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.	

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	AMOUNT	 coplicsoa@copyright.gov
2/28/2023	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		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.	062439
		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)	
	INSTR	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unles	es these
С		s already 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:	
		SMITHFIELD STATE CORRECTIONAL INSTITUTION MAILING ADDRESS OF CABLE SYSTEM:	
		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	FORM SA1-2E. PAGE 1b.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	CEQUEL COMMUNICATIONS LLC	062439
D Area Served	Instructions: List each separate community served by the cable system. A "com separate and distinct community or municipal entity (including unincorporated unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mo city.	communities within unincorporated areas and including single, discrete I serve as a form of system identification hereafter known as the "first
		07475
First	CITY OR TOWN HUNTINGDON	PA
Community	(SMITHFIELD SCI)	
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:							A1-2E. PAGE	
Name	CEQUEL COMMUNICATIONS LLC								06243	
E	SECONDARY TRANSMISSION In General: The information in s					r transmission se	ervice of th	e cable		
	system, that is, the retransmission	on of television a	and rad	io broadcasts b	y your sys	stem to subscrib	ers. Give i	nformation		
Secondary	about other services (including p						iose existir	ng on the		
Transmission	last day of the accounting period Number of Subscribers: Both						o ovotom	brokon		
Service: Sub- scribers and	down by categories of secondary	•								
Rates	each category by counting the n			0 / 1						
	separately for the particular serv							U		
	Rate: Give the standard rate c	-	-	•			-			
	unit in which it is generally billed.	· · ·	,		y standaro	d rate variations	within a pa	articular rate		
	category, but do not include disc Block 1: In the left-hand block				es of seco	ondary transmiss	ion service	e that cable		
	systems most commonly provide	•		0		•				
	that applies to your system. Note									
	categories, that person or entity						•			
	subscriber who pays extra for ca					in the count und	er "Service	e to the		
	first set" and would be counted of Block 2: If your cable system					service that are	different fro	om those		
	printed in block 1 (for example, t	-		•						
	with the number of subscribers a									
	sufficient.									
	BLO	OCK 1 NO. OF					BLOCK	K 2 NO. OF		
	CATEGORY OF SERVICE	SUBSCRIBE	RS	RATE	CATI	EGORY OF SEF	RVICE	SUBSCRIBERS	RATE	
	Residential:									
	 Service to first set 		0	-						
	 Service to additional set(s) 									
	 FM radio (if separate rate) 									
	Motel, hotel									
	Commercial		356	42.41						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC	ONDARY TRAN	ISMISS	IONS: RATES						
F	In General: Space F calls for rat		'		•					
	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									
Services	0	•					0 ()			
Other Than	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,									
Secondary	enter only the letters "PP" in the rate column.									
Transmissions:	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									
	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.									
		BLOC	CK 1					BLOCK 2		
	CATEGORY OF SERVICE			ORY OF SER	/ICE	RATE	CATEG	ORY OF SERVIC	E RATE	
	Continuing Services:		Installa	tion: Non-resi	dential					
	• Pay cable	-	• Mot	el, hotel						
	• Pay cable—add'l channel	-	• Con	nmercial						
	 Fire protection 		• Pay	cable						
	•Burglar protection		• Pay	cable-add'l ch	annel					
	Installation: Residential		• Fire	protection						
	• First set	-	• Burg	glar protection						
	 Additional set(s) 	_		ervices:						
	• FM radio (if separate rate)		• Rec	onnect		-				
	• Converter		• Disc	connect						
			• Out	let relocation		-				
			• Mov	e to new addre		_				
			10101		33					

ng Period:	2022/2			FORM SA1-2E. PAGE						
ame	LEGAL NAME OF OWNER C	F CABLE SYSTEM:		SYSTEM ID						
	CEQUEL COMMUNIC	ATIONS LLC		06243						
	PRIMARY TRANSMITTERS:	TELEVISION								
G imary	carried by your cable syste FCC rules and regulations	eneral: In space G, identify every television station (including translator stations and low power television stations) ed by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 9(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								
Transmitters: Television	Substitute Basis Stations	as explained in the next paragraph. With respect to any distant stations ca ules, regulations, or authorizations:	arried by your cable system on a su	ibstitute program						
	• Do <i>not</i> list the station her station was carried <i>only</i> or	e in space G—but do list it in space I (th								
	basis. For further information Column 1: List each station	n's call sign. <i>Do not</i> report origination d with a station according to its over-the	see page (v) of the general instruc program services such as HBO, ES	tions. PN, etc. Identify each						
	"WETA-2" as the same on Column 2: Give the chann	the form. el number the FCC assigned to the tele								
	· · · · · · · · · · · · · · · · · · ·	RC is channel 4 in Washington, D.C.	station, an independent station, or	a noncommercial						
	(for independent multicast) For the meaning of these to Column 4: Give the location	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.								
	1. CALL SIGN	1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION 4. LOCATION								
	WATM-1	23	N	ALTOONA, PA						
	WJAC-1	6	N	JOHNSTOWN, PA						
lecessary	WPCW-1	19	I	PITTSBURGH, PA						
	WPSU-1	3	E	CLEARFIELD, PA						
	WTAJ-1	10	N	ALTOONA, PA						
	WWCP-1	8	I	JOHNSTOWN, PA						
ows as Necessary										

	OMMUNICA	TIONS	LLC					0624
	t every radio s	tation ca	rried on a separate and discre nerally receivable by your cable				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: C	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 he static ion's sign a check n's location	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the sy pyright Office regulations on thi each station carried. on is AM or FM. nal was electronically processes a mark in the "S/D" column. on (the community to which the the community with which the s	the system's hea ystem's FM anter is point, see page ed by the cable sy e station is licens	adend, and (2) nna, during ce e (v) of the ge ystem as a sep 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	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	d: 2022/2					F	ORM SA1-2E. PAGE 5
	LEGAL NAME OF OWNER OF O	CABLE SYST	EM:				SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LL	.C				062439
	SUBSTITUTE CARRIAGE	: SPECIAI	STATEMEN	T AND PROGRAM LOG			
	In General: In space I, identit						
Substitute	<i>substitute basis</i> during the ac explanation of the programmi						
Carriage:	1. SPECIAL STATEMENT	CONCER	NING SUBSTI	TUTE CARRIAGE			
Special Statement and	 During the accounting peri 	od, did you	r cable system	carry, on a substitute basi	s, any nonnet	twork telev <u>ision</u> prog	iram
Program Log	broadcast by a distant stat	ion?				YES	
	Note: If your answer is "No,	" leave the	rest of this pag	e blank. If your answer is "			
	-	leave the	rest of this pag	e blank. If your answer is	res, you me		gram
	log in block 2. 2. LOG OF SUBSTITUTE	PROGRA	MS				
	In General: List each subst			te line. Use abbreviations v	wherever pos	sible, if their meanin	g 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						
	"NBA Basketball: 76ers vs.						
				"Yes." Otherwise enter "N sting the substitute progra			
				e community to which the		nsed by the FCC or,	in
	the case of Mexican or Can	adian statio	ns, if any, the c	community with which the s	station is iden	itified).	
			when your syst	em carried the substitute p	orogram. Use	numerals, with the i	month
	first. Example: for May 7 giv Column 6: State the time		substitute prod	gram was carried by your o	able system	List the times accur	ately
	to the nearest five minutes.						
	stated as "6:00–6:30 p.m."						
	to delete under FCC rules a			was substituted for progra			
	was substituted for program						ogram
	effect on October 19, 1976.	0,	,	•		0	
	s	UBSTITUT	E PROGRAM			EN SUBSTITUTE	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	6. TIMES FROM — TO	DELETION
						_	
						_	
						_	
						_	
						_	
						_	
						_	
	[_	

Accounting Period:	2022/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	S	YSTEM ID# 062439
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.	nission service Imount, see	0,585.52 pss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less. • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$ • Use block 3 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 \$263,800 but less than \$527,600. 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)	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# 062439
M Channels	to its subscrib 1. Enter the to system car 2. Enter the to on which th	bers, 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	ions	e accounting period.	6 49
N Individual to Be Contacted		TO BE CONTACTED IF FUR ct about this statement of acc	RTHER INFORMATION IS NEEDED (Identify ar count.)	n individual	
for Further Information	Name	RODNEY HASKINS	3	Telephone (903) 5	79-3152
	Address	3027 S SE LOOP 32 (Number, street, rural route, apa TYLER, TX 75701 (City, town, state, zip)			
	Email	RODNEY.HAS	SKINS@ALTICEUSA.COM	Fax (optional	
	CERTIFICATIO	N (This statement of account i	must be certified and signed in accordance with	n Copyright Office regulations)	
O Certification			k one, <i>but only one</i> , of the boxes.) r partnership) I am the owner of the cable system	n as identified in line 1 of space B; or	
		in line 1 of space B and that	oration or partnership) I am the duly authorized a t the owner is not a corporation or partnership; or		
	I have examin are true, comp	in line 1 of space B. ed the statement of account an	er (if a corporation) or a partner (if a partnership) of nd hereby declare under penalty of law that all stat f my knowledge, information, and belief, and are m	ements of fact contained herein	able system
	Ĭ		X /s/ Alan Dannenbaum		
			Enter an electronic signature on the line above t Enter signature using an "/s/ signature" (e.g., /s		
		Typed or printe	ted name: ALAN DANNENBAUM		
		Title:	SVP, PROGRAMMING (Title of official position held in corporation or partnership)		
		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.

	ing Period: 2022/2 FORM SA1-2	2E. PAGE {
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Statellite home Viewer Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Capyright Act by adding the fol- towing service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- archers and anomato California Transmissions of primary broadcast transmitters, the system shall not include sub- archers and anomato California Transmissions of primary broadcast transmitters, the system shall not include sub- archers and anomato California Transmissions of primary broadcast transmitters, the system shall not include sub- archers and anomato California Transmissions receipts for secondary transmissions broaded in the paper SA1-2 form. To During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier to satellite carrier(s) below. There is the satellite carrier(s) below. To receipt Exclusion NOT No No No No No No No No No N		STEM ID
The Statilis Home Viewer Act of 1988 amended Title 17, section 111(g)(1)(A), of the Copyright Act by adding the following sentence: P The determining the total number of subscribers and the gross amounts paid to the cable system for the basic providing secondary transmissions opinaval protections 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 (wii) 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 carrier(s) below. Image Maing Address Name Maing Address Line 1 Enter the total here and list the satellite carrier(s) below. Line 2 Multiply line 1 by the interest rate" and enter the sum here. x x days Line 3 Multiply line 2 by the number of days late and enter the sum here score and a late payment or underpayment. r to view the interest rate thart click on www.copyright gov/itcensing/interest-rate goff. For further assistance please contact the Licensing Ovieton at (202) 707-8150 or iteensing/@copyright.gov. * To bies the decimal equivalent of 1985, which is the interest assessment for one day late. Nore:	EL COMMUNICATIONS LLC	062439
YES: Enter the total here and list the satellite carrier(s) below. \$ Name Mame Address Maming Address Mame Address INTEREST ASSESSMENT No not supplete 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.	P Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- ving 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 sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." The more information on when to exclude these amounts, see the note on page (vii) of the general instructions ated in the paper SA1-2 form. Tring the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions de by satellite carriers to satellite dish owners?	g Gross
Name Name Maling Address Maling Address INTEREST ASSESSMENT Maling 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. Imerest Assessment Line 1 Enter the amount of late payment or underpayment x	NO	
Mailing Address Mailing Address 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 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 results of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and results of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and results of a late payment or underpayment and results of a late payment or underpayment and results of a late payment or underpayment and results of a late pay mathematication or interest assessment for more day late. Image: Complete 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. <td< td=""><td>YES. Enter the total here and list the satellite carrier(s) below</td><td></td></td<>	YES. Enter the total here and list the satellite carrier(s) below	
You must complete this worksheet for those royally payments submitted as a result of a late payment or underpayment. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of Comparis		
You must complete this worksheet for those royally payments submitted as a result of a late payment or underpayment. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of Comparis		
Line 3 Multiply line 2 by the number of days late and enter the sum here	r an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	essment
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	e 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	e 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	e 4 Multiply line 3 by 0.00274** and enter here	
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. Owner Address ID number First community served	* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf.</i> For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
Address ID number First community served		
Address ID number First community served		
ID number First community served		
First community served	Jress	
	number	
Accounting period	st community served	
	counting period	

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