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

STATEME	INT OF ACCOUNT	FOR COPYRIGH	HT OFFICE USE ONLY	Return completed workbook by email to:
for Seconda	ry Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov
General instruc	ms (Short Form) ctions are located of this workbook	2-20-24	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED E	BY THIS STATEMENT: (YY	YY/(Period)) Period 2 = July 1 - December 31	
Accounting Period		Barcode Data Filing Period (optional	- see instructions)	
В	Instructions: Give the full legal name of the owner of th the subsidiary, not that of the parent corpo		iary of another corporation, give the full cor	porate title of
Owner	List any other name or names under which	n the owner conducts the business of th	e cable system.	
	If there were different owners during the a statement of account and royalty fee paym		e last day of the accounting period should st iod.	ubmit a single
	Check here if this is the system's first filing	g. If not, enter the system's ID number a	ssigned by the Licensing Division.	29916
	LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
	Midcontinent Communications			
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)		
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
	PO Box 5040 (Number, street, rural route, apartment, or suite n			
	(City, town, state, zip)	,		
С	<b>INSTRUCTIONS:</b> In line 1, give any busin names already appear in space B. In line 2			

 

 System
 1
 IDENTIFICATION OF CABLE SYSTEM: Ellsworth, WI

 2
 PO Box 5040 (Number; street, rural route, apartment, or suite number) Sioux Falls, SD 57117-5040 (City, town, state, zip code)

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.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#
Name	Midcontinent Communications	29916
	Instructions: List each separate community served by the cable system. A "community"	
D Area Served	separate and distinct community or municipal entity (including unincorporated community unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile hom city.	ities within unincorporated areas and including single, discrete as a form of system identification hereafter known as the "first
Served		
	CITY OR TOWN	STATE
First	Ellsworth	WI
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM							1-2E. PAGE STEM IC
Name	Midcontinent Communic							U.I.	2991
Е	SECONDARY TRANSMISSION In General: The information in sp					transmission s	ervice of the	e cable	
	system, that is, the retransmission			-	•				
Secondary	about other services (including pa	, , ,	,		,		nose existin	g on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						la system l	oroken	
scribers and	down by categories of secondary	•							
Rates	each category by counting the nu								
	separately for the particular servi							and the a	
	<b>Rate:</b> Give the standard rate cl unit in which it is generally billed.	-	-	•			-		
	category, but do not include disc	· · ·	,		ly standart		within a pa		
	Block 1: In the left-hand block	•		0					
		only provide to their subscribers. Give the number of subscribers and rate for each listed category ystem. <b>Note:</b> Where an individual or organization is receiving service that falls under different							
	categories, that person or entity			Ũ		•			
	subscriber who pays extra for cal					• • •	•		
	first set" and would be counted o	0			( )				
<b>Block 2:</b> If your cable system has rate categories for secondary transmis printed in block 1 (for example, tiers of services that include one or more services that include one									
	with the number of subscribers a								
	sufficient.		s right h			word description			
	BLOCK 1 BLOCK 2								
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:								
	Service to first set		191	30.00	Busine	ss Accounts		14	30.0
	<ul> <li>Service to additional set(s)</li> </ul>				High De	ef Converter		194	3.0
	• FM radio (if separate rate)				Nursing	g Homes		54	12.0
	Motel, hotel								
	Commercial		21	78.00					
	Converter		229	3.00					
	Residential								
	Non-residential								
	SERVICES OTHER THAN SECO		NSMISS	IONS: RATES					
F	In General: Space F calls for rate	e (not subscrib	er) infor	mation with res	pect to all	your cable syst	em's servic	es that were	
Г	not covered in space E, that is, the								
Services	service for a single fee. There are furnished at cost or (2) services of	•			•		• • •		
Other Than	amount of the charge and the un								
Secondary	enter only the letters "PP" in the								
ransmissions: Rates	Block 1: Give the standard rate Block 2: List any services that							vere not	
Rates	listed in block 1 and for which a s	• •			-	÷ ·			
	brief (two- or three-word) descript	tion and includ	e the ra	te for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SER	/ICE	RATE	CATEGO	ORY OF SERVICE	RATE
	Continuing Services:		Installa	ation: Non-resi	dential				
	• Pay cable	16.00	-	tel, hotel		499.00	Cinema		16.0
	Pay cable—add'l channel		-	nmercial		499.00	Digital 1		10.0
	Fire protection		-	/ cable			Showtin		16.0
	•Burglar protection		-	/ cable-add'l ch	annel		Starz!&	Encore	16.0
	Installation: Residential			protection			TMC	lariati	16.0
	First set     Additional set(s)	50.00		glar protection			Digital V Digital E		4.0
	Additional set(s)     EM radio (if separate rate)	25.00	-	services: connect		150.00		spanoi orts&Variety	5.0
	<ul> <li>FM radio (if separate rate)</li> <li>Converter</li> </ul>		-	connect		150.00	Dig Spo	anely	11.0
	- Converter		-	connect		- 25.00			
			1 • Out			25.00			
			• Mos	ve to new addre	299	25.00			

Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM					
Name	Midcontinent Commu	nications		299					
	PRIMARY TRANSMITTERS: TELEVISION								
G Primary Transmitters: Television	In General: In space G, ide carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations: basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, WI Column 3: Indicate in each educational station, by enteu (for independent multicast), For the meaning of these te	ntify every television station (including in during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th )(2) and (4), or 76.63 (referring to 76.6 sepalained in the next paragraph. With respect to any distant stations cales, regulations, or authorizations: in space G—but do list it in space I (the asubstitute basis. Ilso in space I, if the station was carried in concerning substitute basis stations, 's call sign. <i>Do not</i> report origination p with a station according to its over-the	(1) stations carried only on a part-ti e carriage of certain network progra 1(e)(2) and (4))]; and (2) certain sta arried by your cable system on a sul- le Special Statement and Program I both on a substitute basis and also see page (v) of the general instruct rogram services such as HBO, ESF -air designation. For example, repo- vision station for broadcasting over station, an independent station, or a for network multicast), "I" (for indep r "E-M" (for noncommercial educatio ctions in the paper SA1-2 form.	ime basis under ams [sections itions carried on a bstitute program Log)—if the o on some other ions. PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" onal multicast).					
	FCC. For Mexican or Canac	lian stations, if any, give the name of th	a community with which the station	4. LOCATION OF STATION					
			N						
	KARE-DT KARE-DT3	<u>11</u> 11.3	I-M						
		11.3	I-M	MINNEAPOLIS, MN (TrueCrime)					
d Rows as Necessary	KARE-DT4 KMSP-DT	9		MINNEAPOLIS, MN (QUEST)					
				MINNEAPOLIS, MN (FOX)					
	KMSP-DT4	9.4	I-M	MINNEAPOLIS, MN (BUZZR)					
	KSTC-DT	30	I	MINNEAPOLIS, MN (IND-45)					
	KSTC-DT3	30.3	I-M	MINNEAPOLIS, MN (ME TV)					
	KSTC-DT4	30.4	I-M	MINNEAPOLIS, MN(GET TV)					
	KSTC-DT6	30.6	I-M	MINNEAPOLIS, MN(THIS TV)					
	KSTP-DT	35	N	ST PAUL, MN (ABC)					
	KSTP-DT7	35.7	I-M	ST PAUL, MN (HEROES)					
	KTCA-DT	34	E	ST PAUL, MN (PBS)					
	KTCI-DT3	23.3	E-M	ST PAUL ,MN (PBS TPT LIFE)					
	WCCO-DT	32	N	MINNEAPOLIS, MN (CBS)					
	WCCO-DT2	32.2	I-M	MINNEAPOLIS, MN (StartTV)					
	WFTC-DT	9.2	I	MINNEAPOLIS, MN (MNT)					
	WFTC-DT4	9.3	I-M	MINNEAPOLIS, MN (MOVIES)					
	WFTC-DT7	9.7	I-M	MINNEAPOLIS,MN(FOX WEATHER)					
	WHWC-DT	27	E	MENOMONIE, WI (PBS-WPT)					
	WHWC-DT2	27.2	E-M	MENOMONIE, WI (PBS-WPT)					
	WKBT-DT	8	N	LA CROSSE, WI (CBS)					
	WUCW-DT	22	<u> </u>	MINNEAPOLIS, MN (CW)					
	WUCW-DT2	23.2	I-M	MINNEAPOLIS, MN (COMET)					
	WUCW-DT3	23.3	I-M	MINNEAPOLIS, MN (CHARGE)					
	WUCW-DT4	23.4	I-M	MINNEAPOLIS, MN (TBD TV)					
	KMSP-DT5	9.5	I-M	MINNEAPOLIS, MN (THE GRIO)					

ccounting Period:	2023/2			FORM SA1-2E. PAGE
News	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM II
Name	Midcontinent Commu	nications		2991
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable system	ntify every television station (including a during the accounting period, <i>except</i> a effect on June 24, 1981, permitting th	(1) stations carried only on a part-tim	ne basis under
Primary Transmitters: Television	substitute program basis, as	(2) and (4), or 76.63 (referring to 76.6 explained in the next paragraph. With respect to any distant stations ca		
	basis under specific FCC rul	es, regulations, or authorizations: in space G—but do list it in space I (th		
	basis. For further information <b>Column 1:</b> List each station	Iso in space I, if the station was carried in concerning substitute basis stations, 's call sign. <i>Do not</i> report origination p	see page (v) of the general instruction rogram services such as HBO, ESP1	ons. N, etc. Identify each
	"WETA-2" as the same on the <b>Column 2:</b> Give the channe	I number the FCC assigned to the tele	<b>.</b>	
	Column 3: Indicate in each	RC is channel 4 in Washington, D.C. case whether the station is a network s ing the letter "N" (for network), "N-M" (;		
	(for independent multicast), For the meaning of these ter <b>Column 4:</b> Give the location	'Ε" (for noncommercial educational), o ms, see page (iv) of the general instru of each station. For U.S. stations, list	r "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station i	nal multicast). s licensed by the
	FCC. For Mexican or Canad	ian stations, if any, give the name of th	e community with which the station i	is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KMSP-DT6	9.6	I-M	MINNEAPOLIS, MN(CATCHY COM)
	WCCO-DT3	32.3	I-M	MINNEAPOLIS, MN(DABL)

Accounting P			(075)				FORM	I SA1-2E. PAGE 4
LEGAL NAME OF Midcontinen								SYSTEM ID
	t oonnan	leation	5					2991
	every radio s	tation ca	rried on a separate and discre nerally receivable by your cabl					н
For the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: St	it is carried by monitoring, to prmation abour m. entify the call tate whether t	/ the sysi be receiv t the Co sign of e he station	-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on t each station carried. n is AM or FM. nal was electronically processe	the system's hea system's FM ante his point, see pag	adend, and (2) nna, during ce ge (v) of the ge	) it can b ertain sta eneral in	e expected, ited intervals. structions in the.	Primary Transmitters: Radio
signal, indicate t <b>Column 4:</b> G	this by placing ive the station	a check i's locatio	a mark in the "S/D" column. In (the community to which the the community with which the	e station is licens	ed by the FCC			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		5,0	LOOKHON OF STATION	UNEL OIGH		5,0	LOOMING OF STATION	

Accounting Perio	d: 2023/2						FORM SA	A1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	EM:				S	YSTEM ID#
Name	Midcontinent Commun	nications						29916
	SUBSTITUTE CARRIAGE	-	-		-			
•	In General: In space I, identi substitute basis during the a	ccounting pe	eriod, under spe	cific present and former F	CC rules, regula	ations, or authoriza	ations. For a	a further
Substitute Carriage:	explanation of the programm	-			le general instru	actions in the pape	1 3A 1-2 101	
Special	1. SPECIAL STATEMENT							
Statement and	During the accounting per	•	ir cable system	carry, on a substitute ba	sis, any nonne			Т
Program Log	broadcast by a distant sta	tion?				Υ	'ES X	NO
	Note: If your answer is "No	", leave the	rest of this pag	je blank. If your answer is	s "Yes," you mi	ust complete the p	program	
	log in block 2.							
	2. LOG OF SUBSTITUTE	PROGRA	MS					
	In General: List each subst				s wherever pos	sible, if their mea	aning is	
	clear. If you need more spa Column 1: Give the title				program") the	t during the acco	ounting	
	period, was broadcast by a							
	under certain FCC rules, re	gulations, o	or authorization	s. See page (v) of the ge	neral instructio	ns for further info	rmation.	
	Do not use general categor		vies" or "baske	tball." List specific progra	am titles, for ex	ample, "I Love Lu	icy" or	
	"NBA Basketball: 76ers vs. Column 2: If the program		dcast live ente	r "Ves " Otherwise enter	"No "			
	Column 3: Give the call							
	Column 4: Give the broa	adcast statio	on's location (th	e community to which th	e station is lice		or, in	
	the case of Mexican or Can							
	<b>Column 5:</b> Give the mor first. Example: for May 7 giv	-	when your sys	tem carried the substitute	e program. Use	e numerais, with ti	ne month	
	Column 6: State the time		e substitute pro	gram was carried by you	r cable system	. List the times ac	curately	
	to the nearest five minutes.							
	stated as "6:00–6:30 p.m."		1:- 4 1					
	Column 7: Enter the letter to delete under FCC rules a							
	was substituted for program							
	effect on October 19, 1976.		-			-		
					WHE	EN SUBSTITUTE	Ξ	
		UBSTITUT	E PROGRAM		5. MONTH	AGE OCCURRE 6. TIMES		REASON FOR DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION		FROM —	то	
						_		
		+						
						_		
						_		
		+						

Accounting Period:	2023/2	FORM SA	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Midcontinent Communications	S	YSTEM ID# 29916
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Entral amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmi (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.	ssion service mount, see	0,620.22 sss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: 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 • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	63,800	
	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 thi accounting period is \$52.00	s 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		
	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 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
	Important: Your remittance must be in the form of an electronic payment payable to the Regist See page i of the general instructions in the paper SA1-2 form for more informati		its!

Accounting Period:	2023/2		FORM SA1-2E. PAGE 7.
Name		OWNER OF CABLE SYSTEM: Communications	SYSTEM ID# 29916
M Channels	to its subscribe 1. Enter the tot system carri 2. Enter the tot on which the	You must give (1) the number of channels on which the cable system carried television broadcast stations ers, and (2) the cable system's total number of activated channels during the accounting period. and number of channels on which the cable ied television broadcast stations	28 350
N Individual to		O BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom t about this statement of account.)	
Be Contacted for Further Information	Name	Rachel Meyer     Telephone     952-84	4-2655
	Address	3600 Minnesota Drive, STE 700 (Number, street, rural route, apartment, or suite number) Edina, MN 55435	
	Email	(City, town, state, zip) rachel.meyer@midco.com Fax (optional	
<b>O</b> Certification	I, the undersign     (Own     (Agen     X     (Offic     I have examined     are true, complet	$ (\text{This statement of account must be certified and signed in accordance with Copyright Office regulations)} \\ \text{ied, hereby certify that (Check one, but only one, of the boxes.) \\ \text{er other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or \\ \text{nt of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as i in line 1 of space B and that the owner is not a corporation or partnership; or \\ \text{cer or partner} I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system as in line 1 of space B. \\ d the statement of account and hereby declare under penalty of law that all statements of fact contained herein ete, and correct to the best of my knowledge, information, and belief, and are made in good faith. thon 1001(1986)] \\ \text{for mathematical statement of account and hereby declare under penalty of law that all statements of fact contained herein ete, and correct to the best of my knowledge, information, and belief, and are made in good faith. thon 1001(1986)] \\ \text{for mathematical statement of account is partner on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) \\ \text{for mathematical statement on the line above to certify this statement. The signature using an "/s/ signature" (e.g., /s/ John Smith) \\ \text{for mathematical statement on the line above to certify this statement. The signature using an "/s/ signature" (e.g., /s/ John Smith) \\ \text{for mathematical statement on the line above to certify this statement. The signature using an "/s/ signature" (e.g., /s/ John Smith) \\ \text{for mathematical statement on the line above to certify this statement. The signature using an "/s/ signature" (e.g., /s/ John Smith) \\ \text{for mathematical statement on the line above to certify this statement. The signature using an "/s/ signature" (e.g., /s/ John Smith) \\ \text{for mathematical statement on the li$	
		Typed or printed name: Rachel Meyer	
		Director of Programming       (Title of official position held in corporation or partnership)       Feburary 19, 2024	
		Date:	

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

Set NAK DF OWNER OF CABLE SYSTEM: S dedictioned Communications SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The statelite from Viewer Act of 1998 anneadod Tile 17, sector 111(q(1)(1)(A), the Copyright Act by adding the following sectores: and mounts collected from subscribers receiving secondary transmissions pursuant to section 113. For more information on when to exclude these amounts, see the note on page (vii) of the general instructions counting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier (s) below. No No No VES. Enter the total here and list the satellite carrier(s) below. Nore Name Mark Mathematication of interest assessment, see page (viii) of the general instructions counting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite dish owners? No VES. Enter the total here and list the satellite carrier(s) below. Set Name Mark Mathematication of interest assessment, see page (viii) of the general instructions located in the pager SA1-2 form. Name Mark Mathematication of interest assessment, see page (viii) of the general instructions located in the pager SA1-2 form. Line 1 Enter the amount of late payment or underpayment. For an explanation of interest rate* and enter the sum here x dualys Line 3 Multiply line 1 by the interest rate* and enter the sum here x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter the sum here satessment for one day late. Nore Nore Nore is the decimal equivalent of 13650, which is the interest assessment for one day late. Nore is the lecensing Division at (202) 707-8150 or locansing/Bloc. gov. * Jo view the linerest rate and enter the sam here assessment for one day late. Nore is the decimal equivalent of 13650, which is the int		FORM S
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS         The Satellite Home Viewer Act of 1986 amended Title 17, section 111(g)(1)(A), of the Copyright Act by adding the following sector of providing secondary transmissions of primary toradcast transmisters, 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 pager 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 lids nowners?         No         TYES. Enter the total here and list the satellite carrier(s) below.         Name         Maling Address         Nume to explate the satellite carrier(s) below.         INTEREST ASSESSMENT         Yes must complete this worksheel for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest rate* and enter the sum here         Interest As         Line 1       Enter the amount of late payment or underpayment.         Interest As         Line 3       Multiply line 3 by 0.00274** and enter the sum here         in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6       \$         * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.rate.rate.for further assistance please contact the Licensing Division at (2	SYSTEM	
The Satellite Home Viewer Act of 1988 amended Tile 17, section 111(g)(1)(A), of the Copyright Act by adding the following sectnors:       Special Statellite Home Viewer Act of 1988 amended Tile 17, section 111(g)(1)(A), of the Copyright Act by adding the following sectnors:       Special Statellite Act by adding the total number of subscribers and the gross amounts paid to the cable system for the basic services of providing secondary transmissions pursuant to section 118. <sup>1</sup> . <sup>1</sup> Special State additional to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.       Special State additional to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.       Special State additional transmissions pursuant to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.       Special State additional transmissions and provide the set additional transmissions pursuants and anounts of sources set additional transmissions pursuants and address       Special State additional transmissions pursuants and secondary transmissions pursuants and address       Name         Maring Address       <	299	
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.         Line 1       Enter the amount of late payment or underpayment.         Interest As         x	<ul> <li>Statemen ing Gros</li> </ul>	Concer
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.         Line 1       Enter the amount of late payment or underpayment .       Image: SA1-2 form.         Line 2       Multiply line 1 by the interest rate* and enter the sum here .       -         x		
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Line 3 Multiply line 2 by the number of days late and enter the sum here	ssessme	Interest
<ul> <li>in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6</li></ul>		_
<ul> <li>* 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.</li> <li>** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.</li> <li>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.</li> </ul>		
list below the owner, address, first community served, ID number, and accounting period as given in the original filing.		
Owner		
Address		
Address		
ID number		
First community served		

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