, if different from the address	
System	1	l:		
	MAILING ADDRESS OF CABLE SYST	EM:		
	2 (Number, street, rural route, apartment, or su	te number)		
1	р	,		

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.

(City, town, state, zip code)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name	PINPOINT COMMUNICATIONS, INC.	297
D	Instructions: List each separate community served by the cable system. A "commun "a separate and distinct community or municipal entity (including unincorporated co discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list	mmunities within unincorporated areas and including single
Area	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 l	nome parks should be reported in parentheses below the
Served	identified city.	
		STATE
First Community	CAMBRIDGE BARTLEY	NE NE
connunty	GOTHENBURG	NE
Add Rows as Necessary	INDIANOLA	NE
Aud Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:	:						A1-2E. PAGE
Name		TIONS, INC).						2975
	SECONDARY TRANSMISSION				TEO				
E	In General: The information in s					y transmission s	ervice of th	ne cable	
	system, that is, the retransmission								
Secondary	about other services (including p	, , ,	,		,		nose existi	ng on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						le system	broken	
scribers and	down by categories of secondar	•					•		
Rates	each category by counting the n							charged	
	separately for the particular serv							a and the	
	Rate: Give the standard rate of unit in which it is generally billed	-	-	•			-		
	category, but do not include disc	· · ·	,		iy standar		, within a p		
	Block 1: In the left-hand block	•		-		•			
	systems most commonly provide							0,	
	that applies to your system. Not categories, that person or entity			-		-			
	subscriber who pays extra for ca					0,			
	first set" and would be counted o	0			· · ·				
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, t with the number of subscribers a								
	sufficient.		s ngin n		o or anot				
	BL	OCK 1	_				BLOC		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential:					TV BASIX/EXPAI		48/56	19.75/2
	Service to first set		11	29.99	IPTV HOSPITALITY		3	-	
	 Service to additional set(s) 				IPTV ESSENTIALS			2'	l 29.9
	• FM radio (if separate rate)				IPTV B	ASIC		149	89.9
	Motel, hotel		0	9.99	IPTV E	XPANDED		107	7 99.9
	Commercial		2	242.00	IPTV E	LITE		14	1 ####
	Converter				BULK I	PTV ESSEN	TIALS	-	15.0
	Residential				BULK I	PTV BASIC		-	40.0
	 Non-residential 				BULK I	PTV EXPAN	DED	-	45.0
	SERVICES OTHER THAN SEC		NSMIS						•
-	In General: Space F calls for ra					l your cable syst	tem's servi	ces that were	
F	not covered in space E, that is, t								
Comisso	service for a single fee. There ar furnished at cost or (2) services								
Services Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the	rate column.	-			-		· g ,	
ransmissions:	Block 1: Give the standard rat								
Rates	Block 2: List any services that listed in block 1 and for which a				-				
	brief (two- or three-word) descrip								
		BL O	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEG	ORY OF SERVIC	E RATE
	Continuing Services:		Install	ation: Non-resi	idential			x	
	• Pay cable		• Mo	itel, hotel			IPTV IN	ISTALLATION	99.0
	Pay cable—add'l channel		•Co	mmercial					
	Fire protection		• Pa	y cable					
	•Burglar protection		• Pa	y cable-add'l ch	annel				
	Installation: Residential		• Fire	e protection					
	• First set	15.00	1	rglar protection					
	Additional set(s)			services:					
	• FM radio (if separate rate)			connect		20.00			
	• Converter		•	sconnect					
				tlet relocation		15.00			

	2022/2			FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF			SYSTEM ID 2975
	PINPOINT COMMUNIC	· ·		
G Primary ransmitters: Television	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio Column 1 : List each statior multicast stream associated "WETA-2" as the same on t Column 2 : Give the channel of license. For example, WF Column 3 : Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4 : Give the location	entify every television station (including m during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting t e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations c ules, regulations, or authorizations: e in space G—but do list it in space I (t a substitute basis. also in space I, if the station was carrie on concerning substitute basis stations n's call sign. <i>Do not</i> report origination d with a station according to its over-the the form. el number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network rring the letter "N" (for network), "N-M" "E" (for noncommercial educational), erms, see page (iv) of the general instru n of each station. For U.S. stations, list	t (1) stations carried only on a part- the carriage of certain network progr 51(e)(2) and (4))]; and (2) certain state arried by your cable system on a su the Special Statement and Program ed both on a substitute basis and als , see page (v) of the general instruct program services such as HBO, ESI e-air designation. For example, rep- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep or "E-M" (for noncommercial educatiuc uctions in the paper SA1-2 form. t the community to which the station	time basis under rams [sections ations carried on a ubstitute program Log)—if the so on some other tions. PN, etc. Identify each ort multistream r the air in its community a noncommercial bendent), "I-M" tional multicast).
	FCC. For Mexican or Canao	dian stations, if any, give the name of t 2. B'CAST CHANNEL NUMBER	the community with which the station 3. TYPE OF STATION	A. LOCATION OF STATION
	KSNB	4	N	HASTINGS, NE
	KLNE	3	E	LEXINGTON, NE
ows as Necessary	KGIN	11	N	GRAND ISLAND, NE
/S dS Necessary	KHGI	13	N	KEARNEY, NE
	KNOP	2	N	NORTH PLATTE, NE
	KFXL	15	N	KEARNEY, NE

PINPOINT C								SYSTEM 29
	st every radio s	station c) arried on a separate and discr enerally receivable by your cat					н
eceivable if (1 on the basis of) it is carried b monitoring, to	y the sy be rece	II-Band FM Carriage: Under (stem whenever it is received a sived at the headend, with the opyright Office regulations on t	it the system's h system's FM an	eadend, and (tenna, during o	2) it can certain s	be expected, tated intervals.	Primary Transmitters Radio
baper SA1-2 fo Column 1: I	orm. dentify the call	l sign of	each station carried. on is AM or FM.					
Column 3: I signal, indicate	f the radio stat this by placing	tion's sig g a cheo	gnal was electronically process of mark in the "S/D" column. ion (the community to which th	-	-			
			the community with which the					
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
KICX	FM							
	FM		MCCOOK, NE MCCOOK, NE					
(FNF	FM		OBERLIN, KS					
UVR	AM		HOLDREGE, NE					
KODY	FM		NORTH PLATTE, NE					
KBRL	AM		MCCOOK, NE					
KMTY	FM		HOLDREGE, NE					
KIGS	AM		HASTINGS, NE					
KCNT	FM		HASTINGS, NE					
KHNE	FM		HASTINGS, NE					
<fxx< td=""><td>FM</td><td></td><td>HASTINGS, NE</td><td></td><td></td><td></td><td></td><td></td></fxx<>	FM		HASTINGS, NE					
KROR	FM		HASTINGS, NE					
K29AF	FM		HASTINGS, NE					
KHAS	AM		HASTINGS, NE					
KGFW	AM		KEARNEY, NE					
KXPR	AM		KEARNEY, NE					
KCSV KKPR	FM		KEARNEY, NE					
KRNY	FM AM		KEARNEY, NE					
	FM		KEARNEY, NE KEARNEY, NE					
KLNE	FM		LEXINGTON, NE					
KNGN	AM		MCCOOK, NE					
KSWN	FM		MCCOOK, NE					
		 			1			
						·		

Accounting Perio								OVOTEN ID
Name	LEGAL NAME OF OWNER OF PINPOINT COMMUNIC							SYSTEM ID: 2975(
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM L	OG			
l Subatituta	In General: In space I, ident substitute basis during the a explanation of the programm	accounting pe	eriod, under sp	ecific present and former	FCC rules, reg	gulations, or a	uthorizatio	ns. For a further
Substitute Carriage:	1. SPECIAL STATEMEN	-			the general in			
Special	During the accounting per				asis. anv non	network telev	vision proc	ıram
Statement and Program Log	broadcast by a distant sta	•	,	,	, ,		YES	
r rogram Log	Note: If your answer is "No		rest of this pa	ge blank If your answer	is "Yes " vou	must comple	-	
	log in block 2.	,		g	····, j ···			J
	period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call Column 4: Give the broa the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes.	egulations, or ries like "mov . Bulls." m was broad sign of the s adcast statio nadian statio nth and day v ive "5/7." nes when the	r authorization vies" or "bask dcast live, ente station broadc on's location (t ons, if any, the when your sys e substitute pro	ns. See page (v) of the guestion of the guestion of the substitute programmer "Yes." Otherwise enter asting the substitute programmer to which the community with which the community with which the stem carried the substitute programmer was carried by your programmer of the substitute programmer of the substitute programmer was carried by your programmer of the substitute programmer of the s	eneral instruc ram titles, for "No." gram. he station is li he station is li te program. U ur cable syste	tions for furth example, "I L censed by th dentified). lse numerals em. List the ti	ner informa Love Lucy" ne FCC or, , with the r mes accur	ation. ' or in month rately
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program	ter "R" if the l and regulation mming that ye	ons in effect d	uring the accounting peri	iod; enter the	letter "P" if th	ne listed pr	
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye	ons in effect d	uring the accounting peri as permitted to delete un	iod; enter the ider FCC rules	letter "P" if th	tions in	
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that y UBSTITUTE	ons in effect d our system w	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	letter "P" if th s and regulat	UTE	ogram
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye UBSTITUTE	E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	Ietter "P" if the sand regulates and regulates SUBSTIT	TUTE URRED MES	7. REASON FC
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye UBSTITUTE	E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	Ietter "P" if the sand regulates and regulates SUBSTIT	TUTE URRED MES	ogram 7. REASON FC
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye UBSTITUTE	E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	Ietter "P" if the sand regulates and regulates SUBSTIT	TUTE URRED MES	ogram 7. REASON FC
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye UBSTITUTE	E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	Ietter "P" if the sand regulates and regulates SUBSTIT	TUTE URRED MES	7. REASON F
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	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye UBSTITUTE	E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	Ietter "P" if the sand regulates and regulates SUBSTIT	TUTE URRED MES	7. REASON F
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	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye UBSTITUTE	E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	Ietter "P" if the sand regulates and regulates SUBSTIT	TUTE URRED MES	ogram 7. REASON FC
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye UBSTITUTE	E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	Ietter "P" if the sand regulates and regulates SUBSTIT	TUTE URRED MES	ogram 7. REASON FC
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the l and regulatic mming that ye UBSTITUTE	E PROGRAM 3. STATION'S	uring the accounting peri as permitted to delete un	od; enter the der FCC rules WHE CARR 5. MONTH	Ietter "P" if the sand regulates and regulates SUBSTIT	TUTE URRED MES	ogram 7. REASON FC

Accounting Period:	2022/2		FORM S	A1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: PINPOINT COMMUNICATIONS, INC.		S	YSTEM ID# 29750
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the a all amounts (gross receipts) paid to your cable system by subscribers for the system' (as identified in space E) during the accounting period. For a further explanation of he 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.	's secondary tran ow to compute th	smission servic is amount, se	¢ 5,980.56
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 les • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but les See page (vi) of the general instructions located in the paper SA1-2 form for more informati	s than \$527,600	o \$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 O	R LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee tha accounting period is \$52.00.	t you 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	d 2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but	more than \$137,	100)	
	1. Base amount under statutory formula	263,800.00		
	2. Enter amount of gross receipts from space K \$			
		37,819.44	-	
			-	
	4. Enter the amount of gross receipts from space K		225,980.56	
	5. Enter the amount from line 3	\$	37,819.44	
	6. Subtract line 5 from line 4	\$	188,161.12	
	7. Multiply line 6 by .005 (enter figure here)		\$	940.81
	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		\$	940.81
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (b	ut less than \$52	7,600)	
	1. Enter the amount of gross receipts from space K		_	
	2. Base amount under statutory formula	263,800.00		
	3. Subtract line 2 from line 1		_	
	4. Multiply line 3 by .01			
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	\$	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8		0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	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)	\$	940.81	
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		\$	960.81
	EFT Trace # or TRANSACTION ID #	27431JN8]	
	Important: Your remittance must be in the form of an electronic payment paya See page i of the general instructions in the paper SA1-2 form and the Excel instructions in the paper SA1-2 form and the paper SA1-2 form and the paper SA1-2 form and the paper SA1-2	-		

Accounting Period:	2022/2					FORM SA1-2E. PAGE 7
Name		OWNER OF CABLE SYSTEM: MMUNICATIONS, INC.				SYSTEM ID# 29750
M Channels	 to its subscriber Enter the tota system carrier Enter the tota on which the o 	You must give (1) the number rs, and (2) the cable system's al number of channels on whic d television broadcast stations al number of activated channe cable system carried television cast services	total number of activated c th the cable 	hannels during the	accounting period.	ns 5 257
N Individual to Be Contacted		D BE CONTACTED IF FURTI about this statement of accou		EDED (Identify an	individual	
for Further Information	Name	SHEILA HILLIUS			Telephone	∋ <u>308-697-3375</u>
	Address	611 PATTERSON ST (Number, street, rural route, apart CAMBRIDGE, NE 69 (City, town, state, zip)	ment, or suite number)			
	Email	SHEILA.HILLIU	IS@PNPT.COM		Fax (optional)	
O Certification	I, the undersign (Own (Agen in X (Offic in · I have examine	I (This statement of account n ed, hereby certify that (Check of er other than corporation or p at of owner other than corpora line 1 of space B and that the of cer or partner) I am an officer (line 1 of space B. d the statement of account and te, and correct to the best of my ion 1001(1986)]	artnership) I am the owner artnership) I am the owner ation or partnership) I am th owner is not a corporation or if a corporation) or a partner hereby declare under penalt	es.) of the cable system ne duly authorized ag partnership; or (if a partnership) of f ty of law that all state	as identified in line 1 of space gent of the owner of the cabl the legal entity identified as o ements of fact contained here	e B; or e system as identified owner of the cable system
		Typed or printed	X /s/ J. Thomas Enter an electronic signature Enter signature using an "/s/ name: J. THOMAS PRESIDENT Ificial position held in corporation	e on the line above to ' signature" (e.g., /s/ SHOEMAKER	John Smith)	_
		Date:			2/22/23	

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 telephon 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 i 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 th 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

ounting Period: 2			FORM SA1-2E. PAG
AL NAME OF OWN	NER OF CABLE SYSTEM:	— () ()	SYSTEM
POINT COM	IUNICATIONS, INC.	Type text here	297
The Satellite Ho lowing sentence "In deten service	e: rmining the total number of subscribers and the gro of providing secondary transmissions of primary bi	EIPTS EXCLUSIONS 111(d)(1)(A), of the Copyright Act by adding the fol- oss amounts paid to the cable system for the basic roadcast transmitters, the system shall not include sub- secondary transmissions pursuant to section 119."	P Special Statemen Concerning Gros
	nation on when to exclude these amounts, see the aper SA1-2 form.	note on page (vii) of the general instructions	Receipts Exclusio
made by satellit	ounting period, did the cable system exclude any a te carriers to satellite dish owners?	mounts of gross receipts for secondary transmissions	
X NO			
YES. Enter	the total here and list the satellite carrier(s) below		
Name Mailing Address		Name Mailing Address	
For an evolution		mitted as a result of a late payment or underpayment.	Q
·		eneral instructions located in the paper SA1-2 form.	Q Interest Assessme
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