This form is effective beginning with the January 1 to June 30, 2017, accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEM	ENT OF ACCOUNT	FOR COPYRIG	Return completed workbook by email to		
	ary Transmissions by ems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>	
-	, , , , , , , , , , , , , , , , , , ,		\$	For additional information, contact the U.S. Copyright	
	uctions are located o of this workbook.	2/28/2023	ALLOCATION NUMBER	Office Licensing Division at (202) 707-8150.	
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YYY	Y/(Period))		
		_			
	2022/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31		
		2 Barcode Data Filing Period (optional -	see instructions)		
	2022.				

		20222 Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
В		Instructions: 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 of the subsidiary, not that of the parent corporation.	
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 single statement of account and royalty fee payment covering the entire accounting period.	
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	037113
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		CEQUEL COMMUNICATIONS LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		SUDDENLINK COMMUNICATIONS	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)	
		TYLER, TX 75701	
		(City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless a lready appear in space B. In line 2, give the mailing address of the system, if different from the address given in space	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		HAMLIN, TX	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

Accounting Period:	2022/2	
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	FORM SA1-2E, PAGE 1b. SYSTEM ID# 037113
D Area Served	Instructions: List each separate community served by the cable system. A "commun separate and distinct community or municipal entity (including unincorporated com unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will sen community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile city.	nity" is the same as a "community unit" as defined in FCC rules: "a munities within unincorporated areas and including single, discrete we as a form of system identification hereafter known as the "first
	CITY OR TOWN	STATE
First Community	HAMLIN	TX
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:							1-2E. PAGE			
Name	CEQUEL COMMUNICATIONS LLC											
_	SECONDARY TRANSMISSION	SERVICE: SU	BSCRIF	SERS AND RA	TES							
E	In General: The information in s					y transmission s	ervice of th	ne cable				
	system, that is, the retransmission											
Secondary Transmission	about other services (including p last day of the accounting period						hose existi	ng on the				
Service: Sub-							ole system,	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 nu							charged				
	separately for the particular server Rate: Give the standard rate c							e and the				
	unit in which it is generally billed.	-	-	•			-					
	category, but do not include disc	ounts allowed f	or adva	nce payment.			•					
	Block 1: In the left-hand block			-		•						
	systems most commonly provide that applies to your system. Note											
	categories, that person or entity			U U		•						
	3					• • •	•					
	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, ti	-		•								
	with the number of subscribers a											
	sufficient.	,	5			•						
	BLC	OCK 1					BLOCI					
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE		RATE	CAT	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RAT			
	Residential:											
	Service to first set		85	50.00								
	 Service to additional set(s) 											
	• FM radio (if separate rate)											
	Motel, hotel											
	Commercial		10	45.95								
	Converter											
	Residential											
	Non-residential											
	SERVICES OTHER THAN SECO											
F	In General: Space F calls for rat											
•	not covered in space E, that is, the service for a single fee. There are											
Services	furnished at cost or (2) services	•			•		• • • •					
Other Than	amount of the charge and the un		usually	billed. If any rat	tes are ch	arged on a varia	able per-pro	ogram basis,				
Secondary ransmissions:	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.											
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											
	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											
		BLO	CK 1					BLOCK 2				
	CATEGORY OF SERVICE	RATE		ORY OF SERV		RATE	CATEG	ORY OF SERVICE	RATE			
	Continuing Services:			tion: Non-resi	idential							
	• Pay cable	17.00		tel, hotel								
	Pay cable—add'l channel Fire protection	19.00		nmercial								
	Fire protection		,	/ cable / cable add'l cb	oppol							
	•Burglar protection Installation: Residential		,	<pre>v cable-add'l ch e protection</pre>	ame							
				•								
		00 00		alar protection								
	• First set	99.00 25.00		glar protection								
	• First set • Additional set(s)	99.00 25.00	Other s	services:		40.00						
	• First set	••••••	Other s • Red	services: connect		40.00						
	 First set Additional set(s) FM radio (if separate rate) 	••••••	Other s • Rec • Dis	services:		40.00						

ime	LEGAL NAME OF OWNER C	OF CABLE SYSTEM:		SYSTEM
	CEQUEL COMMUNIC	CATIONS LLC		0371
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable syste FCC rules and regulations	entify every television station (including t m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th	(1) stations carried only on a part- e carriage of certain network prog	time basis under rams [sections
mary mitters: vision	substitute program basis, a Substitute Basis Stations	e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph. s: With respect to any distant stations ca ules, regulations, or authorizations:		
	• Do <i>not</i> list the station her station was carried <i>only</i> or	re in space G—but do list it in space I (th		-
	basis. For further information Column 1: List each station	on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p	see page (v) of the general instruc rogram services such as HBO, ES	ctions. PN, etc. Identify each
	"WETA-2" as the same on Column 2: Give the chann	el number the FCC assigned to the telev		
		'RC is channel 4 in Washington, D.C. h case whether the station is a network s	station, an independent station, or	a noncommercial
	educational station, by ente	ering the letter "N" (for network), "N-M" (f	or network multicast), "I" (for indep	pendent), "I-M"
), "E" (for noncommercial educational), ο erms, see page (iv) of the general instru		tional multicast).
		on of each station. For U.S. stations, list		n is licensed by the
	FCC. For Mexican or Cana	adian stations, if any, give the name of th	e community with which the statio	n is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
		40	_	
	KERA-1	13	E	DALLAS, TX
	KERA-1 KIDZ-1	13 42	E	ABILENE, TX
ecessary?			<u>Е</u> І І	
cessary	KIDZ-1	42	E I I N	ABILENE, TX
cessary	KIDZ-1 KPCB-1	42 17	l I	ABILENE, TX SNYDER, TX
cessary	KIDZ-1 KPCB-1 KRBC-1	42 17 9	I I N	ABILENE, TX SNYDER, TX ABILENE, TX
ecessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1	42 17 9 32	I I N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX
Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1	42 17 9 32 12	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX
: Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
IS Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
15 Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
as Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX
s Necessary	KIDZ-1 KPCB-1 KRBC-1 KTAB-1 KTXS-1 KTXS-2	42 17 9 32 12 12.2	I I N N N	ABILENE, TX SNYDER, TX ABILENE, TX ABILENE, TX SWEETWATER, TX SWEETWATER, TX

	OMMUNICA	TIONS	LLC						SYSTEM 037
	t every radio s	station ca	arried on a separate and discre					ied on an	н
eceivable if (1) on the basis of cor detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation abou rm. dentify the call state whether t the radio stat this by placing Sive the station	y the sys be recein t the Cop sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under (tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. on is AM or FM. nal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the	t ti sy: nis	he system's hea stem's FM anter point, see page by the cable sy station is licens	adend, and (2) nna, during ce e (v) of the ge ystem as a se ed by the FCC) it can b rtain sta neral ins parate a	e expected, ted intervals. tructions in the. nd discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	Т	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		5,5			S. LE SIGN	, or r w	5,0		
				-					
				-					
				-					
				-					
				-					
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Accounting Perio	d: 2022/2						FORM	M SA1-2E. PAGE 5	
	LEGAL NAME OF OWNER OF O	CABLE SYST	EM:					SYSTEM ID#	
Name	CEQUEL COMMUNICA	TIONS LL	.C					037113	
	SUBSTITUTE CARRIAGE	: SPECIAI		T AND PROGRAM LOG					
	In General: In space I, identit								
Substitute	substitute basis during the ac explanation of the programmi								
Carriage:	1. SPECIAL STATEMENT	CONCER	NING SUBSTI	TUTE CARRIAGE					
Special	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program								
Statement and Program Log	broadcast by a distant stat	ion?					YES	× NO	
i rogram zog	Neter If your enours is "No.	" loovo tha	reat of this new	a blank. If your anawar is "	Wee "veu m				
	Note: If your answer is "No,	leave the	rest of this pag	e blarik. Il your allswel is	res, you m	usi complete th	e progran	11	
	log in block 2. 2. LOG OF SUBSTITUTE	PROCRA	MS						
	In General: List each subst			te line. Use abbreviations v	wherever pos	ssible, if their m	eaning is		
	clear. If you need more space	ce, please a	add additional r	ows to the tables.			-		
				sion program ("substitute p					
	period, was broadcast by a under certain FCC rules, reg								
	Do not use general categori							1.	
	"NBA Basketball: 76ers vs.	Bulls."				• •	,		
				"Yes." Otherwise enter "N					
				sting the substitute progra e community to which the		ansed by the EC	C or in		
	the case of Mexican or Can						00 01, III		
	Column 5: Give the mon	th and day		em carried the substitute p			n the mon	ith	
	first. Example: for May 7 giv					1.1.1.1			
	to the nearest five minutes.			gram was carried by your o				У	
	stated as "6:00–6:30 p.m."		program carrie		10 p.m. to 0.2	20.00 p.m. 3000			
				was substituted for progra					
	to delete under FCC rules a							am	
	was substituted for program effect on October 19, 1976.	iming mar y	our system was	s permitted to delete unde	r FCC rules a	and regulations	In		
						EN SUBSTITU			
		UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		5. MONTH	6. TIME		7. REASON FOR DELETION	
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	то		
						<u></u>			
						<u> </u>			
						-			

Accounting Period:	2022/2	FORM SA	1-2E. PAGE 6.					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	S	YSTEM ID# 037113					
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent 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.	ission service mount, see	5,378.01					
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 \$2 Use block 3 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. 							
	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) \$	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, and 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)	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:				SYSTEM ID# 037113
M Channels	to its subscrib 1. Enter the to system car 2. Enter the to on which th	You must give (1) the number pers, and (2) the cable system otal number of channels on wh ried television broadcast station otal number of activated channe ne cable system carried televis opadcast services	s total number of activated c nich the cable ons	hannels during the a	accounting period.	8 60
N Individual to Be Contacted		TO BE CONTACTED IF FUR ct about this statement of acco		EDED (Identify an ii	ndividual	
for Further Information	Name	RODNEY HASKINS	3		Telephone (903)) 579-3152
	Address	(Number, street, rural route, apa TYLER, TX 75701 (City, town, state, zip)	-			
	Email	RODNEY.HAS	SKINS@ALTICEUSA.COM	1	Fax (optional	
O Certification		N (This statement of account r	-		Copyright Office regulations)	
Certification					as identified in line 1 of space B; or	
		in line 1 of space B and that	the owner is not a corporation	or partnership; or	ent of the owner of the cable system a	
	 I have examin are true, comp 	icer or partner) I am an officer in line 1 of space B. ed the statement of account an olete, and correct to the best of action 1001(1986)]	d hereby declare under penalty	of law that all staten		ne cable system
	1		X /s/ Alan Dani	nenbaum		
			Enter an electronic signature Enter signature using an "/s/		•	
		Typed or printe	d name: ALAN DANN	IENBAUM		
		Title:	SVP, PROGRAMMII			
		Date:			2/28/2023	

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	FORM SA1-2E. PAGE 8.
EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
CEQUEL COMMUNICATIONS LLC	037113
 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	
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
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.	
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.	
list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number	
list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address	

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.