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.

SA3 Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are at the end of this form [pages i-viii].

FOR COPYRIGHT OFFICE USE ONLY					
DATE RECEIVED	AMOUNT				
2-29-24	\$ ALLOCATION NUMBER				

Return to: Library of Congress Copyright Office

Licensing Division 101 Independence Ave. SE Washington, DC 20557-6400 (202) 707-8150

For courier deliveries, see page ii of the general instructions

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period		July 1- December 31, 2023								
B Owner	Instructions: Your file has been established under the information given below. If there are any changes, draw a line through the incorrect information and print or type the correct information beside it. 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. 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. 032909									
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM NORTHLAND CABLE TELEVISION, INC (GREENWOOD)									
	032909 2023/2									
					032909 2023/2					
		4 International Dr Suite 330 Rye Brook, NY 10573								
С		TRUCTIONS: In line 1, give any business or trade names used to idnes already appear in space B. In line 2, give the mailing address of								
System	1	IDENTIFICATION OF CABLE SYSTEM: NORTHLAND CABLE TELEVISION	<u> </u>							
	MAILING ADDRESS OF CABLE SYSTEM: 235 NORTH CREEK BLVD 2 (Number, street, rural route, apartment, or suite number) GREENWOOD, SC 29649 (City, town, state, zip code)									
D	Inst	tructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below ar	nd relist on page 1b					
Area Served	with	all communities. CITY OR TOWN	STATE							
First										
Community	В	elow is a sample for reporting communities if you report multiple cha		i	CLID CDD#					
0	Alda	CITY OR TOWN (SAMPLE)	STATE MD	CH LINE UP A	SUB GRP#					
Sample	Allia	ance	MD	В	2					
	Ger	ing	MD	В	3					

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

Form SA3c Rev: 04/2011

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name
NORTHLAND CABLE TELEVISION, INC (GREENWOOD)			032909	Name
Instructions: List each separate community served by the cable system. A "comin FCC rules: "a separate and distinct community or municipal entity (including unareas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). of system identification hereafter known as the "first community." Please use it as	nincorporated communiti The frst community that	es within unincorpo you list will serve a	orated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobbelow the identified city or town.	ile home parks should b	e reported in parer	ntheses	
If all communities receive the same complement of television broadcast stations all communities with the channel line-up "A" in the appropriate column below or lead to a partially distant or partially permitted basis in the DSE Schedule, associated designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-channel line-up designated by an alpha-letter(s) (based on your Space G reporting (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns.	eave the column blank. It each relevant community community basis, associng) and a subscriber group	f you report any sta with a subscriber ate each communi	ations group, ty with a	
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
GREENWOOD COUNTY	SC	Α		First
ABBEVILLE COUNTY (UNINC)	SC	Α		Community
CITY OF GREENWOOD	SC	Α		
GREENWOOD COUNTY (UNINC)	SC	Α		
HODGES	SC	Α		
LAURENS COUNTY	SC	Α		
LAURENS COUNTY (UNINC)	SC	Α		
NINETY SIX	SC	Α		
TOWN OF WARE SHOALS	SC	Α		
WARE SHOALS	SC	Α		
Edgefield	SC	Α		
Saluda	SC	Α		
		-		
		-		

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 032909

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

NORTHLAND CABLE TELEVISION, INC

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

(GREENWOOD)

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BL	OCK 1	BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:	CODOCHIDENC		10112	OMEGON OF SERVICE	COBCONIBLING	TOTTE
Service to first set	2,629	\$	35.00			
Service to additional set(s)						
FM radio (if separate rate)						
Motel, hotel		l				
Commercial	32	\$	39.99			
Converter		l				
Residential		<u> </u>				
Non-residential						
ſ		1			1	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

	DI 0014 0					
	BLOCK 2					
CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:			Installation: Non-residential			
Pay cable	\$	25.50	Motel, hotel			
 Pay cable—add'l channel 	\$	16.00	Commercial			
 Fire protection 			Pay cable			
Burglar protection			Pay cable-add'l channel			
Installation: Residential			Fire protection			
First set	\$	50.00	Burglar protection			
 Additional set(s) 	\$	20.00	Other services:			
 FM radio (if separate rate) 			Reconnect	\$ 75.00		
Converter			Disconnect	 		
			Outlet relocation	\$ 45.00		
			Move to new address	\$ 45.00		

FORM SA3. PAGE 3.						
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	TEM ID#					
NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	032909 Name					
PRIMARY TRANSMITTERS: TELEVISION						
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections	G					
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a	Primary					
substitute program basis, as explained in the next paragraph.						
Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute p						
basis under specifc FCC rules, regulations, or authorizations:						
• Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the						
station was carried only on a substitute basis.						
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other						
basis. For further information concerning substitute basis stations, see page (v) of the general instru	ctions.					
Column 1: List each station's call sign. Do not report origination program services such as HBO, ES	SPN, etc. Identify					
each multicast stream associated with a station according to its over-the-air designation. For example, report multi-						
cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example						
WETA-simulcast).						
Column 2: Give the channel number the FCC has assigned to the television station for broadcasting	g over-the-air in					
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel						

on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: 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.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AA								
1. CALL	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
WGGS	16	I	No		GREENVILLE, SC			
WHNS	21	I	No		GREENVILLE, SC			
WHNS COZI	21.1	I-M	No		GREENVILLE, SC			
WHNS ESC	21.3	I-M	No		GREENVILLE, SC			
WHNS HD	21	I-M	No		GREENVILLE, SC			
WHNS-Grit .5	21.5	I-M	No		GREENVILLE, SC			
WHNS-Bounce .4	21.4	I-M	No		GREENVILLE, SC			
WLOS	13	N	No		ASHEVILLE, NC			
WLOS HD	13	N-M	No		ASHEVILLE, NC			
WLOS - Antenna TV	13.3	I-M	No		ASHEVILLE, NC			
WLOS - Stadium	13.4	I-M	No		ASHEVILLE, NC			
WLOS-DT2 MNT	13.2	I-M	No		ASHEVILLE, NC			
WLOS-DT2 MNT HD	13.2	I-M	No		ASHEVILLE, NC			
WMYA	14	I	No		ANDERSON, SC			
WMYA HD	14.1	I-M	No		ANDERSON, SC			
WNEH-ETV World .3	26.3	E-M	No		GREENVILLE, SC			
WNEH-PBS	26	E	No		GREENVILLE, SC			
WNEH-PBS HD	26	E-M	No		GREENVILLE, SC			
WNEH-PBS Kids .4	26.1	E-M	No		GREENVILLE, SC			
WNEH-SCC .2	26.2	E-M	No		GREENVILLE, SC			
WSPA	7	N	No		SPARTANBURG, SC			

ACCOUNTING PERIOD: 2023/2 FORM SA3. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 032909 NORTHLAND CABLE TELEVISION, INC (GREENWOOD) PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. 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 (v) of the general instructions. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions. **Column 5:** If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions. Column 6: 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. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 3. TYPE 5. BASIS OF 1. CALL 2. B'CAST 4. DISTANT? 6. LOCATION OF STATION SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) **WSPA HD** 7 N-M SPARTANBURG, SC No **WYCW** 45 **ASHEVILLE, NC** ı No WYCW-CW HD **ASHEVILLE, NC** 0 I-M No WYCW-DT2 True 0 I-M No **ASHEVILLE, NC** WYFF 36 Ν No **GREENVILLE, SC WYFF HD** 36 N-M **GREENVILLE, SC** No **WYFF MOV GREENVILLE, SC** 4.2 I-M No WYFF MOV HD 4.2 I-M No **GREENVILLE, SC**

ACCOUNTING PERIOD: 2023/2 FORM SA3. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name NORTHLAND CABLE TELEVISION, INC (GREENWOOD) 032909 PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SA3. PAGE 5.							ACCOUNTING	PERIOD: 2023/2
LEGAL NAME OF OWNER OF CA NORTHLAND CABLE TE			GREENWOOD)			S'	YSTEM ID# 032909	Name
SUBSTITUTE CARRIAGE:	SPECIA	L STATEMEN	IT AND PROGRAM LOG	<u> </u>				
In General: In space I, identify substitute basis during the accomplanation of the programming	every non ounting pe	nnetwork televis riod, under spe	ion program broadcast by a cific present and former FC	distant statior C rules, regula	ations, or authori			Substitute
1. SPECIAL STATEMENT C				gonorarmone	dottorio.			Carriage:
During the accounting period broadcast by a distant statio	d, did you			s, any nonnet			⊠No	Special Statement and Program Log
Note: If your answer is "No", log in block 2.			e blank. If your answer is '	Yes," you mu	st complete the	program		r rogram Log
2. LOG OF SUBSTITUTE F In General: List each substitu clear. If you need more space Column 1: Give the title of period, was broadcast by a dis under certain FCC rules, regu Do not use general categories "NBA Basketball: 76ers vs. Bu Column 2: If the program v Column 3: Give the call sig Column 4: Give the broadc the case of Mexican or Canad Column 5: Give the month first. Example: for May 7 give Column 6: State the times to the nearest five minutes. Ex stated as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules and gram was substituted for prog	ate progra e, please a every nor stant stati llations, of s like "mov ulls." was broad gn of the s cast statio and day was "5/7." when the xample: a	m on a separa attach additional attach additional anetwork televion and that yo r authorizational vies" or "basked cast live, enterestation broadcaton's location (thins, if any, the ownen your systematical program carried isted program carried isted program ons in effect due to a distinct a separate and the separate is a separate and the separa	al pages. Ision program (substitute pur cable system substitute pur cable system substitute pur cable system substitute possess. See page (vi) of the gentball." List specific program "Yes." Otherwise enter "Nating the substitute program are community to which the community with which the stem carried the substitute purposes of the system from 6:01:10 was substituted for programing the accounting period	rogram) that, at for the progreral instruction titles, for example. The program is licential to the program. Use the program is licential to the program is station in the program is specification. The program is specification in the program is specification in the program is specification.	during the accoramming of anouns for further in ample, "I Love Love Love Love Love Love Love Love	counting bether station formation. Lucy" or C or, in the month accurately id be required ed pro		
effect on October 19, 1976.				П	EN SUBSTITU		7. REASON	
	BSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		5. MONTH	1AGE OCCUR 6. TIME		FOR DELETION	
1. THEE OF TROOKAW	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	ТО		
					_			
					_			

ACCOUNTING PERIOD: 2023/2 FORM SA3. PAGE 6.

Name	NORTHLAN		SYSTEM: LEVISION, INC	(GREENW	00)D)			SYS	032909
J Part-Time Carriage Log	PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.— 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.— 12:00 p.m."									
	CALL SIGN	WHEN	CARRIAGE OCC	URRED	OF F	CALL SIGN		N CARRIAGE C		ED
	5, 122 51011	DATE	HOU FROM	RS TO		J 31011	DATE	FROM	HOURS	ТО
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FORM:	SA3. PAGE 7.							
LEGA	L NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name			
NO	RTHLAND CABLE TELEVISION, INC (GREENWOOD)			032909	Name			
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (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. 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. (Amount of gross receipts)								
	1 1 33 1		(33 33					
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.	entered	d on line 1 o	f				
▶ If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block $\sf C$ should be enlow.	itered o	on line 2 in b	block				
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	d be er	ntered on lin	e				
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.		4 percent of	the				
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.		\$	610,308.00				
	This is your minimum fee.	\$		6,493.68				
	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ir space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.	n 4, you d?	ı must chec	k				
Block	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$					
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00				
	Line 3. Add lines 1 and 2 and enter here	\$		-				
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7		\$	6,493.68	Cable systems submitting			
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.							
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	Section 111(d)(7) should contact the Licensing Division for the			
	TOTAL ROYALTY FEE. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		6,493.68	appropriate form for submitting the			
Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See page (i) of the general instructions for more information.)								

ACCOUNTING PERIOD: 2023/2 FORM SA3. PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	SYSTEM ID# 032909
M Channels	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast st to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations. 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services.	29 215
N Individual to Be Contacted for Further Information	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom we can write or call about this statement of account.) Name Marie Censoplano Telephone	914-234-8313
	Address Four International Drive, Suite 330 (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 Office regulations as explained in the general instructions.) • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) [(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space E [(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable so in line 1 of space B and that the owner is not a corporation or partnership; or [(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B. • I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained 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)] Handwritten signature: //s/ Daniel J White	3; or system as identified ner of the cable system
	Typed or printed name: Daniel J. White	
	Title: SVP - Financial Planning (Title of official position held in corporation or partnership)	
	Date: 2/26/24	

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: SYSTEM ID#	Nome
NORTHLAND CABLE TELEVISION, INC (GREENWOOD) 032909	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 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. 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	Special Statement Concerning Gross Receipts Exclusion
Name Name	
Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
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 O. Multiply line 4 by the interest rate and enterthe growth and	-
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** enter here and on line 3, block 4, space L, (page 7)	
(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 fling this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, frst community served, accounting period, and ID number as given in the original filing.	
Owner	
Address	
First community served	
Accounting period	
ID number	

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INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical value given by the Copyright Act to each distant television station carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions.

FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3 (LONG FORM)

Step 1: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of account (page 3), a distant station is:

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs.	

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3 (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particular station's DSE for the accounting period.

TOTAL OF DSEs

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee and the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment.

The 3.75 Fee. If a cable system located in whole or in part within a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable systems fling SA3 (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable.

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
- A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station that it was authorized to carry or was lawfully carrying prior to March 31, 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate, but is subject to the Base Rate, and where applicable, the Syndicated Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or
 part-time basis only and complete the log to determine the portion of
 the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE—PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100
 major television market as defined by the FCC rules and regulations in
 effect on June 24, 1981. If no portion of the cable system is located in
 a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24, 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

DSE SCHEDULE, PAGE 11.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distant—that is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable.
 First DSE

Each of the second, third, and fourth DSEs 0.701% of gross receipts
The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
- 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule: or

If any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule.

4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

- 5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

The example below is intended to supplement the instructions for calculating only the base rate fee for partially distant stations. The cable system would also be subject to the Syndicated Exclusivity Surcharge for partially distant stations, if any portion is located within a major television market.

EXAMPLE:

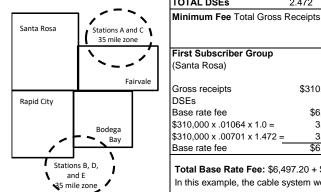
COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.

Distant Stations Carried	Distant Stations Carried Identification of Subscriber Groups				
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS	
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS	
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00	
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00	
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00	
E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00	
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00	

\$600,000.00

x .01064



		\$6,384.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 1 NORTHLAND CABLE TELEVISION, INC (GREENWOOD) 032909 Instructions: 2 In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-Computation of DSEs for mercial educational station, give the DSE as ".25." Category "O" CATEGORY "O" STATIONS: DSEs Stations **CALL SIGN** CALL SIGN **CALL SIGN** DSE DSF SUM OF DSEs OF CATEGORY "O" STATIONS: Add the DSEs of each station. 0.00 Enter the sum here and in line 1 of part 5 of this schedule.

Name		F OWNER OF CABLE SYS		GREENWOO	D)			S	032909
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 1: Column figure shoul Column Column be carried column give the typ Column	s: CAPACITY List the call sign of all 12: For each station, 13: For each station, 14: Divide the figure i 15: For each indepen 16: Multiply the figure 16: Multiply the station 16: Multiply the station 16: Multiply the station	give the numinformation of give the total not column 2 by decimal poin dent station, in column 4	ber of hours your cab given in space J. Cald number of hours that y the figure in column t. This is the "basis o give the "type-value"	le system carrie culate only one I the station brown 3, and give the f carriage value' as "1.0." For ea n 5, and give th	d the station during OSE for each station adcast over the air or result in decimals in for the station. It is network or nonconder or result in column 6	n. during the acco n column 4. Th ommercial edue s. Round to no	unting perions is figure much cational state ess than the	od. ust tion,
Capacity			CATEGOR	RY LAC STATIO	NS: COMPU	TATION OF DS	Es		
	1. CALL SIGN	-	HOURS RIED BY TEM	3. NUMBER OF HOURS STATION ON AIR	4. BASIS C CARRIA VALUE	GE \	TYPE /ALUE	6. DS	SE
			÷		=	x x		=	
			÷		=	x		=	
			+		=	x		=	
			÷		=				
			÷						
Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Lotange Was carried by your system in substitution for a program that your system tions in effect on October 19, 1976 (as shown by the letter "P" in column of DSEs for Substitute-Basis Stations Column 2: For each station give the number of live, nonnetwork program at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in Column 4: Divide the figure in column 2 by the figure in column 3, and gidecimal point. This is the station's DSE (For more information on rounding, stational point).						ermitted to delete unce I); and shown by the word d in substitution for rear. ssult in column 4. Re (viii) of the general	nder FCC rules "Yes" in column programs that ound to no less instructions.)	2 of were delete	ed
			UBSTITUT	E-BASIS STAT					1
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUME OF DA IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRA	O	UMBER F DAYS I YEAR	4. DSE
		-		=			÷		=
		÷		=			÷		=
		÷		=			÷		=
		÷		=			÷		=
	Add the DSE	Es OF SUBSTITUTEs of each station. sum here and in line 3					0.00		
5		BER OF DSEs: Give t		rom the boxes in parts	2, 3, and 4 of th	is schedule and add	I them to provid	e the total	
Total Number		er of DSEs from part 2					0.00	<u>)</u>	
of DSEs		er of DSEs from part 3	·			<u> </u>	0.00	_	
	3. Numb	er of DSEs from part 4				-	0.00	<u>)</u>	
	TOTAL NUM	BER OF DSEs					<u> </u>		0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/2

LEGAL NAME OF O			(GREEN	WOOD)			S	YSTEM ID# 032909	Name
Instructions: Block A: In block A: If your answer if "schedule. If your answer if "	'Yes," leave the re	mainder of pa	elow.	of the DSE schedu		complete part 8	3, (page 16) of the		6 Computation of
	- 1 1111-			TELEVISION MA		70 F -4 FO	0	tion of the	3.75 Fee
effect on June 24, X Yes—Com	1981?	schedule—D0 C below.	O NOT COMPI	er markets as defin	NDER OF PA	RT 6 AND 7.	C ruies and regula	tions in	
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	gulations prio e DSE Sched	r to June 25, 1 Iule. (Note: The	part 2, 3, and 4 of the 981. For further extended letter M below refuct of 2010.)	planation of p	ermitted station	ns, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherec instructions fo E Carried pursua *F A station pre	les and regulated pursuant to on as defined all educational station (76.6 r DSE scheduant to individuationally carried the station will be station will station will see the properties of the station will provide the provided the station will provide the provided the station will provide the provided the station will provided the	ations cited bell the FCC marking for the FCC marking for the FCC marking for the following for the form and for the form of fCC do not a part-time thin grade-B contact the form of fCC do not for the form of fCC do not for the form of fCC do not for fCC do not fCC do	e or substitute basi ontour, [76.59(d)(5)	e in effect on J .57, 76.59(b), (1), 76.63(a) r 3(a) referring t stitution of grad	June 24, 1981.) 76.61(b)(c), 76 referring to 76.0 o 76.61(d)] ndfathered state	6.63(a) referring to 61(e)(1)		
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
		<u></u>							
								0.00	
		Е	BLOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule					
Line 2: Enter the									
				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	and enter sui	m here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line :	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	and on line 2	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name NORTHLAND CABLE TELEVISION, INC (GREENWOOD) 032909 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Schedule for Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 2. PRIOR 3. ACCOUNTING 5. PRESENT 6. PERMITTED 1. CALL 4 BASIS OF PERIOD CARRIAGE DSE SIGN DSF DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? x No—Proceed to part 8 Yes—Complete blocks B and C . BLOCK B: Carriage of VHF/Grade B Contour Stations BLOCK C: Computation of Exempt DSEs Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

	ME OF OWNER OF CABLE SYSTEM: NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	SYSTEM ID# 032909	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	610,308.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is any	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	E	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7)		
	Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ <u>\$</u>		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE .	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

N	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	STEM ID#
Name	ı	NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	032909
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.	
8 Computation of Base Rate Fee	You me 6 was In blo If you If you blank What i	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. uck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers cated within that station's local service area and others were located outside that area. For the definition of a station's "local earea," see page (v) of the general instructions.	
		DLOCK ALOADDIAGE OF DADTIALLY DIGTANT CTATIONS	
	• Did v	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	Г	Yes—Complete part 9 of this schedule.	
	L	165—Complete part 9 of this schedule.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ \$ 610,308.00	_
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	<u>)</u>
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1).	-
			-

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2023/2

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Mana
NORT	HLAND CABLE TELEVISION, INC (GREENWOOD)	032909	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	in the figure in section 2 is more than 4.000, compute your base rate fee fiere and leave section 5 blank.		8
	A. Enter 0.01064 of gross receipts		0
	(the amount in section 1)	_	
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) \$		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here \$	_	Dase Nate i ee
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here >		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)		
	Base Rate Fee	0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels.		•
Space			9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take a clusion, you must:	dvantage of	of Base Rate Fee
Eirot: [Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant t	o the same	and
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine		Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for	each group.	Exclusivity Surcharge
•	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
must a	If any portion of your cable system is located within the top 100 television market and the station is not exempt in so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A aner, if your cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
•	For each community served, determine the local service area of each wholly distant and each partially distant sta to that community.	tion you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lot the station's local service area. A subscriber located outside the local service area of a station is distant to that street token, the station is distant to the subscriber.)		
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant.		
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.	at a cable	
	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system groups.	tem's	
	section:		
• Identi	fy the communities/areas represented by each subscriber group.		
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to a bers in the group.	l of the	
• If:			
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it if this schedule; or,	n parts 2, 3,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in l 6 of this schedule.	olock B,	
• Add tl	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general	nstructions.	
• Comp	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the	preceding	
DSEs f	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not necesticulations on the form.	·	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 032909 NORTHLAND CABLE TELEVISION, INC (GREENWOOD) Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNER OF CABLE SYSTEM: NORTHLAND CABLE TELEVISION, INC (GREENWOOD) 032909								Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP									
COMMUNITY/ AREA			0	COMMUNITY/ AREA	MMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and	
								Syndicated	
					<u>.</u>			Exclusivity	
								Surcharge	
								for Partially	
					-			Distant	
								Stations	
	ļ				.				
	ļ				_				
Total DSEs	1		0.00	Total DSEs			0.00		
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00		
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00		
	THIRD	SUBSCRIBER GROU	Р		FOURTH	SUBSCRIBER GROU	IP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	ļ								
	 				-		<u> </u>		
	†		·····		<u> </u>				
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Gr	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00		
Base Rate Fee Third Gr	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00		
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes abo	ove.	\$	0.00		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIRST SUBSCRIBER GROUP COMMUNITY; AREA O C	Nome	032909			OOD)	REENWO			NORTHLAND CAB
COMMUNITY/ AREA			BER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION O	LOCK A:	B
CALL SIGN DSE CA		UP	SUBSCRIBER GROU	SECOND		JP	SUBSCRIBER GROU	FIRST	
	9 Computatio	0			COMMUNITY/ AREA	0	ITY/ AREA 0		
	of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Gross Receipts First Group Base Rate Fee First Group THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group Base Rate Fee Second Group FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O	Base Rate Fe								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O	and								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O	Syndicated								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O	Exclusivity								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O	Surcharge								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O	for						<u> </u>		
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA	Partially								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA	Distant								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA	Stations		<u> </u>						
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA									
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O							-	 	
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA				+		.			
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O				<u> </u>			1		
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O	"								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O		0.00			Total DSEs	0.00	••		Total DSEs
Base Rate Fee First Group \$ 0.00 THIRD SUBSCRIBER GROUP COMMUNITY/ AREA D COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA O COMMUNITY/ AREA			•	d Cas			•		
THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	_	0.00	\$	a Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0		0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	╡					•			
	+		SUBSCRIBER GROU	FOURTH			SUBSCRIBER GROU	THIRD	00144445
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIG		0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
		DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
			<u> </u>						
		<u></u>	<u> </u>						
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	+		Ш			•			
Total DSEs	,				Total DSEs				Total DSEs
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00		0.00	\$	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00		0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G
	+								
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.		PDATE FORMULA	UP	ove.	s shown in the hoxes ah	iber aroun a	te fees for each subser	base rate	Base Rate Fee: Add the
Enter here and in block 3, line 1, space L (page 7) \$ 0.00		0.00	\$		o onomi in the boxes ab	o. group a			

		SYSTEM ID#
Name	NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	032909
	BLOCK B: COMPLITATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and to Syndicated Exclusivity Surcharge. Indicate which major television market by section 76.5 of FCC rules in effect on June 24, 1981:	he station is not exempt in Part 7, you must also compute a
Computation of	First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and	Step 1: In line 1, give the total DSEs by subscriber group for comme	rcial VHF Grade B contour stations listed in block A, part 9 of
Syndicated Exclusivity Surcharge for	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group of Exempt DSEs in block C, part 7 of this schedule. If none ente Step 3: In line 3, subtract line 2 from line 1. This is the total number of	r zero.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the	
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Second Group \$ FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Third Group \$	Line 2: Enter the Exempt DSEs. Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for e in the boxes above. Enter here and in block 4, line 2 of space L (page	ach subscriber group as shown

RM SA3. FILING FEE ADDENDUM				
EGAL NAME OF OWNER OF CABLE SYSTEM:		S	STEM ID#	Name
Northland Cable Television, Inc			32909	Name
	I a			
CITY OR TOWN	STATE			First
Greenwood	SC			Community
	1			
Line 1. ROYALTY FEE FROM SPACE L				
		\$ 6	,493.68	
				Total
Line 2. FILING FEE			725.00	Fee
Line 3. TOTAL ROYALTY AND FILING FEES PAYABLE	FOR ACCOUNTING PERIOD			
Add lines 1 and 2 and enter here		\$ 7	,218.68	
Effective January 1, 2014, pursuant to the Satellite Telev				
authority to the Copyright Office to establish fees for the t				
122 statutory licenses, the Office now assesses filing fee details, see the Federal Register, November 29, 2013 (78	es for ALL SUAs for current, past ar	na ruture accounting periods	S. FOr hefore	
the royalty payment is credited; thus the omission of the				
Please remit the royalty fee and filing fee in one EFT paymen				
	J 6 J 7 , ~ ~ J	: '7'		