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

Return completed workbook

STATEME	ENT	OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	by email to:
		ansmissions by	DATE RECEIVED	AMOUNT	-
Cable System General instruct in the first table	ctions	are located	02/19/2019	\$ ALLOCATION NUMBER	coplicsoa@loc.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACC	OUNTING PERIOD COVERED E	BY THIS STATEMENT: (YY) Period 1 = January 1 - June 30	YY/(Period)) Period 2 = July 1 - December 31	
Accounting Period			Barcode Data Filing Period (optional -	see instructions)	
		Instructions:			
В		Give the full legal name of the owner of the of the subsidiary, not that of the parent co		iary of another corporation, give the full cor	porate title
Owner		List any other name or names under which	the owner conducts the business of the	e cable system.	
		If there were different owners during the a single statement of account and royalty fee		e last day of the accounting period should s ng period.	ubmit a
		Check here if this is the system's first filing	If not, enter the system's ID number as	ssigned by the Licensing Division.	29875
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
		Zito NCTNWVPAOH LLC			
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)		
		Zito Media			
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
		PO Box 665			
		(Number, street, rural route, apartment, or suite nu Coudersport, PA 16915 (City, town, state, zip)	mber)		
	INST	RUCTIONS: In line 1, give any busine	ess or trade names used to ident	ifv the husiness and operation of the	system unless these
С		s already appear in space B. In line 2			
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		Zito Media - Sneedville			
		MAILING ADDRESS OF CABLE SYSTEM:			
	2	(Number, street, rural route, apartment, or suite nu	mber)		

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.

(City, town, state, zip code)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Zito NCTNWVPAOH LLC	29875
D	"a separate and distinct community or municipal entity (including uninco discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first communit as the "first community." Please use it as the first community on all futu	
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, identified city.	, or mobile home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	Sneedville	TN
Community		
dd Rows as Necessary		

								FORM SA1	-2E. PAGE
Name								515	2987
	Zito NCTNWVPAOH LL								
Е	SECONDARY TRANSMISSION								
	In General: The information in s	•		-		•			
Secondary	system, that is, the retransmission about other services (including provide the services)								
Transmission	last day of the accounting period	, , ,	,		,			g on the	
Service: Sub-	Number of Subscribers: Bot	•					,	,	
scribers and Rates	down by categories of secondar each category by counting the n					•			
Rates	separately for the particular serv			•••		•		scharged	
	Rate: Give the standard rate of	-	-	•				-	
	unit in which it is generally billed category, but do not include disc	• •	,		ny standa	rd rate variatior	is within a	particular rate	
	Block 1: In the left-hand block				ries of sec	ondary transmi	ssion servi	ce that cable	
	systems most commonly provide			-					
	that applies to your system. Not			0		0			
	categories, that person or entity subscriber who pays extra for ca								
	first set" and would be counted of						idel Selvi		
	Block 2: If your cable system	has rate catego	ories for	secondary tra	nsmission				
	printed in block 1 (for example, t					,		, 0	
	with the number of subscribers a sufficient.	and rates, in the	e right-h	and block. A ti	vo- or thre	e-wora aescrip	tion of the s	service is	
		DCK 1					BLOCK	(2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:	000001110			0,111			0000011102110	
	 Service to first set 		119	17.95					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC		NSMIS		s				
F	In General: Space F calls for ra					ll your cable sy	stem's serv	vices that were	
F	not covered in space E, that is, t								
	service for a single fee. There a	re two exceptio		do not need to	aive rate) services	
Services	furnished at cost or (2) services	or facilities fur	hished to		•			both the	
Services Other Than	furnished at cost or (2) services amount of the charge and the ur			nonsubscribe	ers. Rate in	nformation shou	Ild include		
Other Than Secondary	amount of the charge and the un enter only the letters "PP" in the	nit in which it is rate column.	usually	nonsubscribe billed. If any ra	ers. Rate in ates are ch	nformation shou narged on a var	ild include iable per-p		
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra	nit in which it is rate column. te charged by t	usually he cable	o nonsubscribe billed. If any ra e system for ea	ers. Rate in ates are ch ach of the	nformation shou narged on a var applicable servi	ild include iable per-p ces listed.	rogram basis,	
Other Than Secondary	amount of the charge and the un enter only the letters "PP" in the	nit in which it is rate column. te charged by t t your cable sys	usually he cable stem furr	o nonsubscribe billed. If any ra system for ea hished or offer	ers. Rate in ates are ch ach of the ed during	nformation shoun arged on a var applicable servit the accounting	Id include iable per-p ces listed. period that	rogram basis, were not	
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha	nit in which it is rate column. te charged by t t your cable sys separate charg	usually he cable stem fun je was n	o nonsubscribe billed. If any ra e system for ea hished or offer hade or establi	ers. Rate in ates are ch ach of the ed during	nformation shoun arged on a var applicable servit the accounting	Id include iable per-p ces listed. period that	rogram basis, were not	
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a	nit in which it is rate column. te charged by t t your cable sys separate charg	usually he cable stem furn je was n de the ra	o nonsubscribe billed. If any ra e system for ea hished or offer hade or establi	ers. Rate in ates are ch ach of the ed during	nformation shoun arged on a var applicable servit the accounting	Id include iable per-p ces listed. period that	rogram basis, were not	
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	hit in which it is rate column. te charged by t t your cable system separate charge btion and includ BLO(RATE	usually he cable stem furn ge was n de the ra CK 1 CATEG	o nonsubscribe billed. If any ra e system for ea nished or offer nade or establi te for each. ORY OF SER	ers. Rate in ates are ch ach of the ed during shed. List VICE	nformation shoun arged on a var applicable servit the accounting	Id include iable per-p ces listed. period that vices in the	rogram basis, : were not e form of a	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services :	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLOO RATE	usually he cable stem fun ge was n de the ra CK 1 CATEG Installa	o nonsubscribe billed. If any ra o system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res	ers. Rate in ates are ch ach of the ed during shed. List VICE	nformation shou narged on a var applicable servi the accounting these other ser	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	hit in which it is rate column. te charged by t t your cable system separate charge btion and includ BLO(RATE	usually he cable stem furn ge was n de the ra CK 1 CATEG Installa • Mote	o nonsubscribe billed. If any ra o system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel	ers. Rate in ates are ch ach of the ed during shed. List VICE	nformation shou narged on a var applicable servi the accounting these other ser	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLOO RATE	usually he cable stem furn e was n de the ra CK 1 CATEG Installa • Mote • Con	o nonsubscribe billed. If any ra o system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel nmercial	ers. Rate in ates are ch ach of the ed during shed. List VICE	nformation shou narged on a var applicable servi the accounting these other ser	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLOO RATE	usually he cable stem furn ge was n de the ra CK 1 CATEG Installa • Mote • Con • Pay	o nonsubscribe billed. If any ra e system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel nmercial cable	ers. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	nformation shou narged on a var applicable servi the accounting these other ser	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLOO RATE	usually he cable stem fun ge was n de the ra <u>CK 1</u> <u>CATEG</u> Installa • Mot • Con • Pay • Pay	o nonsubscribe billed. If any ra e system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch	ers. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	nformation shou narged on a var applicable servi the accounting these other ser	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLO(RATE 17.50	usually he cable stem fun ge was n de the ra <u>CK 1</u> <u>CATEG</u> Installa • Mot • Con • Pay • Pay • Fire	e nonsubscribe billed. If any ra e system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch protection	ers. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	nformation shou narged on a var applicable servi the accounting these other ser	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLOO RATE	usually he cable stem furn ge was n de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	e nonsubscribe billed. If any ra e system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection	ers. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	nformation shou narged on a var applicable servi the accounting these other ser	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLO(RATE 17.50	usually he cable stem furn ge was n de the ra CK 1 CATEG Installa • Mote • Con • Pay • Pay • Fire • Burg Other s	e nonsubscribe billed. If any ra e system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch protection	ers. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	nformation shou harged on a var applicable servi the accounting these other servi RATE	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLO(RATE 17.50	usually he cable stem furn ge was n de the ra CK 1 CATEG Installa • Mote • Con • Pay • Pay • Fire • Burg Other s • Rec	e nonsubscribe billed. If any ra e system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection ervices:	ers. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	nformation shou narged on a var applicable servi the accounting these other ser	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	hit in which it is rate column. te charged by t t your cable sys separate charg btion and includ BLO(RATE 17.50	usually he cable stem fun ge was n de the ra <u>CK 1</u> <u>CATEG</u> Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec • Disc	e nonsubscribe billed. If any ra e system for ea nished or offer nade or establi te for each. ORY OF SER tion: Non-res el, hotel mercial cable-add'l ch protection glar protection ervices: onnect	ers. Rate in ates are ch ach of the ed during shed. List <u>VICE</u> idential	nformation shou harged on a var applicable servi the accounting these other servi RATE	Id include iable per-p ces listed. period that vices in the	rogram basis, were not e form of a BLOCK 2	RAT

Accounting Period:	2018/2			FORM SA1-2E. PAGE 3
Name	LEGAL NAME OF OWNER OF			SYSTEM ID#
	Zito NCTNWVPAOH L			29875
G Primary Transmitters: Television	carried by your cable syster FCC rules and regulations i 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 statior multicast stream associated "WETA-2" as the same on t Column 2: Give the channel of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location	entify every television station (including m during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting i e)(2) and (4), or 76.63 (referring to 76. s explained in the next paragraph. : With respect to any distant stations of eles, regulations, or authorizations: e in space G—but do list it in space I (a substitute basis. also in space I, if the station was carried in concerning substitute basis stations is call sign. <i>Do not</i> report origination with a station according to its over-the he form. el number the FCC assigned to the tel RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instrin of each station. For U.S. stations, list	g translator stations and low power tele of (1) stations carried only on a part-tir the carriage of certain network program 61(e)(2) and (4))]; and (2) certain static carried by your cable system on a subs the Special Statement and Program Le ed both on a substitute basis and also is, see page (v) of the general instruction program services such as HBO, ESPP le-air designation. For example, repor evision station for broadcasting over th is station, an independent station, or a n (for network multicast), "I" (for independent or "E-M" (for noncommercial education uctions in the paper SA1-2 form. the community to which the station is the community with which the station is	me basis under ms [sections ons carried on a stitute program og)—if the on some other ons. N, etc. Identify each t multistream he air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WEMT	39	N	Greenville TN
	WATE	6	N	Knoxville TN
Add Davies on Management	WKNX	7		Knoxville TN
Add Rows as Necessary	WVLT	8.1	N	Knoxville TN
	WVLT	8.2		Knoxville TN
	WETP	15.1	E	
	WLFG	68		Grundy VA
	WCYB	5.1	N	Bristol VA
		J.		

EGAL NAME OF								SYSTEM 29
	every radio s	tation ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of a for detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether t the radio stati this by placing vive the station	/ the sys be receint the Consign of the sign of the static ion's sign g a check of sign of the static	I-Band FM Carriage: Under C tem whenever it is received at wed at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically processor k mark in the "S/D" column. on (the community to which th the community with which the	t the system's he system's FM ante his point, see par ed by the cable s e station is licens	adend, and (2 enna, during c ge (v) of the g ystem as a se sed by the FC) it can ertain st eneral ii parate :	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	od: 2018/2						FORM	VI SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	Zito NCTNWVPAOH L	LC						29875
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LO	G			
I I	In General: In space I, ident	-	-			tion that you	r cable eve	tem carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN				0			
Special	During the accounting per	-			sis anv non	network telev	rision nroa	ram
Statement and		-		frouny, on a substitute ba	515, any 11611			
Program Log	broadcast by a distant sta	lion?					YES	× NO
	Note: If your answer is "No	", leave the	e rest of this pa	age blank. If your answer is	s "Yes," you ı	must comple	te the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs				s wherever p	ossible, if the	eir meaning	g is
	clear. If you need more spa			vision program ("substitute	program") t	hat during th		ina
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general categor	ries like "mo						
	"NBA Basketball: 76ers vs.							
				er "Yes." Otherwise enter '				
				asting the substitute progr the community to which th		censed by th	e ECC or	in
	the case of Mexican or Car						010001,	
	Column 5: Give the more	nth and day		stem carried the substitute			with the n	nonth
	first. Example: for May 7 gi							
				ogram was carried by you				ately
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example:	a program car	ried by a system from 6:01	1:15 p.m. to b	5:28:30 p.m.	snould be	
		er "R" if the	listed prograr	n was substituted for prog	ramming that	t your system	n was <i>requ</i>	iired
	to delete under FCC rules							
	was substituted for program		your system w	as permitted to delete und	ler FCC rules	s and regulat	ions in	-
	effect on October 19, 1976							
						N SUBSTIT		
	s	UBSTITUT	E PROGRAM	1		AGE OCCU		7. REASON FOR
		2. LIVE?	3. STATION'S		5. MONTH	6. TIN		DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	то	
						_		
						_		
							-	
						_		
						_		
						_		
						_		

Accounting Period:	2018/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	STEM ID#
	Zito NCTNWVPAOH LLC		29875
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ission service amount, see	3,402.39 ss receipts)
	COPYRIGHT ROYALTY FEE		
L Copyright Royalty Fee	Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$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.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for	this six-mon	
	accounting period is \$52.00 Line 1. Royalty fee for accounting period	¢	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	_Ψ	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		52.00
	1. Base amount under statutory formula \$ 263,800.00	,	
	2. Enter amount of gross receipts from space K		
	2. Enter amount of groce receipte non-optice receipte room optice room optic		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527)	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	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 Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!

Accounting Period	2018/2		FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF	OWNER OF CABLE SYSTEM: PAOH LLC	SYSTEM ID# 29875
M Channels	to its subscriber1. Enter the tota system carried2. Enter the tota	ou must give (1) the number of channels on which the cable system carried television broadcast s s, and (2) the cable system's total number of activated channels during the accounting period. number of channels on which the cable television broadcast stations	stations
		able system carried television broadcast stations ast services	88
N Individual to Be Contacted		BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom about this statement of account.)	
for Further Information	Name	Teri McMullen Te	elephone 814-260-0434
	Address 	PO Box 665 (Number, street, rural route, apartment, or suite number) Coudersport PA 16915 (City, town, state, zip) teri.mcmullen@zitomedia.com Fax (optional)	
O Certification	I, the undersign (Owned) (Agen in X (Office)	(This statement of account must be certified and signed in accordance with Copyright Office regi ed, hereby certify that (Check one, <i>but only one</i> , of the boxes.) In other than corporation or partnership) I am the owner of the cable system as identified in line 1 at of owner other than corporation or partnership) I am the duly authorized agent of the owner of the line 1 of space B and that the owner is not a corporation or partnership; or er or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identi line 1 of space B.	of space B; or the cable system as identified
		I the statement of account and hereby declare under penalty of law that all statements of fact contain e, and correct to the best of my knowledge, information, and belief, and are made in good faith. In 1001(1986)]	ned herein
		Enter an electronic signature on the line above to certify this statement Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	t.
		Typed or printed name: James Rigas	
		Title: President (Title of official position held in corporation or partnership)	
		Date: 02/26/2019	

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.

ounting Period: 2018/2	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
NCTNWVPAOH LLC	2987
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. 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? NO YES. Enter the total here and list the satellite carrier(s) below. 	P Special Statement Concerning Gross Receipts Exclusion
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	L Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	L Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	L Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	L Interest Assessmer
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