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	TOFFICE USE ONLY
DATE RECEIVED	AMOUNT
03/17/2023	\$ ALLOCATION NUMBER

Return completed workbook by email to

coplicsoa@copyright.gov

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

Α	ACC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		2022/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20222 Barcode Data Filling 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.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		Hilltop Communications, Inc.
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM PO Box 352
		(Number, street, rural route, apartment, or suite number)
		Germantown, NY 12526 (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 these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1	IDENTIFICATION OF CABLE SYSTEM:
		GTel (formerly Valstar) MAILING ADDRESS OF CABLE SYSTEM:
		INFERRO ABUNESO ST SABEL STOTEM.
	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 filling, a determination that would be made by a court of law.

	T	FORM SA1-2E. PAC					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM					
	Hilltop Communications, Inc.	6′					
	Instructions: List each separate community served by the cable system. A						
D	"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.						
Area	Note: Entities and properties such as hotels, apartments, condominiums, or	mobile home parks should be reported in parentheses below the					
Served	identified city.						
	CITY OR TOWN	STATE					
First	Germantown	NY					
Community	Clermont	NY					
	Livingston	NY					
d Rows as Necessary	Gallatin	NY					
,	Taghkanic	NY					
	0.00.00.00.00.00.00.00.00.00.00.00.00.0						

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 6173

Hilltop Communications, Inc.

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 	501	118.99	Local Basic Service	104	36.99	
 Service to additional set(s) 						
 FM radio (if separate rate) 						
Motel, hotel						
Commercial						
Converter						
 Residential 	949	5.00				
 Non-residential 						
		•				

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			
• Pay cable		 Motel, hotel 		IPTV Expanded	
 Pay cable—add'l channel 		 Commercial 		Starz	9.95
Fire protection		• Pay cable		Showtime/TLC	10.99
•Burglar protection		 Pay cable-add'l channel 		HBO	18.95
Installation: Residential		 Fire protection 		HD Package	10.00
• First set	50.00	 Burglar protection 		Cinemax	13.95
 Additional set(s) 	50.00	Other services:		Cinemax/Showtime	30.95
 FM radio (if separate rate) 		 Reconnect 	40.00	Cinemax/Starz	21.95
Converter		Disconnect		Cinemax/HBO	30.95
		 Outlet relocation 			
		 Move to new address 			

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#

Name Hillton Con

Hilltop Communications, Inc.

6173

G

Primary Transmitters: Television 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.

Add Rows as Necessary

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WRGB	6	N	Schenectady, NY
WTEN	10	N	Albany, NY
WNYT	13	N	Albany, NY
WXXA	23	<u>l</u>	Albany, NY
WMHT	17	E	Schenectady, NY
WCWN	45	N	Schenectady, NY
WNYA	51	N	Pittsfield, MA
	•		

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Hilltop Communications, Inc.

6173

PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

Column 1: Identify the call sign of each station carried.

Column 2: State whether the station is AM or FM.

Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM OR FM S/D LOCATION OF STATION OF STATION CALL SIGN AM OR FM S/D LOCATION OF STATION OF								
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION

period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. Column 2: If the prograi Column 3: Give the call Column 4: Give the bro the case of Mexican or Cal Column 5: Give the mofirst. Example: for May 7 gi Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m."	itity every nor accounting pring that must reconstruct the proof accounting pring that must reconstruct the proof accounting pring that must reconstruct the proof acceptance of every nor a distant state egulations, our es like "mor acceptance of every nor a distant state egulations, our es like "mor acceptance of every nor a distant state egulations, our es like "mor acceptance the proof acceptance of every nor acceptance the proof acceptance of every nor ac	AL STATEME Innetwork televi period, under sp ist be included i RNING SUBS ur cable syster e rest of this pa AMS am on a separadd additional connetwork televition and that ye or authorization povies" or "bask adcast live, enterstation broadce ion's location (toons, if any, the or when your syste e substitute pro a program carr e listed program ions in effect d	ision program, broadcast be pecific present and former in this log, see page (v) of TITUTE CARRIAGE or carry, on a substitute being blank. If your answer attended in the substitute of the subs	ay a distant start Crules, rethe general in asis, any nor asis "Yes," you as wherever part of the program") and titles, for "No." arm. The station is it are program. Unreable systems of the program. Unreable systems of the program. Unreable systems of the program of the progr	gulations, on structions in the structions in the structions in the structions in the structions for full example, in the structions for full example, in the structions for full example, in the structure is the structure in the	vour cable sor authorizatin the paper elevision properties of the properties of the properties of the formula of the formula of the formula of the listed of the properties of the listed	ogram NO rogram ining is unting er station mation. cy" or or, in e month curately be equired
SUBSTITUTE CARRIAG In General: In space I, idem substitute basis during the a explanation of the programm 1. SPECIAL STATEMEN • During the accounting pe broadcast by a distant sta Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUTI In General: List each subs clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call Column 4: Give the bro the case of Mexican or Cal Column 5: Give the mon first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m." Column 7: Enter the let to delete under FCC rules was substituted for program	GE: SPECIA titify every nor accounting prining that mur IT CONCER eriod, did you ation? p.," leave the E PROGRA stitute progra ace, please e of every nor a distant state egulations, certifes like "mor a bulls." In was broad I sign of the hadcast statit nadian statit inth and day ive "5/7." hes when the ace Example: a ter "R" if the and regulati mming that y	ernetwork televitoeriod, under spist be included in the includ	ision program, broadcast be pecific present and former in this log, see page (v) of TITUTE CARRIAGE or carry, on a substitute being blank. If your answer attended in the substitute of the subs	ay a distant start Crules, rethe general in asis, any nor asis "Yes," you as wherever part of the program") and titles, for "No." arm. The station is it are program. Unreable systems of the program. Unreable systems of the program. Unreable systems of the program of the progr	gulations, on structions in the structions in the structions in the structions in the structions for full example, in the structions for full example, in the structions for full example, in the structure is the structure in the	representation procession process	eystem carried on a tions. For a further r SA1-2 form. ogram x NO rogram ning is unting er station mation. ey" or or, in e month curately be
In General: In space I, idems ubstitute basis during the a explanation of the programm 1. SPECIAL STATEMEN • During the accounting per broadcast by a distant state sta	titip every nor accounting prining that must be riod, did you ation? Depriod, did you ation? Depriod a distant state egulations, our is a distant state egulations, our is sike "mode a distant state egulations, our is sign of the readcast station and day ive "5/7." nes when the access that is a Example: a state "R" if the and regulation maning that your is the regulation of th	ernetwork televitoeriod, under spist be included in the includ	ision program, broadcast be pecific present and former in this log, see page (v) of TITUTE CARRIAGE or carry, on a substitute being blank. If your answer attended in the substitute of the subs	ay a distant start Crules, rethe general in asis, any nor asis "Yes," you as wherever part of the program") and titles, for "No." arm. The station is it are program. Unreable systems of the program. Unreable systems of the program. Unreable systems of the program of the progr	gulations, on structions in the structions in the structions in the structions in the structions for full example, in the structions for full example, in the structions for full example, in the structure is the structure in the	representation procession process	ogram NO rogram ining is unting er station mation. cy" or or, in e month curately be equired
stated as "6:00–6:30 p.m." Column 7: Enter the let to delete under FCC rules was substituted for prograr	ter "R" if the and regulati mming that y	e listed progran ions in effect d	m was substituted for proດ during the accounting peri	ramming that od; enter the	it your syst letter "P" i	tem was <i>re</i> f the listed	equired
S	1 1			7. REASON FOR			
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S			'		DELETION
		2 11/52	1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S	I. IIILE OF PROGRAM	SUBSTITUTE PROGRAM CARR 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH	SUBSTITUTE PROGRAM 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6.	1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES

Accounting Period:	2022/2			FORM SA1-2E. PAGE 6.				
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Hilltop Communications, Inc.			SYSTEM ID# 6173				
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explana 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	system's tion of how	secondary trans w to compute thi	smission service				
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 \$13	7,100 OR	LESS					
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-month accounting period is \$52.00.							
	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 LE	SS (but m	nore than \$137,	100)				
	Base amount under statutory formula	. \$	263.800.00					
	Enter amount of gross receipts from space K		•	-				
	3. Subtract line 2 from line 1			_				
	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 \$26	3.800 (but	t less than \$527	(.600)				
	5200110.011000112021110011110112111111111	0,000 (24	11000 1111111 4021	,000)				
	1. Enter the amount of gross receipts from space K	. \$	423,312.20	_				
	Base amount under statutory formula	\$	263,800.00	_				
	3. Subtract line 2 from line 1	\$	159,512.20	_				
	4. Multiply line 3 by .01		•	4 505 40				
			-	1,595.12				
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)		\$	1,319.00				
	6. Interest charge. Enter the amount from line 4, space Q, page 8			0.00				
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4	, 5, and 6		\$ 2,914.12				
	FILING FEE AND TOTAL REMITTANCE DU	JE						
Filing Fee and Total Remittance	Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)		\$	2,914.12				
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		\$	20.00				
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$ 2,934.12				
	EFT Trace # or TRANSACTION ID #	2	74GQI0T]				
	<u>Important:</u> Your remittance must be in the form of an electronic payr See page i of the general instructions in the paper SA1-2 form and the		-					

Accounting Period: 2	2022/2				FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OV Hilltop Commun	NNER OF CABLE SYSTEM: nications, Inc.			SYSTEM ID# 6173
M Channels	to its subscribers, 1. Enter the total n system carried te	and (2) the cable system's t			7
		ole system carried television st services			319
N Individual to Be Contacted		BE CONTACTED IF FURTH out this statement of accour	HER INFORMATION IS NEEDED (Identify an nt.)	individual	
for Further Information		Karen Borovich		Telephone	(518) 537-4835
	ï	PO Box 352, 210 Mai (Number, street, rural route, apartr Germantown, NY 125 (City, town, state, zip)	ment, or suite number)		
	Email	karen.borovich(@gtelcorp.com	Fax (optional) (518) 537-67	700
0	CERTIFICATION (T	This statement of account m	ust be certified and signed in accordance with	n Copyright Office regulations	,
Certification	• I, the undersigned	d, hereby certify that (Check o	one,but only one, of the boxes.)		
	(Owner	other than corporation or p	partnership) I am the owner of the cable systen	n as identified in line 1 of space	e B; or
	in lin	e 1 of space B and that the c	ation or partnership) I am the duly authorized owner is not a corporation or partnership; or		•
	in lin	e 1 of space B.	(if a corporation) or a partner (if a partnership) o		·
		and correct to the best of my	l hereby declare under penalty of law that all sta y knowledge, information, and belief, and are m		ein
			X /s/ Bruce Bohnsack		
			Enter an electronic signature on the line above t Enter signature using an "/s/ signature" (e.g., /s	•	
		Typed or printed	d name: Bruce C. Bohnsack		
		Title: (Title of of	President fficial position held in corporation or partnership)		
		Date:	011111111111111111111111111111111111111	03.17.23	

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 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.

PECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Trile 17, section 111(a)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts, be did to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the systems from the basic service of providing secondary transmissions of primary broadcast transmitters, the system for the basic service of providing 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? No	ounting Period: 2	2022/2	FORM SA1-2E. PAGE 8
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Statellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:	GAL NAME OF OWI	NER OF CABLE SYSTEM:	SYSTEM ID:
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 plansmath 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? No YES. Enter the total here and list the satellite carrier(s) below. S 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. Line 1 Enter the amount of late payment or underpayment. Line 2 Multiply line 1 by the interest rate* and enter the sum here	ltop Commun	ications, Inc.	6173
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? No	The Satellite Hollowing sentence "In determined to service of the	ome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- te: rmining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include sul	-
Name Mailing Address Q Interest Assessment 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 x days Line 2 Multiply line 1 by the interest rate* and enter the sum here x days Line 3 Multiply line 2 by the number of days late and enter the sum here n space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6 (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		,	
YES. Enter the total here and list the satellite carrier(s) below. \$	-		3
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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 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.

U.S. Copyright Office Form SA1-2E Short Form (Rev. 05-17)