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

		FOR COPYRIGH	HT OFFICE USE ONLY	Return completed workbook by email to:
-	ENT OF ACCOUNT ary Transmissions by	DATE RECEIVED		-
	ems (Short Form)		\$	<u>coplicsoa@loc.gov</u> For additional information,
General instru	uctions are located	3/8/24	· · · · · · · · · · · · · · · · · · ·	contact the U.S. Copyright Office Licensing Division at:
in the first tab	of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150
Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT: (Y	YYY/(Period))	
	2023/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	2023/2			
		22 Barcode Data Filing Period (optional	con instructions)	
	202	32 Barcode Data Filing Feriod (optional	- 366 Instructions)	
Accounting Period				
	Instructions:			
В	Give the full legal name of the owner o title of the subsidiary, not that of the p		sidiary of another corporation, give the full c	orporate
Owner	List any other name or names under w	hich the owner conducts the business of	the cable system.	
			, the last day of the accounting period should	l submit a
		y fee payment covering the entire accourt		
	Check here if this is the system's first fi	ling. If not, enter the system's ID number	r assigned by the Licensing Division.	24008
	LEGAL NAME OF OWNER/MAIL	ING ADDRESS OF CABLE SYSTEM	1	
	NEX-TECH LLC			
	BUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFEREN	Т)	
	MAILING ADDRESS OF OWNER	DE CARLE SYSTEM		
	145 N MAIN			

LENORA, KS 67645 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these

(Number, street, rural route, apartment, or suite number)

names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B

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 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 fling, a determination that would be made by a court of law.

Number, street, rural route, apartment, or suite number)

IDENTIFICATION OF CABLE SYSTEM:

MAILING ADDRESS OF CABLE SYSTEM:

City, town, state, zip code)

С

System

1

2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: NEX-TECH LLC	SYSTEM 240						
D Area Served	Instructions: List each separate community served by the cable system. A "commun "a separate and distinct community or municipal entity (including unincorporated cc discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you li as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile l identified city.	ity" is the same as a "community unit" as defined in FCC rule ommunities within unincorporated areas and including single ist will serve as a form of system identification hereafter kno						
001104								
First	CITY OR TOWN GRAINFIELD	STATE KS						
Community	COLLYER	KS						
	GOVE	KS						
dd Rows as Necessary	PARK	KS						
	QUINTER	KS						
	านและการการการการการการการการการการการการการก							

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM						FORM SA1				
Name	NEX-TECH LLC							0.0	2400			
	SECONDARY TRANSMISSION				ATES							
Ε	In General: The information in s					y transmission	service of t	he cable				
	system, that is, the retransmission											
Secondary	about other services (including p						those exist	ing on the				
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						hle svetem	broken				
scribers and	down by categories of secondar	•										
Rates	each category by counting the n	umber of billing	gs in tha	at category (the	number c	of persons or or	ganizations					
	separately for the particular serv					•	,					
	Rate: Give the standard rate of unit in which it is generally billed	-	-	•			-	-				
	category, but do not include disc				any standa							
	Block 1: In the left-hand block	in space E, th	e form l	ists the catego								
	systems most commonly provide											
	that applies to your system. Not categories, that person or entity			-		-						
	subscriber who pays extra for ca											
	first set" and would be counted o											
	Block 2: If your cable system	-										
	printed in block 1 (for example, t with the number of subscribers a											
	sufficient.	and rates, in th	e ngni-i	Ianu Diock. A t	wo- or three	e-word descrip	uon or the s	Service is				
		DCK 1					BLOCK	on of the service is BLOCK 2				
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	F			
	Residential:	000001110			0,111			CODOCINDENCO				
	Service to first set		281	30.00	DELUX	E		235	60.			
	 Service to additional set(s) 								6			
	• FM radio (if separate rate)											
	Motel, hotel											
	Commercial											
	Converter											
	Residential											
	Non-residential											
	SERVICES OTHER THAN SEC	ONDARY TRA		SIONS: RATE	S							
F	In General: Space F calls for ra											
Г	not covered in space E, that is, t											
Services	service for a single fee. There an furnished at cost or (2) services	•			•		• • • •					
Other Than	amount of the charge and the ur											
Secondary	enter only the letters "PP" in the							-				
ransmissions: Rates	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: List any services that your cable system furnished or offered during the accounting period that were not											
Rales	•	: List any services that your cable system furnished or offered during the accounting period that were not lock 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		GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RA			
	Continuing Services:		Installa	ation: Non-res	idential							
	• Pay cable	90.00	• Mo	tel, hotel			Sports	& Entertain.	13.			
	 Pay cable—add'l channel 		• Co	mmercial			Cinema	IX	11.			
	Fire protection		• Pay	/ cable			НВО		17.			
	 Burglar protection 		-	/ cable-add'l cl	nannel			me & TMC	10.			
	Installation: Residential			e protection			Starz! E		12.			
	First set	99.00		glar protection			NFL Re	dZone	49.			
	Additional set(s)	130.00		services:								
	• FM radio (if separate rate)			connect		30.00						
	Converter		I ∙Dis	connect								
	Converter											
	Convener		• Out	tlet relocation		130.00 99.00						

	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTE		
Name	NEX-TECH LLC			24		
	PRIMARY TRANSMITTERS:	TELEVISION				
G Primary ransmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further informatic Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location	also in space I, if the station was carried on concerning substitute basis stations, on's call sign. <i>Do not</i> report origination p ed with a station according to its over-the	(1) stations carried only on a part the carriage of certain network prog 1(e)(2) and (4))]; and (2) certain st arried by your cable system on a su the Special Statement and Program d both on a substitute basis and als see page (v) of the general instruc- rogram services such as HBO, ES -air designation. For example, rep vision station for broadcasting over station, an independent station, or for network multicast), "I" (for indep r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the station	-time basis under rams [sections ations carried on a ubstitute program h Log)—if the so on some other ctions. SPN, etc. Identify each bort multistream r the air in its community a noncommercial pendent), "I-M" tional multicast). n is licensed by the		
	1. CALL SIGN					
	KSNC	2	N	GREAT BEND, KS		
	KLBY	4	N	WICHITA, KS		
Rows as Necessary	KBSH	7	N	HAYS, KS		
	KSNK	8	Ν	McCOOK, NE		
	KOOD	9	Е	HAYS, KS		
	KAKE	10	Ν	WICHITA, KS		
	KSAS-DT2	17	N-M	WICHITA, KS		
	ĸscw	23	I	WICHITA, KS		
	KSAS	24	N	WICHITA, KS		
	KWCH-DT2	110	N-M	WICHITA, KS		
	KAKE-DT2	180	N-M	WICHITA, KS		
	KMTW-DT2	181	I-M	WICHITA, KS		
	KSCW-DT3	182	I-M	WICHITA, KS		
	KOOD-DT3	183	E-M	HAYS, KS		
	KSCW-DT2	184	I-M	WICHITA, KS		
	KSAS-DT3	185	N-M	WICHITA, KS		
	KMTW-DT3	186	I-M	WICHITA, KS		
	KMTW-DT4	187	I-M	WICHITA, KS		
		•				
	KOOD-DT2	189	E-M	HAYS, KS		
		189 190	E-M I-M	HAYS, KS WICHITA, KS		
	KOOD-DT2					
	KOOD-DT2 KSCW-DT4	190	I-M	WICHITA, KS		

all-band basis v	t every radio s							
Special Instru	whose signals		arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: Column 4: Colum) it is carried by monitoring, to ormation abou rm. dentify the call State whether t f the radio stat this by placing Give the station	y the sys be recei it the Cc sign of e he static ion's sign g a chech n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t 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 the system's he system's FM ante this point, see pag ed by the cable s he station is licens	adend, and (2 nna, during ce ge (v) of the ge ystem as a se sed by the FC0) it can l ertain sta eneral ir parate a	be expected, ated intervals. Instructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		5/0	LOCATION OF STATION	CALL SIGN	AIVI OF FIVI	3/D	LOCATION OF STATION	
KQY	FM		HILL CITY, KS					
KDT	FM		BURDETT, KS					
							·	
		ŧ						

Accounting Perio	od: 2023/2						FORM	A SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	NEX-TECH LLC							24008
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LO	G			
I I	In General: In space I, ident	-	-			tion that v	our cable svs	tem carried on a
-	substitute basis during the a							
Substitute	explanation of the programn	ning that mu	ist be included	in this log, see page (v) of t	he general in	structions	in the paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE				
Special	 During the accounting per 	riod, did yo	ur cable syste	n carry, on a substitute ba	isis, any noni	network te	levision prog	ram
Statement and Program Log	broadcast by a distant sta	ition?	-	·			YES	×NO
Frogram Log					- "\/"			
	Note: If your answer is "No log in block 2.	, leave the	e rest of this pa	ige blank. If your answer is	s res, your	nust com	plete the prog	Jram
	2. LOG OF SUBSTITUT		AMS					
	In General: List each subs			ate line. Use abbreviations	s wherever p	ossible, if	their meaning	g is
	clear. If you need more spa							
				vision program ("substitute				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general catego							
	"NBA Basketball: 76ers vs.					, s.c	0.0 _0.0	
				er "Yes." Otherwise enter '				
				asting the substitute progr the community to which the		oonood by	the FCC er	in
	the case of Mexican or Car						the FCC or,	In
				stem carried the substitute			als, with the n	nonth
	first. Example: for May 7 gi		, , ,		15		,	
				ogram was carried by you				ately
	to the nearest five minutes	. Example:	a program car	ried by a system from 6:01	1:15 p.m. to 6	5:28:30 p.r	n. should be	
	stated as "6:00–6:30 p.m."	ter "R" if the	listed program	n was substituted for prog	ramming that	t vour svst	em was requ	ired
	to delete under FCC rules							
	was substituted for prograr	mming that						-
	effect on October 19, 1976							
	s	UBSTITUT	E PROGRAM	1		N SUBST AGE OC	CURRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S		5. MONTH AND DAY	-	TIMES — TO	DELETION
		Tes of No	CALL SIGN	4. STATION'S LOCATION	AND DAT	FROM		
		+						
							_	
I							_	
					·			

Accounting Period:	2023/2	FORM S	A1-2E. PAGE 6
News	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SY	STEM ID#
Name	NEX-TECH LLC		24008
K Gross Receipts	GROSS RECEIPTS instructions : I ne tigure you give in this space determines the form you file and the amount you all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary (as identified in space ±) during the accounting period. For a further explanation of now to compute general instructions located in the paper SA1-2 form Gross receipts from subscribers for secondary transmission service(: during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipt	transmission ite this amoun	serv t, 480.20
	COPYRIGHT ROYALTY FEE		
L Copyright Royalty Fee	 I o compute the royaity fee you owe: Complete plock 1, plock 2 or plock 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or le: Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equivalent block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527, See page (vi) of the general instructions located in the paper SA1-2 form for more informati 		
	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 m accounting period is \$52.0 $$	lust pay for thi	s six-mont
	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 \$ 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 \$52	7,600)	
	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 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		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$	52.00	
Remittance 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
	Copyrights!		
	See page i of the general instructions in the paper SA1-2 form for more infor	mation.	

Accounting Period:	2023/2					FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWN NEX-TECH LLC	NER OF CABLE SYSTEM:	:			SYSTEM ID# 24008
M Channels	 to its subscribers, ar 1. Enter the total null system carried tele 2. Enter the total null on which the cable 	nd (2) the cable system's mber of channels on whi evision broadcast station mber of activated chann e system carried televisio	s total numb nich the cable ns nels on broadcast		counting period.	23 327
N Individual to Be Contacted		E CONTACTED IF FURI ut this statement of acco		RMATION IS NEEDED (Identify an indi	ividual to whom	
for Further Information	Name S	scott Roe			Telephone 7	85-625-7070
	(N H	418 Vine Street lumber, street, rural route, apa lays, KS 67601 Sity, town, state, zip)	artment, or suit	e number)		
	Email	sroe@nex-tee	ch.com		Fax (optional)	
O	I, the undersigned, I (Owner of (Agent of in line X (Officer of in line I have examined the	hereby certify that (Check ther than corporation of ⁶ owner other than corpor 1 of space B and that the or partner) I am an office 1 of space B. e statement of account ar and correct to the best of r	k one, <i>but on</i> , r partnershi oration or pa e owner is no er (if a corpor nd hereby de my knowledg X Enter an Enter sign	ified and signed in accordance with Co y one, of the boxes.)) I am the owner of the cable system as intnership) I am the duly authorized age t a corporation or partnership; or ation) or a partner (if a partnership) of th clare under penalty of law that all statem e, information, and belief, and are made /s/ Rhonda S. Goddard electronic signature on the line above to co ature using an "/s/ signature" (e.g., /s/ Jo	s identified in line 1 of space B; ent of the owner of the cable sy te legal entity identified as owne nents of fact contained herein b in good faith.	rstem as identified
		Title: (Title o		Financial Officer held in corporation or partnership)		
		Date:			02/22/2024	

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	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
X-TECH LLC	2400
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.	P Special Statement Concerning Gross Receipts Exclusion
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. \$	
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
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.	Q Interest Assessment
Line 1 Enter the amount of late payment or underpayment	
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x 0.00274	
Line 4 Multiply line 3 by 0.00274** and enter here in 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@loc.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.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please	
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