THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 Short Form

Return to: Library of Congress FOR COPYRIGHT OFFICE USE ONLY STATEMENT OF ACCOUNT Copyright Office for Secondary Transmissions by DATE RECEIVED AMOUNT Licensing Division Cable Systems (Short Form) 101 Independence Ave. SE Washington, DC 20557-6400 \$ (202) 707-8150 General instructions are at the 8/28/23 end of this form [pages (i)-(vii)]. ALLOCATION NUMBER For courier deliveries, see page ii of the general instructions

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:						
Accounting Period	January 1-June 30, 202	3					
B _{Owner}	incorrect information and print or type the co Give the full legal name of the owner of rate title of the subsidiary, not that of the par List any other name or names under wh <i>If there were different owners during th</i> <i>a single statement of account and royalty fe</i>	rrect information beside it. the cable system. If the owner is a sub ent corporation. ich the owner conducts the business of <i>e accounting period, only the owner on</i> <i>e payment covering the entire accounti</i>	the last day of the accounting period should submi	it 028776			
	LEGAL NAME OF OWNER/MAILING ADD	DRESS OF CABLE SYSTEM					
				877620231* 028776 2023/1			
	Four International Drive, S Rye Brook, NY 10573	uite 330					
С			tify the business and operation of the system e system, if different from the address given i				
System	1 IDENTIFICATION OF CABLE SYSTEM:						
	MAILING ADDRESS OF CABLE SYSTEM: 234 N Windriver Drive (Number, street, rual route, apartment, or suite number) Douglas, WY 82633 (City, town, state, zip code)						
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 entitiy (including unincorporated communites within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that 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, condiminiums, or mobile home parks should be reported in paratheses below the identified city.						
	CITY OR TOWN	STATE	CITY OR TOWN	STATE			
First Community	Wheatland Platte County	WY WY	-				
form in order to pro- numbers. By provid search reports prep	cess your statement of account. PII is any personal ing PII, you are agreeing to the routine use of it to e	information that can be used to identify or tr stablish and maintain a public record, which PII requested is that it may delay processing	personally identifying information (PII) requested on this race an individual, such as name, address and telephone includes appearing in the Offce's public indexes and in g of your statement of account and its placement in the yould be made by a court of law.				

Form SA1-2c Rev 04/2011

Name	LEGAL NAME OF OWNER OF C	SYS	STEM ID								
Name	Vyve Broadband J, LLC										
Е	SECONDARY TRANSMISSION										
	In General: The information in space E should cover all categories of secondary transmission service of the cable										
Secondary	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										
Secondary Transmission	last day of the accounting period (June 30 or December 31, as the case may be).										
Service: Sub-											
scribers and	down by categories of secondary transmission service. In general, you can compute the number of subscribers in										
Rates	each category by counting the number of billings in that category (the number of persons or organizations charged										
	separately for the particular serv					0	,				
	Rate: Give the standard rate of	-	-	•				-			
	unit in which it is generally billed category, but do not include disc	• •		,		ard rate variation	is within	a particular rate			
	Block 1: In the left-hand block					condary transmi	ssion ser	vice that cable			
	systems most commonly provide	•		•		•					
	that applies to your system. Not	e: Where an ir	Idividua	l or organizatio	on is receiv	ving service that	falls und	ler different			
	categories, that person or entity					• •	•				
	subscriber who pays extra for ca						nder "Se	rvice to the			
	first set" and would be counted of						a differer	t from those			
	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 a										
	sufficient.	,	0								
	BLC	DCK 1					BLOO				
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATE		
	Residential:	CODOCIND	LIKU	TOTE	O/ (I		TUICE	CODOCIVIDENCO	TOTT		
	Service to first set		105	25.00							
	Service to additional set(s)			_0.00							
	• FM radio (if separate rate)										
	Motel, hotel		24	68.99							
	Commercial		24	66.99							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRA			s						
-	In General: Space F calls for rat					all your cable sy	stem's se	ervices that were			
F	not covered in space E, that is, t	hose services	that are	not offered in	combinati	on with any sec	ondary tr	ansmission			
	service for a single fee. There ar				0		0	()			
Services	furnished at cost or (2) services										
Other Than Secondary	amount of the charge and the ur		usually	ollied. If any r	ates are c	narged on a var	lable per	-program basis,			
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 hate charged by the cable system for each of the applicable services insted. 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										
		BLOCK 1									
		BLO	CK 1					BLOCK 2			
	CATEGORY OF SERVICE			GORY OF SER	VICE	RATE	CATE	BLOCK 2 GORY OF SERVICE	RATE		
			CATEC	GORY OF SER ation: Non-res		RATE	CATE		RATE		
	CATEGORY OF SERVICE		CATEC Installa			RATE T&M	CATE		E RATE		
	CATEGORY OF SERVICE Continuing Services:	RATE	CATEC Installa • Mo	ation: Non-res			CATE		E RATE		
	CATEGORY OF SERVICE Continuing Services: • Pay cable	RATE 19.95	CATEC Installa • Mo • Col	ation: Non-res tel, hotel		T&M	CATE		E RATE		
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	RATE 19.95 15.95	CATEC Installa • Mo • Col • Pay	ation: Non-res tel, hotel mmercial	idential	T&M T&M	CATE		E RATE		
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	RATE 19.95 15.95 N/A	CATEC Installa • Mo • Col • Pay • Pay	ation: Non-res tel, hotel mmercial y cable	idential	T&M T&M T&M	CATE		E RATE		
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection	RATE 19.95 15.95 N/A	CATEC Installa • Mo • Col • Pay • Pay • Fire	ation: Non-res tel, hotel mmercial y cable y cable-add'l cl	idential	T&M T&M T&M T&M	CATE		RATE		
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential	RATE 19.95 15.95 N/A N/A 59.99	CATEC Installa • Mo • Col • Pay • Pay • Fire • But	ation: Non-res tel, hotel mmercial y cable y cable-add'l cl e protection	idential	T&M T&M T&M T&M N/A	CATE				
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	RATE 19.95 15.95 N/A N/A 59.99	CATEC Installa • Mo • Col • Pay • Pay • Fire • Bui Other	ation: Non-res tel, hotel mmercial y cable y cable-add'l cl e protection rglar protection	idential	T&M T&M T&M T&M N/A	CATE		E RATE		
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	RATE 19.95 15.95 N/A N/A 59.99 19.99	CATEC Installa • Mo • Col • Pay • Fare • Bui Other	ation: Non-res tel, hotel mmercial y cable y cable-add'l cl e protection rglar protection services: connect	idential	T&M T&M T&M T&M N/A N/A	CATE		E RATE		
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	RATE 19.95 15.95 N/A N/A 59.99 19.99	CATEC Installa • Mo • Col • Pay • Pay • Fire • Bui Other • Rea • Dis	ation: Non-res tel, hotel mmercial y cable y cable-add'l cl e protection rglar protection services: connect connect	idential	T&M T&M T&M T&M N/A N/A 29.99	CATE				
	CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	RATE 19.95 15.95 N/A N/A 59.99 19.99	CATEC Installa • Mo • Cou • Pay • Fire • Bui Other • Rea • Dis • Ou	ation: Non-res tel, hotel mmercial y cable y cable-add'l cl e protection rglar protection services: connect	nannel	T&M T&M T&M T&M N/A N/A			E RATI		

Name	LEGAL NAME OF OWNE	R OF CABLE SYSTE	EM:	SY	STEM ID			
Hanit	Vyve Broadband	J, LLC			02877			
	PRIMARY TRANSMITTERS:	TELEVISION						
G Primary Transmitters: Television	 In General: In space G, ic carried by your cable syster FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, Substitute Basis State basis under specific FCC r Do not list the station here, and basis. For further inforr Column 1: List each state Column 2: Give the nut. This may be different from 	dentify every televis em during the acco s in effect on June 2 (e)(2) and (4), or 7(as explained in the ions : With respect ules, regulations, or re in space G—but y on a substitute ba al also in space I, if the nation concerning bo tation's call sign. Do umber of the channel the channel on who	ounting period, exc 24, 1981, permittin 6.63 (referring to 7 next paragraph. to any distant station authorizations: do list it in space l asis. the station was car substitute basis stato o not report origina el on which the sta nich your cab;e sys	ng translator stations and low power television stations) ept (1) stations carried only on a part-time basis under g the carriage of certain network programs [sections 6.61(e)(2) and (4))]; and (2) certain stations carried on a ons carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ried both on a substitute basis and also on some other ations, see page (v) of the general instructions. tion program services such as HBO, ESPN, etc. tion's broadcasts are carried in its own community. tem carried the station. Identify each multicast stream on. For example, report multicast stream "WETA-2" as				
	the same on the form. 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. 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 identifed.							
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	6. LOCATION OF STATION				
	KCNC 4.1 (CBS)	4	N	Denver, CO				
	KCWC 6.1 (PBS)	6	E	Riverton, WY				
	KCWC-Create 6.2	6.2	E-M	Riverton, WY				
	KCWC-PBS Kids 6.3	6.3	E-M	Riverton, WY				
	KDVR 31.1 (FOX)	31	I	Denver, CO				
	ККТQ 16.1 (АВС)	16	N	Cheyenne, CO				
	KMGH 7.1 (ABC)	7	N	Denver, CO				
	KTVD 20.1 (MyNet)	20	I	Denver, CO				
	KUSA 9.1 (NBC)	9	N	Denver, CO				
	KWGN 2.1 (CW)	2	I	Denver, CO				
	KCNC - D1 - CBS HD	4.1	N-M	Denver, CO				
			·····					

ACCOUNTING PERIOD: 2023/1

FORM SA1-2. F LEGAL NAME OF Vyve Broadl	F OWNER OF (/STEM:					SYSTEM ID# 028776	Name
,	····,							010110	
	t every radio s	station ca	rried on a separate and discre nerally receivable" by your ca						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.								Primary Transmitters: Radio	
or detailed info Column 1: Id	ormation abou lentify the call	t the the sign of e	Copyright Office regulations c each station carried. n is AM or FM.						
gnal, indicate	this by placing	g a check	nal was electronically processons mark in the "S/D" column. The community to which the		-				
			the community with which the				, or, in a		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SI	IGN	AM or FM	S/D	LOCATION OF STATION	
	·								
	·								
	·								
	·								
									

FORM SA1-2. PAGE 5.

Name	LEGAL NAME OF OWNER OF Vyve Broadband J, LL		TEM:				;	6YSTEM ID# 028776	
	SUBSTITUTE CARRIAGI	E: SPECI	AL STATEME	NT AND PROGRAM LO	G				
Substitute	In General: In space I, identify <i>every nonnetwork television program</i> broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions.								
Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE								
Special Statement and Program Log	• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?								
	Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.								
	 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: T6ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for October 19, 1976. 								
	WHEN SUBSTITUTE								
	SI 1. TITLE OF PROGRAM	2. LIVE?	E PROGRAM		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES	7. REASON FOR DELETION	
				4. STATION'S LOCATION	CARR	IAGE OCCUI	RRED		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUI 6. TIN	RRED IES		

FORM SA1-2.	PAGE 6.		-
	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 028776	Name
	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total or all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission servic (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.		K Gross Receipts
	Gross receipts from subscribers for secondary transmission service(s)		
	during the accounting period	23,597.00 gross receipts)	
	T ROYALTY FEE To compute the royalty fee you owe: Complete block 1, block 2, <i>or</i> block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less		L Copyright Royalty Fee
• • See page (vi) (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 of the general instructions for more information.		
See page (VI)	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 this six-moni accounting period is \$52.00		
	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 \$137,100)		
	1. Base amount under statutory formula		
	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		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01	_	
	5. Royalty due on the first \$263,800 of gross recepits (under statutory formula) \$ 1,319.00	<u> </u>	
	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		
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 # Not Ava	ilable	
	See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more info		
	Coo page ror une general manuolione in une paper on r-2 norm and the Excernisticulions tab for more info		

		FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 028776
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast station to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	าร
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	11
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	151
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can write or call about this statement of account.)	
for Further Information	Name Marie Censoplano Telephone 914- Address Four International Drive, Suite 330	234-8313
	(Number, street, rural route, apartment, or suite number) Rye Brook, NY 10573 (City, town, state, zip)	
	Email (optional) Fax (optional)	
O Certifcation	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulations as explained in the general instructions.) • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	S,
	 (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or 	n as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of in line 1 of space B.	the cable system
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained here are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	ein
	Handwritten signature: /s/ Daniel J White	
	Typed or printed name: Daniel J. White	
	Title: SVP - Financial Planning (Title of official position held in corporation or partnership)	
	Date: 8/25/23	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce 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 Offce's public indexes and in search reports prepared for the public. The effects 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 fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYST	EM ID#
Vyve Broadband J, LLC 0	28776 Name
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 fol- lowing 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."	Statement Concerning
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions. 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 YES. Enter the total here and list the satellite carrier(s) below.	Gross Receipts Exclusion
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.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
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	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	
* 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@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, 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 Accounting period	
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (P	ା) 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 Offce's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.