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 COPYRIGH	Return completed workbook by email to	
DATE RECEIVED	 coplicsoa@copyright.gov 	
2/28/2023	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.

Α	ACCOUN	TING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
	2022	Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting Period		20222 Barcode Data Filing Period (optional - see instructions)	
В	Give	uctions: the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the diary, not that of the parent corporation.	
Owner	List a	ny other name or names under which the owner conducts the business of the cable system.	
		ere were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single ment of account and royalty fee payment covering the entire accounting period.	
	Check	k here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	033171
	LEC	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
	CEQ	UEL COMMUNICATIONS LLC	
	BUS	INESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
	SUD	DENLINK COMMUNICATIONS	
	MAIL	ING ADDRESS OF OWNER OF CABLE SYSTEM	
		27 S SE LOOP 323	
		ber, street, rural route, apartment, or suite number)	
		LER, TX 75701 town, state, zip)	
С		TONS: In line 1, give any business or trade names used to identify the business and operation of the system unles ady appear in space B. In line 2, give the mailing address of the system, if different from the address given in space	
System	1	TIFICATION OF CABLE SYSTEM:	
	LE)	XINGTON, MO	
	MAIL	ING ADDRESS OF CABLE SYSTEM:	
	2		
	2 (Numb	ber, street, rural route, apartment, or suite number)	
	(City, t	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.

Accounting Period:	2022/2								
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#							
Name	CEQUEL COMMUNICATIONS LLC	033171							
D Area Served	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 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 city.								
	CITY OR TOWN	STATE							
First	LEXINGTON	MO							
Community	NAPOLEON	MO							
Add Rows as Necessary									

	FO LEGAL NAME OF OWNER OF CABLE SYSTEM:										
Name	CEQUEL COMMUNICATIONS LLC										
_	SECONDARY TRANSMISSION	SERVICE: SU	BSCRIB	ERS AND RAT	ES						
E	In General: The information in s	pace E should	cover al	categories of s	secondary						
	system, that is, the retransmission										
Secondary Transmission	about other services (including p last day of the accounting period	, , ,	,				iose existii	ng on the			
Service: Sub-	Number of Subscribers: Both						le system,	broken			
scribers and	down by categories of secondary	, transmission :	service.	In general, you	can comp	oute the number	of subscri	bers in			
Rates	each category by counting the nu							charged			
	separately for the particular serv Rate: Give the standard rate c							a and the			
	unit in which it is generally billed.	-	-	•			-				
	category, but do not include disc	· · ·	,		, etanuar		mann a p				
	Block 1: In the left-hand block			Ű		•					
	systems most commonly provide that applies to your system. Note										
	categories, that person or entity			-		-					
	subscriber who pays extra for ca						•				
	first set" and would be counted o										
	Block 2: If your cable system I										
	printed in block 1 (for example, the number of subscribers a										
	with the number of subscribers a sufficient.	ind rates, in the	ngnt-na	and DIOCK. A two	or three	e-word description	n oi the se	ervice is			
		DCK 1					BLOCK				
	CATEGORY OF SERVICE	NO. OF SUBSCRIBI	ERS	RATE	CATI	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RAT		
	Residential:						-				
	Service to first set		200	50.00							
	 Service to additional set(s) 										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		13	45.95							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRAI	SMISS	IONS: RATES							
F	In General: Space F calls for rat										
I	not covered in space E, that is, t service for a single fee. There ar										
Services	furnished at cost or (2) services	•	,		,		0()				
Other Than	amount of the charge and the un										
Secondary	enter only the letters "PP" in the rate column.										
ransmissions: 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										
Rates	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.										
		BLO	CK 1					BLOCK 2			
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SERV	/ICE	RATE	CATEG	ORY OF SERVICE	RATE		
	Continuing Services:		Installa	tion: Non-resi	dential						
	• Pay cable	17.00	• Mot	el, hotel							
	 Pay cable—add'l channel 	19.00	• Con	nmercial							
	Fire protection		• Pay	cable							
	 Burglar protection 			cable-add'l cha	annel						
	Installation: Residential			protection							
	• First set	99.00		glar protection							
	 Additional set(s) 	25.00		ervices:							
						40.00					
	• FM radio (if separate rate)		• Rec	onnect		40.00					
				onnect connect		40.00					
	• FM radio (if separate rate)		• Disc			25.00					

ting Period: 2	2022/2			FORM SA1-2E. PAG					
Name	LEGAL NAME OF OWNER O			SYSTEM I					
	CEQUEL COMMUNIC	ATIONS LLC		0331					
	PRIMARY TRANSMITTERS: TELEVISION								
G Primary nsmitters: elevision	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, a Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on		(1) stations carried only on a part- ne carriage of certain network progr 1(e)(2) and (4))]; and (2) certain state arried by your cable system on a su ne Special Statement and Program	ime basis under ams [sections tions carried on a bstitute program Log)—if the					
	basis. For further information	also in space I, if the station was carried on concerning substitute basis stations,	see page (v) of the general instruc	tions.					
		's call sign. Do not report origination p d with a station according to its over-the the form.	-	-					
	Column 2: Give the channed	el number the FCC assigned to the tele RC is channel 4 in Washington, D.C.	vision station for broadcasting over	the air in its community					
	Column 3: Indicate in each	case whether the station is a network	•						
	(for independent multicast), For the meaning of these te Column 4: Give the locatio	ring the letter "N" (for network), "N-M" ("E" (for noncommercial educational), c erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	or "E-M" (for noncommercial educat ictions in the paper SA1-2 form. the community to which the station	ional multicast). n is licensed by the					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	4. LOCATION OF STATION						
	КСРТ-1	19	Е	KANSAS CITY, MO					
	KCTV-1	5	N	KANSAS CITY, MO					
ws as Necessary	KCWE-1	29	I	KANSAS CITY, MO					
	KMBC-1	9	Ν	KANSAS CITY, MO					
	KMCI-1	38	I	LAWRENCE, KS					
	KMOS-1	6	E	SEDALIA, MO					
	KPXE-1	50	I	KANSAS CITY, MO					
	KSHB-1	41	N	KANSAS CITY, MO					
	KSMO-1	62	I	KANSAS CITY, MO					
	KUKC-1	20	I	KERRVILLE, TX					
	WDAF-1	4	I	KANSAS CITY, MO					

CEQUEL CO	MMUNICA	TIONS	LLC					SYSTEM I 0331
	every radio s	station ca	arried on a separate and discre nerally receivable by your cabl					н
eceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether to the radio stat this by placing ive the station	y the sys be recein t the Cop sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s byright Office regulations on th each station carried. on is AM or FM. nal was electronically processes mark in the "S/D" column. on (the community to which the	t the system's he system's FM anten nis point, see page ed by the cable s re station is licen	adend, and (2) enna, during ce ge (v) of the ge system as a se sed by the FCC) it can b ertain sta neral ins parate a	e expected, ited intervals. structions 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	
OALL SIGN		0/D		OALL OIGH		0,0		
					·			
					+			
					+			
		L				ł		

Accounting Perio	d: 2022/2						FOR	M SA1-2E. PAGE 5.
News	LEGAL NAME OF OWNER OF	CABLE SYST	EM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LL	.C					033171
	SUBSTITUTE CARRIAGE	: SPECIA		T AND PROGRAM LOG				
	In General: In space I, identit	iy every non	network televisi	on program, broadcast by a	distant static	on, that your	cable system	carried on a
	substitute basis during the ac							
Substitute	explanation of the programmi	-			general instru	ictions in the	e paper SA1-2	2 form.
Carriage: Special	1. SPECIAL STATEMENT							
Statement and	During the accounting peri-	•	r cable system	carry, on a substitute basis	s, any nonne	work televi	- · · ·	
Program Log	broadcast by a distant stat	ion?				L	YES	X NO
	Note: If your answer is "No,	" leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	ust complete	e the prograr	m
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subst clear. If you need more spa				vnerever pos	sidle, it the	ir meaning is	
				sion program ("substitute p	orogram") tha	it, during the	e accounting	
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categori							1.
	"NBA Basketball: 76ers vs.						Sve Lucy of	
				"Yes." Otherwise enter "N				
				sting the substitute program e community to which the		nsed by the	FCC or in	
	the case of Mexican or Can						21 00 0i, ili	
			when your syst	em carried the substitute p	orogram. Use	numerals,	with the mor	nth
	first. Example: for May 7 giv		substitute pro	gram was carried by your c	able system	List the tim	nes accurate	hy .
	to the nearest five minutes.							iy
	stated as "6:00–6:30 p.m."							
	Column 7: Enter the letter to delete under FCC rules a			was substituted for progra				
	was substituted for program							am
	effect on October 19, 1976.					•		
	s	UBSTITUT	E PROGRAM			EN SUBSTI IAGE OCC		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	-	TIMES — TO	DELETION
							_	
							_	
							_	
							_	
							_	
							_	
								+
							-	

Accounting Period:	2022/2	FORM S	A1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	S	VSTEM ID
			03317
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 Imount, see	3,449.41
		. 3	
L Copyright Royalty Fee	 COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less. Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$. Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$. 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	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	\$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	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		
	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)		
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filine Fer and			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	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:	2022/2						FORM SA1	-2E. PAGE 7.
Name		OWNER OF CABLE SYSTEM:					SI	YSTEM ID# 033171
M Channels	to its subscrib 1. Enter the to system car 2. Enter the to on which th	ers, and (2) the cable system tal number of channels on wh ried television broadcast static otal number of activated chann e cable system carried televis	's total numl nich the cabl ons nels sion broadca		ng the ac	counting period.	11 206	
N Individual to Be Contacted		TO BE CONTACTED IF FUR t about this statement of acco		DRMATION IS NEEDED (Ident	tify an ind	ividual		
for Further Information	Name	RODNEY HASKINS				Telephone	(903) 579-3152	
	Address	3027 S SE LOOP 32 (Number, street, rural route, apa TYLER, TX 75701 (City, town, state, zip)		te number)				
	Email	RODNEY.HAS	SKINS@AL	_TICEUSA.COM		Fax (optional		
0	CERTIFICATIO	I (This statement of account r	must be cerl	tified and signed in accordanc	ce with Co	pyright Office regulations)		
Certification	(Owr	nt of owner other than corpo	partnership ration or pa	p) I am the owner of the cable s artnership) I am the duly author	rized ager			
	 I have examination are true, compare true 	icer or partner) I am an officer in line 1 of space B. ed the statement of account and lete, and correct to the best of	(if a corpora d hereby dec	not a corporation or partnership ation) or a partner (if a partnersh clare under penalty of law that a ge, information, and belief, and	hip) of the all stateme	nts of fact contained herein	er of the cable system	
	[18 U.S.C., Se	ction 1001(1986)]	Enter an e	/s/ Alan Dannenbaum		•		
		Typed or printe	ed name:	ALAN DANNENBAUN				
		Title: (Date:		PROGRAMMING position held in corporation or partne	ership)	2/28/2023		

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CEQUEL COMMUNICATIONS LLC 03317 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS Image: Communication of the set of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence. Image: Communication of 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 neceiving secondary transmissions pursuant to section 119.* Image: Communication on when to exclude these amounts, see the note on page (vii) of the general instructions for the pager SA1-2 form. Image: Communication on when to exclude these amounts, see the note on page (vii) of the general instructions for the satellite carriers to satellite dish owners? Image: Communication on when to exclude these amounts of gross receipts for secondary transmissions for secondary transmissions pursuant to section 119.* Image: Communication on when the satellite carrier(s) below. Image: Communication on when the satellite carrier(s) below. Image: Communication on under page: Communication on the satellite carrier(s) below. Image: Communication on under page: Communication on the satellite carrier(s) below. Image: Communication on under page: Communicatio	ccounting Period: 2022/2	FORM SA1-2E. PAGE 8.
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSION The Statistic Home Vower Act of 1988 amended Title 17, section 111(g)(1)(A) of the Copyright Act by adding the following sentence: The Mainting the total number of suberchers and the gross amounts paid to the cable system for the bacic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub-compare service of providing secondary transmissions pursuant to secondary transmissions means the secondary transmissions pursuant to secondary transmissions made by satellite carriers to satellite dish owners? P	EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
The Satellite Home Viewer Act of 1988 amended Title 17, section 111(q)(1)(A), of the Copyright Act by adding the following sentence: The determining the total number of subscribers and the gross amounts paid to the cable system for the basic system for the paid system exclude these amounts, see the note on page (vii) of the general instructions incated 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 catrice to satellite catrice (s) below. Set S. Enter the total here and list the satellite catrice (s) below. Set S. Enter the total here and list the satellite catrice (s) below. Set S. Enter the total here and inst the satellite catrice (s) below. Set S. Enter the total here and list the satellite catrice (s) below. Set S. Enter the total here and list the satellite catrice (s) below. Set S. Enter the total here and list the satellite catrice (s) below. Set S. Enter the amount of 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. Set S. Multiply line 1 by the interest rate* and enter the sum here. Set S. Multiply line 2 by the number of days late and enter the sum here . Set S. Multiply line 2 by the number of days late and enter the sum here . Set S. Multiply line 2 by the number of days late and enter the sum here . Set S. Multiply line 2 by the number of days late and enter the sum here . Set S. Multiply line 2 by the number of days late and enter the sum here . Set	EQUEL COMMUNICATIONS LLC	033171
Name Name Name Mailing Address Mailing Address Mailing Address INTEREST ASSESSMENT You must complete this worksheet for those royally 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. Interest Assessment Line 1 Enter the amount of late payment or underpayment. x	 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? 	-
Mailing Address Mailing Address Imailing Address Imailing Address INTEREST ASSESSMENT You must complete this worksheet for those royally 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.	YES. Enter the total here and list the satellite carrier(s) below	
Write the under the worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and enter the sum here		- - - - -
Write the under the worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and enter the sum here	INTEREST ASSESSMENT	
Line 3 Multiply line 2 by the number of days late and enter the sum here	For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessment
Line 3 Multiply line 2 by the number of days late and enter the sum here	x	-
Line 3 Multiply line 2 by the number of days late and enter the sum here	Line 2 Multiply line 1 by the interest rate* and enter the sum here	
in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	Line 3 Multiply line 2 by the number of days late and enter the sum here	
(interest charge) * 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		
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		
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.		
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	** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
Address ID number First community served		
ID number First community served	Owner	
First community served	Address	
	First community served	· · ·

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