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

STATEMENT OF ACCOUNT	FOR COPYRIGH	HT OFFICE USE ONLY	Return completed workbool by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instructions are located in the first tab of this workbook	02/19/2020	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at Tel: (202) 707-8150

A	ACCO	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2019/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
В		Instructions: 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.	
Owner		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.	
		2 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	27701
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		Adams CATV, Inc.	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		19 North Main Street (Number, street, rural route, apartment, or suite number)	
		Carbondale, PA 18407 (City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unliss already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		Thompson System Adams CATV, Inc.	
		19 North Main Street	
	2	(Number, street, rural route, apartment, or suite number)	
		Carbondale, PA 18407 (City, town, state, zip code)	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name	Adams CATV, Inc.	277
	Instructions: List each separate community served by the cable system. A "community	
D	"a separate and distinct community or municipal entity (including unincorporated con discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis as the "first community." Please use it as the first community on all future filings.	mmunities within unincorporated areas and including single
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h identified city.	ome parks should be reported in parentheses below the
First	CITY OR TOWN Ararat Twsp	STATE PA
Community	Brooklyn Twsp	PA
Community	Gibson Twsp	PA
	Great Bend Boro	PA
d Rows as Necessary	Great Bend Boro	PA
	Hallstead Boro	PA
	Harford Twsp	PA
		PA
	Herrick Twsp	PA
	Hop Bottom	PA
	Jackson Twsp	PA
	Lanesboro Boro	PA
	Lathrop Twsp	PA
	New Milford Boro	PA
	New Milford Twsp	PA
	Oakland Boro	PA
	Oakland Twsp	PA
	Preston Twsp	PA
	Starrucca Boro	PA
	Susquehanna Boro	PA
	Thompson Boro	PA
	Thompson Twsp	PA

Name	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM						SYS	TEM I
Name	Adams CATV, Inc.							010	277(
		0551/05 011							
Ε	SECONDARY TRANSMISSION In General: The information in s		-	-	-	/ transmission s	ervice of t	ne cable	
	system, that is, the retransmission								
Secondary	about other services (including p						nose existi	ing on the	
Fransmission	last day of the accounting period							harling	
Service: Sub- scribers and	Number of Subscribers: Both down by categories of secondary								
Rates	each category by counting the n								
	separately for the particular serv	ice at the rate i	ndicate	d—not the num	ber of set	s receiving servi	ce).	Ū.	
	Rate: Give the standard rate c								
	unit in which it is generally billed category, but do not include disc				ny standar	d rate variations	s within a p	barticular rate	
	Block 1: In the left-hand block				ies of seco	ondarv transmis	sion servic	e that cable	
	systems most commonly provide	to their subscr	ibers. (Give the numbe	r of subsc	ribers and rate f	or each lis	ted category	
	that applies to your system. Note								
	categories, that person or entity								
	subscriber who pays extra for ca first set" and would be counted o					In the count une	der Servio		
	Block 2: If your cable system					service that are	different fi	om those	
	printed in block 1 (for example, t								
	with the number of subscribers a sufficient.	ind rates, in the	right-h	nand block. A tv	o- or three	e-word description	on of the s	ervice is	
		DCK 1					BLOC	< 2	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE	SUBSCRIBE	ERS	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RA
	Residential:		0.054						
	Service to first set	2	2,054	25.99					
	• Service to additional set(s)			-					
	• FM radio (if separate rate)			-					
	Motel, hotel Commercial		4	¢10 por oot					
	Converter		4	\$10 per set					
	Residential		2,054						
	Non-residential		2,004 4						
			+						
	SERVICES OTHER THAN SEC								
F	In General: Space F calls for rat	e (not subscrib	er) info	rmation with re	spect to al				<u> </u>
F	In General: Space F calls for rat not covered in space E, that is, t	e (not subscrib hose services t	er) info hat are	rmation with re not offered in c	spect to al combinatio	n with any seco	ndary tran	smission	
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				FORM SA1-2E. PAGE 3
ame	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID# 27701
	Adams CATV, Inc.			21101
G imary smitters: evision	In General: In space G, ide carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC rr • Do not list the station her station was carried only on • List the station here, and basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast) For the meaning of these to Column 4: Give the location	entify every television station (including m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations ca lles, regulations, or authorizations: e in space G—but do list it in space I (th a substitute basis. also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	(1) stations carried only on a part- ne carriage of certain network progra 1(e)(2) and (4))]; and (2) certain state arried by your cable system on a sume special Statement and Program d both on a substitute basis and als see page (v) of the general instruct program services such as HBO, ESI i-air designation. For example, repo- vision station for broadcasting over station, an independent station, or a for network multicast), "I" (for indep or "E-M" (for noncommercial education ctions in the paper SA1-2 form. the community to which the station	time basis under ams [sections tions carried on a bstitute program Log)—if the o on some other ions. PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WYOU	22	N	Scranton, PA
	WBRE	28	N	Wilkes-Barre, PA
Necessary	WNEP	16	N	Scranton, PA
2C3301 y				
	WNFP-Antenna	16.2	N-M	Scranton PA
	WNEP-Antenna	16.2 44	N-M F	Scranton, PA
	WVIA	44	N-M E	Scranton, PA
	WVIA WOLF	44 56		Scranton, PA Hazelton, PA
	WVIA WOLF WSWB	44 56 38		Scranton, PA Hazelton, PA Scranton, PA
	WVIA WOLF WSWB WQPX	44 56 38 64		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA
	WVIA WOLF WSWB WQPX WICZ	44 56 38 64 40		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ	44 56 38 64 40		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
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	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA
	WVIA WOLF WSWB WQPX WICZ WQMY	44 56 38 64 40 53		Scranton, PA Hazelton, PA Scranton, PA Scranton, PA Bignhamton, NY Williamsport, PA

Accounting P	eriod: 2019	/2					FORM	/I SA1-2E. PAGE 4
LEGAL NAME OF Adams CAT		CABLE SY	YSTEM:					SYSTEM ID
	,							2110
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
receivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If signal, indicate t Column 4: G	it is carried by monitoring, to prmation about m. lentify the call tate whether to the radio stat this by placing ive the station	y the sys be recein at the Co sign of a the static ion's sig g a checl n's locati	II-Band FM Carriage: Under C stem whenever it is received at ived at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. ion (the community to which the the community with which the	t the system's he system's FM ante his point, see pa ed by the cable s le station is licen:	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st jeneral i eparate	be expected, rated intervals. nstructions in the. and discrete	Primary Transmitters: Radio
		0/D				0/D		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
N/A								

Accounting Perio	od: 2019/2					FO	RM SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				SYSTEM ID#
Name	Adams CATV, Inc.						27701
					^		
1	SUBSTITUTE CARRIAGE						
•	In General: In space I, identi substitute basis during the a						
Substitute	explanation of the programm						
Carriage:	1. SPECIAL STATEMEN			TITUTE CARRIAGE			
Special Statement and	 During the accounting per 	iod, did you	r cable system	carry, on a substitute basi	s, any nonne	twork telev <u>ision</u> progra	m
Program Log	broadcast by a distant sta	tion?				YES	× NO
r rogram Log	Note: If your answer is "No'	' leave the	rest of this nac	e blank. If your answer is '	'Yes " vou mi	-	
	log in block 2.	, 10070 110	rest of this pag		res, you me	ior complete the progre	
	2. LOG OF SUBSTITUTE		MS				
	In General: List each subst	itute progra	im on a separa		wherever pos	sible, if their meaning i	s
	clear. If you need more spa					4	-
	period, was broadcast by a			ision program ("substitute p ur cable system substituted			
	under certain FCC rules, re						
	Do not use general categor		vies" or "baske	tball." List specific program	n titles, for exa	ample, "I Love Lucy" o	
	"NBA Basketball: 76ers vs.		lcast live ente	r "Yes." Otherwise enter "N	lo "		
				sting the substitute progra			
				ne community to which the			
	the case of Mexican or Can			community with which the s tem carried the substitute p			onth
	first. Example: for May 7 giv		when you sys		Jogram. Use	numerais, with the mo	1101
	Column 6: State the time	es when the		gram was carried by your o			ely
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carri	ed by a system from 6:01:1	15 p.m. to 6:2	8:30 p.m. should be	
		er "R" if the	listed program	was substituted for progra	mming that v	our svstem was <i>requir</i>	ed
	to delete under FCC rules a	and regulation	ons in effect du	iring the accounting period	; enter the let	ter "P" if the listed prog	
	was substituted for program effect on October 19, 1976.		our system wa	s permitted to delete unde	r FCC rules a	nd regulations in	
						N SUBSTITUTE	
	S		TE PROGRAM	1		AGE OCCURRED	7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION
	N/A					_	
						_	
						_	
							""
						<u> </u>	
						_	
						_	
1	1	1	1	1		I	

Accounting Period:	2019/2			FORM S	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Adams CATV, Inc.			Ş	8YSTEM ID# 27701
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file a all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explanat 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 in	system's s ion of how	secondary trans to compute this	mission servi s amount, see \$ 49	ice
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions located in the paper SA1-2 form for more) but less t	han \$527,600	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137	7,100 OR	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalt accounting period is \$52.00				1
	Line 1. Royalty fee for accounting period				0.00
		and and a			
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lin BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES			-	
	1. Base amount under statutory formula	``	263,800.00	,	
	2. Enter amount of gross receipts from space K		· ·		
	3. Subtract line 2 from line 1				
	- 4. Enter the amount of gross receipts from space K				
	5. Enter the amount from line 3				
	6. Subtract line 5 from line 4				
	7. Multiply line 6 by .005 (enter figure here)				
	8. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7	and 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	3,800 (but	less than \$527	,600)	
	1. Enter the amount of gross receipts from space K	\$	491,243.00		
	2. Base amount under statutory formula	\$	263,800.00		
	3. Subtract line 2 from line 1	\$	227,443.00		
	4. Multiply line 3 by .01		\$	2,274.43	
	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 .		\$	3,593.43
	FILING FEE AND TOTAL REMITTANCE DU	E			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	3,593.43	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	3,613.43
	Important: Your remittance must be in the form of an electronic payr See page i of the general instructions in the paper SA1		-		ghts!

Accounting Period:	2019/2		FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF Adams CAT	F OWNER OF CABLE SYSTEM: /, Inc.	SYSTEM ID# 27701
M Channels	to its subscribe 1. Enter the to system carrie 2. Enter the to on which the	You must give (1) the number of channels on which the cable system carried television broadcast stations ers, and (2) the cable system's total number of activated channels during the accounting period. tal number of channels on which the cable ed television broadcast stations	11 364
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom t about this statement of account.)	
for Further Information	Name	Wendy Hartman Telephone 570-2	282-6121
	Address	19 North Main Street (Number, street, rural route, apartment, or suite number) Carbondale, PA 18407	
	Email	(City, town, state, zip) wendy@echoes.net Fax (optional)	
O Certification	I, the undersig (Ow (Age X (Off I have examin are true, complete	N (This statement of account must be certified and signed in accordance with Copyright Office regulations) ined, hereby certify that (Check one, <i>but only one</i> , of the boxes.) ner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or ent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as in line 1 of space B and that the owner is not a corporation or partnership; or ficer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the in line 1 of space B. ed the statement of account and hereby declare under penalty of law that all statements of fact contained herein ete, and correct to the best of my knowledge, information, and belief, and are made in good faith. ction 1001(1986)]	
		X /s/Douglas V.R. Adams Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) Typed or printed name: Douglas V.R. Adams	
		Title: President (Title of official position held in corporation or partnership)	
		Date: 2/13/20	

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 the 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 telephoin 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 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 t 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 lave

	FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
ms CATV, Inc.	277
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions	P Special Stateme Concerning Gros Receipts Exclusi
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?	
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Name	
Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessm
Line 1 Enter the amount of late payment or underpayment	Interest Assessm
x	Interest Assessm
Line 1 Enter the amount of late payment or underpayment	Interest Assessm
x	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
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