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.

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
6/23/2020	\$					
	ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@copyright.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:										
Accounting Period	2019/2										
Period	Instructions:										
B Owner	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. X Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.										
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM										
	Nittany Media, Inc.										
				0040/0							
				2019/2							
	18 N. Juniata St, PO Box 111										
	Lewistown, PA 17044										
	·	idontifi, the busine	and anamation of the out	stare unless these							
С	INSTRUCTIONS: In line 1, give any business or trade names used to names already appear in space B. In line 2, give the mailing address of										
System	IDENTIFICATION OF CABLE SYSTEM:	<u> </u>	<u>_</u>	·							
	1										
	MAILING ADDRESS OF CABLE SYSTEM:										
	2 (Number, street, rural route, apartment, or suite number)										
	(City, town, state, zip code)										
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on page 1b							
Area	with all communities.										
Served	CITY OR TOWN	STATE									
First Community	Bratton Township (Mifflin County)	PA									
Community	Below is a sample for reporting communities if you report multiple ch			OLID ODD#							
	CITY OR TOWN (SAMPLE) Alda	STATE MD	CH LINE UP A	SUB GRP#							
Sample	Alliance	MD	В	2							
	Gering	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 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.

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Nittany Media, Inc. Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CH LINE UP SUB GRP# CITY OR TOWN STATE PA **Bratton Township (Mifflin County)** Α First **Brown Township (Mifflin County)** PA Community **Granville Township (Mifflin County)** PA McVeytown Borough (Mifflin County) PA Α Menno Township (Mifflin County) PA Α Oliver Township (Mifflin County) PA See instructions for Union Township (Mifflin County) PA additional information on alphabetization. Wayne Township (Mifflin County) PA Milford Township (Juniata County) PA Α 2 Fayette Township (Juniata County) 3 PA Α PA 3 Fermanagh Township (Juniata County) Α Add rows as necessary. Mifflin Borough (Juniata County) 3 PA Α 3 Mifflintown Borough (Juniata County) PA Α Walker Township (Juniata County) PA Α 3 Bloomfield Borough (Perry County) PA Α Center Township (Perry County) PA Α 4 **Delaware Township (Juniata County)** PA Α 4 Greenwood Township (Juniata County) PA 4 Α Monroe Township (Juniata County) PA Port Royal Borough (Juniata County) PA Α 4 PA Α Saville Township (Perry County) 4 Spring Township (Perry County) PA Α Thompsontown Borough (Juniata County) PA 4 **Turbett Township (Juniata County)** PA 4 PA Α **Tuscarora Township (Perry County)** 4 Susquehanna Township (Juniata County) PA Α 5 McClure Borough (Snyder County) В PA West Beaver Township (Snyder County) PA В Chapman Township (Snyder County) PA C 8 Perry Township (Snyder County) PA C 8 C Union Township (Snyder County) PA 8 Washington Township (Snyder County) C 8 PA West Perry Township (Snyder County) PA C 9 D 10 Buffalo Township (Perry County) PA Liverpool Borough (Perry County) D 10 PA PA D Liverpool Township (Perry County)

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nittany Media, Inc.

Е

Secondary **Transmission** Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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).

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			
	NO. OF					NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS		RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
 Service to first set 	2,480	\$	51.25				
 Service to additional set(s) 		Ī		lÏ			
 FM radio (if separate rate) 		Ī		lÏ			
Motel, hotel	354	\$	51.25				
Commercial				ľ			
Converter				lÏ			
Residential	580	\$	3.50				
 Non-residential 							
		T		ı l"			

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.

	BLO		BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	12.99-27.49	Motel, hotel			
 Pay cable—add'l channel 		Commercial			
 Fire protection 		• Pay cable			
 Burglar protection 		 Pay cable-add'l channel 			
Installation: Residential		Fire protection			
• First set	\$ 40.00	 Burglar protection 			
 Additional set(s) 		Other services:			
 FM radio (if separate rate) 		Reconnect	\$ 32.25		
Converter		Disconnect	\$ 25.00		
		 Outlet relocation 	\$ 20.00		
		 Move to new address 	\$ 32.25		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 ε **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 th∉ 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi 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 WFTA-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 channe 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 noncommercia 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 located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form 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 identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP A 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) Lancaster, PA WGAL 8.1 Ν No WGAL (Simulcas 8.1 Ν No Lancaster, PA See instructions for additional information WGAL-2 8.2 I-M No Lancaster, PA on alphabetization. WHP 21.1 Ν No Harrisburg, PA WHP-2 21.2 I-M No Harrisburg, PA WHP-3 21.3 I-M No Harrisburg, PA WHTM No 27.1 Ν Harrisburg, PA WHTM-2 27.2 I-M No Harrisburg, PA WHTM-3 27.3 I-M No Harrisburg, PA WHTM-4 27.4 I-M No Harrisburg, PA WHVL-LD 29.1 ı Yes 0 State College, PA WITF 33.1 Ε No Harrisburg, PA WITF-2 33.2 E-M No Harrisburg, PA WKBS-TV 47.1 ı Yes 0 Altoona, PA **WLYH** 49.1 No Red Lion PA I

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 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 program 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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 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 over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia 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 located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

	CHANN	EL LINE-UP	A (cont)		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WPMT	43.1	I	No		York, PA
WPMT (Simulcas	43.1	I	No		York, PA
WPMT-2	43.2	I-M	No		York, PA
WPSU	3.1	Е	Yes	0	Clearfield, PA
WVIA	44.1	Е	Yes	0	Scranton, PA
WVIA-3	44.3	E-M	Yes	0	Scranton, PA
WXBU	15.1	I	No		Lancaster, PA

Primary Transmitters: Television

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 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 program 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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 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 over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia 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 located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

		CHANN	EL LINE-UP	В	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	_	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WGAL	8.1	N	No		Lancaster, PA
WGAL (Simulcas	8.1	N	No		Lancaster, PA
WGAL-2	8.2	I-M	No		Lancaster, PA
WHP	21.1	N	No		Harrisburg, PA
WHP-2	21.2	I-M	No		Harrisburg, PA
WHP-3	21.3	I-M	No		Harrisburg, PA
WHTM	27.1	N	No		Harrisburg, PA
WHTM-2	27.2	I-M	No		Harrisburg, PA
WHTM-3	27.3	I-M	No		Harrisburg, PA
WHTM-4	27.4	I-M	No		Harrisburg, PA
WHVL-LD	29.1	I	Yes	0	State College, PA

Primary Transmitters: Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 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 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 program basis under specifc FCC rules, regulations, or authorizations:

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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 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 over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia 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 located in the paper SA3 form

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		CHANN	EL LINE-UP	B (cont)			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WITF	33.1	Е	No		Harrisburg, PA		
WITF-2	33.2	Е-М	No		Harrisburg, PA		
WKBS-TV	47.1	I	Yes	0	Altoona, PA		
WLYH	49.1	I	No		Red Lion PA		
WNEP	16.1	N	No		Scranton, PA		
WNEP-2	16.2	I-M	No		Scranton, PA		
WPMT	43.1	I	Yes	0	York, PA		
WPMT (Simulcast	43.1	I	Yes	E	York, PA		
WPMT-2	43.2	I-M	Yes	0	York, PA		
WPSU	3.1	Е	No		Clearfield, PA		
WVIA	44.1	E	Yes	0	Scranton, PA		
WVIA-3	44.3	E-M	Yes	0	Scranton, PA		
WXBU	15.1	I	Yes	0	Lancaster, PA		

G

Primary Transmitters: Television

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 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 € substitute program basis, as explained in the next paragraph

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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 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 over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia 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 located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

		CHANN	EL LINE-UP	С	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBRE	28.1	N	No		Wilkes Barre, PA
WBRE (Simulcast	28.1	N	No		Wilkes Barre, PA
WBRE-2	28.2	I-M	No		Wilkes Barre, PA
WBRE-3	28.3	I-M	No		Wilkes Barre, PA
WBRE-4	28.4	I-M	No		Wilkes Barre, PA
WHVL-LD	29.1	I	Yes	0	State College, PA
WITF	33.1	Е	No		Harrisburg, PA
WITF-2	33.2	E-M	No		Harrisburg, PA
WKBS-TV	47.1	I	Yes	0	Altoona, PA
WLYH	49.1	I	Yes	0	Red Lion PA
WNEP	16.1	N	No		Scranton, PA
WNEP-2	16.2	I-M	No		Scranton, PA
WOLF	56.1	I	No		Hazleton, PA
WOLF (Simulcast	56.1	I	No		Hazleton, PA

G

Primary Transmitters: Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 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 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 program 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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 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 over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia 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 located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

1. CALL SIGN				C (cont)	
	2. B'CAST CHANNEL NUMBER		4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WPSU	3.1	E	Yes	0	Clearfield, PA
WQMY	53.1	I	No		Williamsport, PA
WQPX	64.1	I	No		Scranton, PA
WSWB	38.1	I	No		Scranton, PA
WSWB-2	38.2	I-M	No		Scranton, PA
WSWB-3	38.3	I-M	No		Scranton, PA
WSWB-4	38.4	I-M	No	•	Scranton, PA
WVIA	44.1	Е	Yes	0	Scranton, PA
WVIA-2	44.2	E-M	Yes	0	Scranton, PA
WVIA-3	44.3	E-M	Yes	0	Scranton, PA
WYOU	22.1	N	No		Scranton, PA
WYOU-2	22.2	I-M	No		Scranton, PA
WYOU-3	22.3	I-M	No		Scranton, PA
WYOU-4	22.4	I-M	No		Scranton, PA

G

Primary Transmitters: Television

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 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 ε 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 program 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 th∉ 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi 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 WFTA-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 channe 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 noncommercia 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 located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

CHANNEL LINE-UP D 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) Lancaster, PA WGAL 8.1 Ν No WGAL (Simulcas 8.1 Ν No Lancaster, PA 8.2 I-M No WGAL-2 Lancaster, PA WGAL-2 (Simulca 8.2 I-M No Lancaster, PA Ν WHP 21.1 No Harrisburg, PA WHP (Simulcast) 21.1 Ν No Harrisburg, PA WHP-2 21.2 No I-M Harrisburg, PA WHP-2 (Simulcas 21.2 I-M No Harrisburg, PA Harrisburg, PA WHP-3 21.3 I-M No WHP-3 (Simulcas 21.3 I-M No Harrisburg, PA WHTM Harrisburg, PA 27.1 Ν No WHTM (Simulcas 27.1 Ν No Harrisburg, PA WHTM-2 27.2 I-M No Harrisburg, PA WHTM-2 (Simulca 27.2 I-M No Harrisburg, PA WHTM-3 27.3 I-M No Harrisburg, PA WHTM-4 27.4 I-M No Harrisburg, PA

G

Primary Transmitters: Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 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 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 program 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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 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 over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 noncommercia 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 located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

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

CHANNEL LINE-UP D (cont)									
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
WITF	33.1	E	No		Harrisburg, PA				
WITF (Simulcast)	33.1	E	No		Harrisburg, PA				
WITF-2	33.2	E-M	No		Harrisburg, PA				
WLYH	49.1	l	No		Red Lion PA				
WLYH (Simulcast	49.1	l	No		Red Lion PA				
WNEP	16.1	N	Yes	0	Scranton, PA				
WNEP-2	16.2	I-M	Yes	0	Scranton, PA				
WPMT	43.1	I	No		York, PA				
WPMT (Simulcast	43.1	I	No		York, PA				
WPMT-2	43.2	I-M	No		York, PA				
WVIA	44.1	Е	Yes	0	Scranton, PA				
WVIA-2	44.2	E-M	Yes	0	Scranton, PA				
WVIA-3	44.3	E-M	Yes	0	Scranton, PA				
WXBU	15.1	I	No		Lancaster, PA				

G

Primary Transmitters: Television

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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 located in the paper SA3 form. 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

TOTAL GAGE, TAGE 0.						ACCOUNTING	1 EMOD: 2015/2
Nittany Media, Inc.	CABLE SYST	TEM:			S	YSTEM ID#	Name
SUBSTITUTE CARRIAGE	: SPECIA	AI STATEME	NT AND PROGRAM I O	3			
In General: In space I, ident substitute basis during the ac explanation of the programm form.	ify every non	nnetwork televiseriod, under spe	sion program broadcast by ecific present and former F0	a distant statio CC rules, regu	lations, or authorizations.	For a further	Substitute
1. SPECIAL STATEMEN	CONCER	NING SUBSI	TITLITE CAPPIAGE				Carriage:
During the accounting per				sis anv nonn	etwork television program	n	Special
broadcast by a distant sta		,	, ,	···, -··· , ······		XNo	Statement and Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is	"Yes," you m			
log in block 2.							
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broatthe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please of every no distant state gulations, of tion. Do no Lucy" or "NE n was broad sign of the sadcast statice and and day we "5/7." es when the Example: a er "R" if the and regulation ogramming	am on a separa attach addition nnetwork televicion and that your authorization of use general of BA Basketball: deast live, entestation broadca on's location (thous, if any, the when your system substitute program carrolisted program carrons in effect di	al pages. rision program (substitute pour cable system substitute) such categories like "movies", or 76ers vs. Bulls." or "Yes." Otherwise enter "lasting the substitute programe community to which the community with which the stem carried the substitute by gram was carried by your lied by a system from 6:01 a was substituted for programing the accounting period	orogram) that ed for the pro neral instructi r "basketball" No." am. e station is lice station is ide program. Us cable system 15 p.m. to 6: amming that d; enter the le	t, during the accounting gramming of another stations located in the paper. List specific program ensed by the FCC or, in entified). e numerals, with the mon. List the times accurate 28:30 p.m. should be your system was require etter "P" if the listed pro	nth ely	
Check off October 13, 1370.	•			II ,,,,,,,	- N OUDOTITUTE	<u> </u>	
s	UBSTITUT	E PROGRAM	I		EN SUBSTITUTE HAGE OCCURRED	7. REASON FOR	
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	
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 6.

	LEGAL NAME OF	OWNER OF CABLI	E SYSTEM:							S	YSTEM ID#	
Name	Nittany Med	ia, Inc.										
	PART-TIME CA	ART-TIME CARRIAGE LOG General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-										
Part-Time Carriage Log	In General: Thi time carriage di hours your syst Column 1 (C column 5 of spa Column 2 (C curred during th Give the mont "4/10." State the start television statio "app." Example	is space ties in vie to lack of act em carried that call sign): Give ace G. Lates and hours accounting puth and day wher sing and ending in's broadcast d: "12:30 a.m.—3	ivated channel ca station. If you nee the call sign of ev s of carriage): For eriod. In the carriage occutimes of carriage ay, you may give	ipaced recovery	city, you are recommone space, plead distant station each station, list ed. Use numerathe nearest qual approximate en	the als, v	ed to complete the attach additional ose basis of carrodates and hours with the month fill hour. In any case hour, followed	nis log giving the al pages. iage you identifi s when part-time rst. Example: fo se where carriag by the abbrevia	e total dates and led by "LAC" in le carriage oc- or April 10 give le ran to the end tition		he	
			DATE	ES	AND HOURS (OF F	PART-TIME CAF	RRIAGE				
		DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED										
	CALL SIGN		HO		S		CALL SIGN		Н	OUR	RS	
		DATE	FROM		TO			DATE	FROM		ТО	
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	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Nitt	any Media, Inc.		
Inst all a (as i page	COSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's second dentifed in space E) during the accounting period. For a further explanation of how to coe (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	ndary transmission service	K Gross Receipts
	during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ 792,913.56 (Amount of gross receipts)	
• Com • Com • If you fee the lift you accompany to the lift you accompany the lift you acco	CRIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the amfrom block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable par ompanying this form and attach the schedule to your statement of account.	ts of the DSE Schedule	Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.	entered on line 1 of	
▶ If pa 3 be	art 6 of the DSE schedule was completed, the amount from line 7 of block ${\sf C}$ should be enclow.	ntered on line 2 in block	
	ort 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou block 4 below.	ld be entered on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.		
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 792,913.56	
	Enter the result here. This is your minimum fee.	\$ 8,436.60	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the 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 perio X Yes—Complete the DSE schedule. No—Leave block 3 below blank and one of the control of the color	n 4, you must check d?	
Block 3	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	\$ 10,690.55	
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	9,936.08	
	Line 3. Add lines 1 and 2 and enter here	\$ 20,626.63	
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	\$ 20,626.63	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)	\$ 66.69	additional deposits under Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 21,418.32	appropriate form for submitting the
	EFT Trace # or TRANSACTION ID # 20200622GMQFMP01020084		additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form and the Excel instructions ta		

ACCOUNTING PERIOD: 2019/2
FORM SA3E, PAGE 8.

						FURIVI SASE. PF	AGE 0.
Name	LEGAL NAME OF OWNER OF CA	BLE SYSTEM:				SYSTE	M ID#
M Channels	to its subscribers and (2) 1. Enter the total number	the cable system's t	otal number of activated	channels, durir		stations 51	
	Enter the total number on which the cable system	r of activated channe tem carried televisior	broadcast stations			187	
N Individual to	INDIVIDUAL TO BE CO we can contact about thi			NEEDED : (Iden	tify an individual		
Be Contacted for Further Information	Name Craig Yoh					717-363-6301	
	Lewistown	n, PA 17044	suite number)				
	(City, town, state	rohn@nmax.net			Fax (optional)		
0	CERTIFICATION (This sta	atement of account m	oust be certifed and signe	ed in accordanc	e with Copyright Office regu	ulations.)	
Certifcation	• I, the undersigned, hereb (Owner other than co		-	·	as identifed in line 1 of space	B; or	
			r partnership) I am the du		ent of the owner of the cable	system as identified	
	(Officer or partner) I in line 1 of space E		poration) or a partner (if a p	partnership) of th	ne legal entity identifed as ow	rner of the cable system	
	I have examined the state are true, complete, and complete, and complete. [18 U.S.C., Section 1001()]	errect to the best of my			all statements of fact containe are made in good faith.	d herein	
		X /s/Anna A H	Hain				
	(e.	g., /s/ John Smith). Be		ird slash of the /s	e to certify this statement. / signature, place your cursor in the signature of the signature of the signature. Signature		
	Ту	ped or printed name	: Anna A. Hain				
	Tit		sition held in corporation or p	partnership)			
	Da	ate: June 22, 2020					

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 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 telephon 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 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 lav

SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satisfilite frome Visious 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 subsociblers 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." Gross Receipts For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carriers (s) below. None	LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM ID#	Name
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 transmitisms, 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 in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellitic carriers to satellite dish owners? Name	Nittany Media, Inc.		Name
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 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? Name	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 s		Special Statement
Name Name	paper SA3 form.	s	Gross Receipts
Name 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 in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment Line 2 Multiply line 1 by the interest rate* and enter the sum here 206.27 X 118 days Line 3 Multiply line 2 by the number of days late and enter the sum here 24,339.42 x 0.00274 Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7). **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@copyright.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, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period	made by satellite carriers to satellite dish owners?		
Mailing Address Mailing Address Mailing Address	YES. Enter the total here and list the satellite carrier(s) below		
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 in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment			
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 in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment			
Assessment X	You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayme	nt.	Q
Line 2 Multiply line 1 by the interest rate* and enter the sum here			
Line 3 Multiply line 2 by the number of days late and enter the sum here			
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	Line 3 Multiply line 2 by the number of days late and enter the sum here	24,339.42	
(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@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period	Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. *** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period		rge)	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period		se	
please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period	** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
Address First community served Accounting period	please list below the owner, address, first community served, accounting period, and ID number as given in the origin	al	
Accounting period			
	First community served		

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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 in the paper SA3 form.

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 SA3E (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 SA3E, 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 SA3E (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 SA3E (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.
- 4) 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.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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 1.064% of gross receipts

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

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:

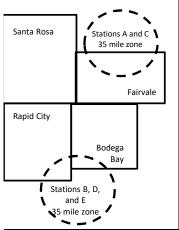
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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 Carr	ied	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)	0.25	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

Minimum Fee Total Gross Receipts \$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)

DSE SCHEDULE. PAG	E 11. (CONTINUED)										
1	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:			S	STEM ID#					
1	Nittany Media, Inc.										
	SUM OF DSEs OF CATEGOR	RY "O" STATION	IS:								
	Add the DSEs of each station										
	Enter the sum here and in line	1 of part 5 of this	s schedule.		8.25						
	Instructions:					1					
2	In the column headed "Call S	Sign": list the cal	l signs of all distant statio	ons identified by the	e letter "O" in column 5						
Computation	f space G (page 3). n 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, giv			OL as 1.0, 101 ea	cit lietwork of floricom-						
Category "O"	, 3		CATEGORY "O" STATION	ONS: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	WHVL-LD	1.000									
	WKBS-TV	1.000									
	WLYH	1.000									
	WNEP	0.250									
	WNEP-2	1.000									
Add rows as	WPMT	1.000									
necessary. Remember to copy	WPMT-2	1.000									
all formula into new	WPSU	0.250									
rows.	WVIA	0.250									
	WVIA-2	0.250									
	WVIA-3	0.250									
	WXBU	1.000									
	10)					
	111111111111111111111111111111111111111										
I		L				L					

I		lk	
I	k	I	

	LEGAL NAME OF O	OWNER OF CABLE SYSTE	EM:					SYSTEM ID#
Name	Nittany Medi	ia, Inc.						, 101 Lili 15#
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	st the call sign of all of the call sign of all of the carries of	ive the number of information given ive the total numb column 2 by the decimal point. Thi lent station, give the column 4 by the cion's DSE. (For many column 2 by the cion's DSE. (For many column 4 by the cion's DSE.)	in space J. Calculate of the standard of the s	em carried the standy one DSE for ation broadcast of give the result in age value" for the period of the cash of t	ation during the accounting each station. ver the air during the account decimals in column 4. The station. ork or noncommercial educin column 6. Round to no (viii) of the general instruction. TON OF DSEs 5. TYPE	unting period. is figure must cational station, less than the tions in the paper	SE
	SIGN	_	RRIED BY	STATION	VALUE	GE VALUE	-	
			STEM	ON AIR				
			÷		=	x	=	
			÷		=	X	=	
			÷		=	x	=	
			÷			X		
			÷				=	
			<u> </u>			X X		
			÷		=	X	=	
Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Giv Was carried tions in effeto space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each by your system in sect on October 19, 19 one or more live, nonrefer each station give This figure should content the number of Divide the figure in content the station in content the station of the station o	of part 5 of this so th station listed in ubstitution for a p 976 (as shown by network programs to the number of liv orrespond with the days in the calency olumn 2 by the fig	rogram that your syste the letter "P" in column during that optional car re, nonnetwork prograt e information in space dar year: 365, except i jure in column 3, and o	og of Substitute Fem was permitted n 7 of space I); arrriage (as shown been scarried in substitution in a leap year.	Programs) if that station: to delete under FCC rules and by the word "Yes" in column 2 stitution for programs that column 4. Round to no less the general instructions in	and regular- 2 of were deleted	rm).
			SUBSTITUTE	-BASIS STATIO	NS: COMPUT.	ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	=		÷		
			÷					=
			÷	=		÷		=
			÷	=		÷		=
			÷	=		÷		=
	Add the DSEs			S: chedule,		0.00		
5		ER OF DSEs: Give the sapplicable to your sy		e boxes in parts 2, 3, an	d 4 of this schedu	lle and add them to provide	the total	
Total Number	1. Number o	f DSEs from part 2 ●				>	8.25	
of DSEs		f DSEs from part 3 ●				•	0.00	
	3. Number o	f DSEs from part 4 ●				>	0.00	
	TOTAL NUMBE	R OF DSEs						8.25

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/2

ittany Media,	WNER OF CABLES	SYSTEM:					S	STEM ID#	Name
tructions: Bloc block A:	ck A must be comp	oleted.							•
your answer if ' nedule.	"Yes," leave the re	mainder of p	art 6 and part 7	of the DSE sched	ule blank and	complete part	8, (page 16) of the	e	6
	"No," complete blo	cks B and C	below.						
				TELEVISION MA					Computation 3.75 Fee
he cable syster ect on June 24,	•	utside of all r	major and small	er markets as defir	ned under sed	tion 76.5 of F	CC rules and regula	ations in	
_		schedule—[OO NOT COMP	LETE THE REMAI	NDER OF PA	RT 6 AND 7.			
X No—Comp	olete blocks B and	C below.							
		BLO	CK B: CARR	NAGE OF PERM	MITTED DS	Es			
Column 1:	List the call signs	of distant st	ations listed in	part 2, 3, and 4 of t	his schedule	that your syste	em was permitted to	o carry	
CALL SIGN	under FCC rules	and regulation	ons prior to Jun dule. (Note: Th	e 25, 1981. For fur e letter M below ret	ther explanati	on of permitte	d stations, see the	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru	les and regu	lations cited be	sis on which you ca low pertain to those ket quota rules [76	e in effect on	June 24, 1981	,		
	B Specialty static	al education	al station [76.59	6.59(d)(1), 76.61(e) 0(c), 76.61(d), 76.63	3(a) referring	to 76.61(d)]			
	D Grandfathered instructions fo	•	, ,	aph regarding subs	sutution of gra	indiathered sta	ations in the		
	E Carried pursua			CC rules (76.7) e or substitute basi	is prior to lue	e 25 1021			
	G Commercial U	HF station w	/ithin grade-B c	ontour, [76.59(d)(5	•		rring to 76.61(e)(5)]	
	M Retransmission	n of a distan	t multicast stre	am.					
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			orksheet on page 1	4 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	
WHVL-LD WKBS-TV	G B	1.00 1.00	WPMT WPMT-2	G M	1.00 1.00	WXBU	G	1.00	
WLYH	B G	1.00	WPSU	C	0.25				
WNEP	G	0.25	WVIA	С	0.25				
WNEP-2	М	1.00	WVIA-2	C/M	0.25				
			WVIA-3	C/M	0.25				
								0.05	
								8.25	
			BLOCK C: CC	MPUTATION OF	3.75 FEE			8.25	
e 1: Enter the	e total number of				3.75 FEE			8.25	
	total number of	DSEs from	part 5 of this s	schedule	3.75 FEE			8.25	
e 2: Enter the e 3: Subtract	sum of permitte	DSEs from d DSEs from	part 5 of this s m block B abo	schedule	to the 3.75 r	ate.		8.25	
e 2: Enter the e 3: Subtract (If zero, I	sum of permitte	DSEs from d DSEs fron . This is the lank and pro	part 5 of this s m block B abo e total number oceed to part	schedule ve of DSEs subject	to the 3.75 r	ate.			_
e 2: Enter the e 3: Subtract (If zero, I	e sum of permitte line 2 from line 1 eave lines 4–7 b oss receipts from	DSEs from d DSEs froi . This is the lank and pro	part 5 of this s m block B abo e total number oceed to part	schedule ve of DSEs subject	to the 3.75 r	ate.	× 0.03		_
e 2: Enter the e 3: Subtract (If zero, I	sum of permitte line 2 from line 1 leave lines 4–7 b	DSEs from d DSEs froi . This is the lank and pro	part 5 of this s m block B abo e total number oceed to part	schedule ve of DSEs subject	to the 3.75 r	ate.	x 0.03		
e 2: Enter the e 3: Subtract (If zero, I e 4: Enter gro e 5: Multiply li	e sum of permitte line 2 from line 1 eave lines 4–7 b oss receipts from	DSEs from d DSEs fron . This is the lank and pro space K (p	part 5 of this s m block B abo e total number oceed to part age 7)	schedule ve of DSEs subject	to the 3.75 r	ate.			DSEs represe partially permited/ partially nonpermitte

ittany Me	edia, Inc.							/STEM ID#	Name	
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	IUED)				
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6	
									Computation o	
									0.10100	

***************************************								***************************************		

***************************************								***************************************		

ACCOUNTING PERIOD: 2019/2

Name	LEGAL NAME OF OWN		SYSTEM:						S	YSTEM ID#
	Nittany Media,	inc.								
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fi A—Part-time sp 76.59 B—Late-night pr 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compar in block	or to June 25, call sign for eather DSE for the accounting the basis of a CC rules and lecialty program (e)(1),76.61(e) (e)(3)). arriage under ral instructions the station's lee the DSE figs (B, column 3) information you	1981, under former ach distant station his station for a sing period and year arriage on which tregulations cited by mming: Carriage, e)(1), or 76.63 (refe Carriage under FC certain FCC rules in the paper SA3 DSE for the currerures listed in colur of part 6 for this stou give in columns	er FCC rules govidentifed by the ngle accounting in which the car he station was covelow pertain to on a part-time bearing to 76.61(e CC rules, section, regulations, or form. It accounting permits 2 and 5 and tation.	veri let per rria carr tho pasi e)(1 is 7 aut	entifed by the letter "F" ning part-time and sub ter "F" in column 2 of priod, occurring between ge and DSE occurred ited by listing one of the se in effect on June 24 s, of specialty program)). 6.59(d)(3), 76.61(e)(3), thorizations. For further draw as computed in parts to the smaller of the two see accurate and is subjected.	estitute carricant 6 of the n January 1 (e.g., 1981, e following 4, 1981.) arming unde n, or 76.63 (er explanation 2, 3, and 4 of figures he	age.) DSE schedule 1, 1978 and Jun 1/1). letters: r FCC rules, se referring to on, see page (vi	e 30, 19 ctions i) of the e. should b	981. e entered
	statement of accou	int on fle in the	e Licensing Divisio	n.						
	1. CALL SIGN	PERMITT 2. PRIO DSE	OR 3. AC	ATIONS CARRIE COUNTING PERIOD	ED	ON A PART-TIME AN 4. BASIS OF CARRIAGE	5. PF	TUTE BASIS RESENT DSE	6. P	ERMITTED DSE
				-						
7 Computation of the		"Yes," comple	ete blocks B and 0 locks B and C blar	nk and complete		art 8 of the DSE sched				
Syndicated Exclusivity			BLOC	K A: MAJOR	TE	ELEVISION MARK	ET			
Surcharge	Is any portion of the	cable system v	vithin a top 100 ma	jor television mar	rket	as defned by section 7	6.5 of FCC	rules in effect Ju	ıne 24, 1	981?
	X Yes—Complete	e blocks B and	IC.			No—Proceed to	part 8			
	BLOCK B: C	arriage of VHI	F/Grade B Contou	r Stations		BLOCK	C: Compu	ıtation of Exem	ot DSEs	i
	Is any station listed ir commercial VHF stat or in part, over the ca	ion that place				Was any station listed nity served by the cab to former FCC rule 76	le system p			
	Yes—List each s X No—Enter zero a		th its appropriate pe part 8.	rmitted DSE		Yes—List each st X No—Enter zero a			te permit	ted DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N	DSE
								-		
			TOTAL DSEs	0.00				TOTAL DSI	Es	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Nittany Media, Inc. SYSTEM ID#	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	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	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below. 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 DSE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	
	A. Enter 0.00599 of gross receipts (the amount in section1)	
	B. Enter 0.00377 of gross receipts (the amount in section.1)	
	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	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.	
3b		
	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)	
	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	
0 "	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?	
Section 4a	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 DSE 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)	
	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	

Name		ME OF OWNER OF CABLE SYSTEM: Nittany Media, Inc.
7 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 m 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. ock 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 is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers becated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.
	_	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS our 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 following sections. BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE
	Section 1 Section 2 Section	Enter the amount of gross receipts from space K (page 7). 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.).
	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)
		and in block 3, line 1, space L (page 7) Base Rate Fee

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/2

LEGAL N	ANS OF CAMER OF CARLE OVERTIME	1
	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
Millar	ny Media, Inc.	
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	
7	A. Enter 0.01064 of gross receipts	8
	(the amount in section 1) >	
	B. Enter 0.00701 of gross receipts	
	(the amount in section 1) \$	Computation of
		Base Rate Fee
	C. Multiply line B by 3.000 and enter here >	
	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 F 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 S 0.00	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	
receipt	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	Computation of
this ex	clusion, you must:	Base Rate Fee
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity
	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
-	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
must a	lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. er, if your cable system is wholly located outside all major television markets, complete block A only.	Distant Stations, and
How to	dentify 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 station you	Stations
	to that community. : For each wholly distant and each partially distant station you carried, determine which of your subscribers were located	
outside	e the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by ne 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. Each	
	iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
-	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.	
In each	n section:	
	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 all of the ibers in the group.	
• If:		
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
2) any	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
•	he 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 instructions appear SA3 form.	
	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding	
page. DSEs t	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show citual calculations on the form.	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nittany Media, Inc. 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.

Nittany Media		OF CABLE	SYSTEM:					S	YSTEM ID#
	В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR I	EACH	SUBSCRIE	ER GROUP	
			SUBSCRIBER GROUI					SUBSCRIBER GROU	JP
COMMUNITY/ AI	REA	Bratton	Twp, Brown Twp	, Granvi	COMMUNITY/ A	AREA	Milford T	wp	
CALL SIGN		DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE
WVIA	С	0.25			WKBS-TV	В	1.00		
WVIA-3	С	0.25			WVIA	С	0.25		
					WVIA-3	С	0.25		
							_		
							_		
		l							
		l							
		l							
				0.50	T		<u>l</u>		4 = 0
Total DSEs				0.50	Total DSEs			_	1.50
Gross Receipts F	irst Gro	oup	\$ 267,	752.44	Gross Receipts	Second	d Group	\$	24,575.86
Base Rate Fee F	First Gro	•	\$ 1,	424.44	Base Rate Fee	Second		\$ SUBSCRIBER GROU	347.63
	DE 4				COMMUNITY/	DE 4			
COMMUNITY/ AI	KEA	гауеце	Twp., Fermanagh	i iwp, w	COMMUNITY/ A	AREA	Біоотпіе	ld Boro, Center	i wp, Deiaw
CALL SIGN		DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE
WHVL-LD	G -	1.00			WKBS-TV	В	1.00		
NKBS-TV	В	1.00			WVIA	C	0.25	***************************************	
NVIA	C	0.25			WVIA-3	С	0.25		
NVIA-3	С	0.25							

		l		l					
							-		
							<u> </u>		
							ļ		

Fotal DSEs				2.50	Total DSEs				1.50
	hird Gr	oup	s 194,	2.50	Total DSEs Gross Receipts	Fourth	Group	s 1	1.50 81,367.39
Total DSEs Gross Receipts T				,268.72	Gross Receipts				81,367.39
								\$ 1 \$	-;
Gross Receipts T	hird Gr	oup		109.75	Gross Receipts Base Rate Fee	Fourth	Group		81,367.39

BLO								
		COMPUTATION O		TE FEES FOR	EACH			
		SUBSCRIBER GRO	UP	COMMUNITY!	A D F A	SIXTH S	SUBSCRIBER GRO	UP
COMMUNITY/ AREA	Jusque	hanna Twp		COMMUNITY/	AREA	wicciure		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE
WKBS-TV B	1.00			WHVL-LD	G	1.00		
WPSU C	0.25			WVIA	С	0.25		
				WVIA-3	С	0.25		
						 		
						-		
otal DSEs			1.25	Total DSEs				1.50
oss Receipts First Grou	ıp	\$.	5,514.12	Gross Receipts	Second	l Group	\$	23,237.48
						· · · · · · · · · · · · · · · · · · ·		
ase Rate Fee First Grou	ın	e	68.33	Base Rate Fee	Secono	l Group	e	328.69
- Tuto I de i list diot	*r	\$	50.55	Dass Nate Fee	J600110	. Jioup	\$	320.03
SE	VENTH	SUBSCRIBER GRO	UP			EIGHTH S	SUBSCRIBER GRO	UP
DMMUNITY/ AREA	West Be	eaver Twp		COMMUNITY/	AREA	Chapman	ı Twp, Perry Tw	p, Union Tv
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE
HVL-LD G	1.00			WKBS-TV	В	1.00		
KBS-TV B	1.00			WLYH	G	1.00		
PMT G	1.00			WPSU	С	0.25		
PMT-2 M	1.00							
VIA C VIA-3 C	0.25							
VIA-3	0.25 1.00							
	1.00	1				ıU		
	-							
	-							
	-					-		
						-		
XBU G			5.50	Total DSEs				2.25
otal DSEs			5.50					
XBU G		\$	5.50	Total DSEs Gross Receipts	Fourth	Group	\$	2.25 52,691.81
WXBU G		<u>\$</u>			Fourth	Group	\$	
	up	\$				_	\$	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP NINTH SUBSCRIBER GROUP COMMUNITY/ AREA West Perry Twp COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN WKBS-TV B 1.00 WNEP-2 MVIA C 0.25	
COMMUNITY/ AREA West Perry Twp COMMUNITY/ AREA Buffalo Twp, Liverpool Boro CALL SIGN DSE CALL SIGN DSE CALL SIGN WNEP-2 M 1.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN I WKBS-TV B 1.00 WNEP-2 M 1.00 I	
WKBS-TV B 1.00 WNEP-2 M 1.00	Compu
	DSE o
	Base Ra
WEITI G 1:00 WVA C 0:23	an
WVIA C 0.25 WVIA-2 C 0.25	Syndi
WVIA-2 C 0.25 WVIA-3 C 0.25	Exclu
WVIA-3 C 0.25	Surch
	fo
	Part
	Dist
	Stati
Total DSEs Total DSEs	1.75
Gross Receipts First Group \$ 20,312.90 Gross Receipts Second Group \$ 20,303	3.84
	
Base Rate Fee First Group \$ 465.32 Base Rate Fee Second Group \$ 322	2.78
ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIBER GROUP	
COMMUNITY/ AREA Liverpool Twp COMMUNITY/ AREA	0
CALL SIGN DSE CALL SIGN DSE CALL SIGN I	DSE
WNEP G 0.25	
WNEP-2 M 1.00	0.00
WNEP-2 M 1.00 WNEP-2 M 1.00 Total DSEs Total DSEs O .25 WNEP-2 M 1.00 Total DSEs	
WNEP-2 M 1.00 WNEP-2 M 1.00 Total DSEs Total DSEs Total DSEs Total DSEs Total DSEs	0.00
WNEP-2 M 1.00 Total DSEs Gross Receipts Third Group \$ 2,889.00 Gross Receipts Fourth Group \$ (6)000000000000000000000000000000000000	

LEGAL NAME OF OWNE Nittany Media, Inc.		E SYSTEM:		mittod 0.70 Otali		S	YSTEM ID#	Name
В				TE FEES FOR EACH				
COMMUNITY/ AREA		SUBSCRIBER GROU Twp, Brown Twp		SECOND SUBSCRIBER GROUP COMMUNITY/ AREA Milford Twp				9
COMMONT IT ANEA	Diatton	i iwp, blowii iwp	, Granv					Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u> </u>					Base Rate Fee and
					•			Syndicated
								Exclusivity
								Surcharge
								for Partially
		-						Distant
	-							Stations
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	ı
Gross Receipts First Gr	oup	\$ 267,	752.44	Gross Receipts Second	d Group	\$	24,575.86	
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Second	-	\$	0.00	i
		SUBSCRIBER GROU				SUBSCRIBER GROU		I
COMMUNITY/ AREA	rayette	Twp., Fermanagl	ı ıwp, n	COMMUNITY/ AREA	Бюопп	eia Boro, Center	iwp, Delaw	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
				WHVL-LD	1.00			
		-						
								l
Total DSEs			0.00	Total DSEs			1.00	ı
Gross Receipts Third G	iroup	\$ 194,	268.72	Gross Receipts Fourth	Group	\$ 1	81,367.39	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	6,801.28	I
Rasa Rata Fast Add th	e hase ret	a face for each subcor	iher group (as shown in the boxes ab	nove			ı
Enter here and in block			no group a	20 SHOWITHI (HE DOXES du	, o v G.	\$	9,936.08	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNE Nittany Media, Ind	: .							
				TE FEES FOR EACH				
		SUBSCRIBER GROU	IP			SUBSCRIBER GROU	Р	
COMMUNITY/ AREA	Susque	ehanna Twp		COMMUNITY/ AREA	COMMUNITY/ AREA McClure Boro			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WHVL-LD	1.00				ļ			
					-			
					-			
					-			
					-			
					-			
					-			
					-			
otal DSEs			1.00	Total DSEs			0.00	
Gross Receipts First G	roup	<u>\$ 5,</u>	514.12	Gross Receipts Second	d Group	\$	23,237.48	
3ase Rate Fee First G	roup	\$	206.78	Base Rate Fee Second	d Group	\$	0.00	
Base Rate Fee First G		\$ SUBSCRIBER GROU		Base Rate Fee Second		\$ SUBSCRIBER GROU		
	SEVENTH			Base Rate Fee Second COMMUNITY/ AREA	EIGHTH	SUBSCRIBER GROU	P	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
	SEVENTH	SUBSCRIBER GROU		COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
Base Rate Fee First G COMMUNITY/ AREA CALL SIGN	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU	P , Union Tv	
COMMUNITY/ AREA	SEVENTH West Bo	SUBSCRIBER GROU	IP	COMMUNITY/ AREA	EIGHTH Chapma	SUBSCRIBER GROU n Twp, Perry Twp CALL SIGN	DSE 1.00	
CALL SIGN	SEVENTH West Bo	SUBSCRIBER GROU	DSE	CALL SIGN WHVL-LD	DSE 1.00	SUBSCRIBER GROU n Twp, Perry Twp CALL SIGN	DSE	

Nonpermitted 3.75 Stations

Nittany Media, Inc								N
E				TE FEES FOR EAC		BER GROUP SUBSCRIBER GRO	LID.	
COMMUNITY/ AREA		SUBSCRIBER GROUP Perry Twp		COMMUNITY/ AREA		Twp, Liverpool Boro		Com
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	00
WHVL-LD	1.00			WNEP	0.25			Base
								Syn
								Exc
								Sur
								Pa
						-		Di
								Sta
	-							
	<u> </u>							
Γotal DSEs			1.00	Total DSEs			0.25	
Gross Receipts First G	roup	\$ 20	0,312.90	Gross Receipts Seco	and Group	\$	20,303.84	
Base Rate Fee First Group \$ 761.73			Base Rate Fee Second Group \$ 190.35					
Base Rate Fee First G	roup	\$	761.73	Base Rate Fee Seco	ond Group	\$	190.35	
	-	\$ SUBSCRIBER GRO	'	Base Rate Fee Seco		\$ SUBSCRIBER GRO		
E	-	SUBSCRIBER GRO	'	Base Rate Fee Seco	TWELVTH			
E	LEVENTH	SUBSCRIBER GRO	'		TWELVTH		UP	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
E COMMUNITY/ AREA	LEVENTH Liverpo	SUBSCRIBER GRO	UP	COMMUNITY/ AREA	TWELVTH	SUBSCRIBER GRO	UP 0	
CALL SIGN CALL SIGN Total DSEs	DSE	SUBSCRIBER GRO ol Twp CALL SIGN	DSE DSE D.000	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE	SUBSCRIBER GRO	DSE DSE O.00	
CALL SIGN	DSE	SUBSCRIBER GRO ol Twp CALL SIGN	DSE	COMMUNITY/ AREA	DSE	SUBSCRIBER GRO CALL SIGN	DSE	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
Name	Nittany Media, Inc.									
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP								
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television maby section 76.5 of FCC rules in effect on June 24, 1981:									
Computation of	☐ First 50 major television market	Second 50 major television market								
Base Rate Fee	INSTRUCTIONS:									
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of								
Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as									
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none en									
for Partially Distant Stations	 Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form. 									
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP								
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs								
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs								
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the								
	total number of DSEs for	total number of DSEs for								
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge								
	computation	computation								
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY								
	SURCHARGE	SURCHARGE								
	First Group	Second Group								
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP								
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs								
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs								
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the								
	total number of DSEs for	total number of DSEs for this subscriber group								
	this subscriber group subject to the surcharge	subject to the surcharge								
	computation	computation								
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY								
	SURCHARGE Third Group	SURCHARGE Fourth Group								
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page									

ACCOUNTING PERIOD: 2019/2

FORM SA3E, PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
Name	Nittany Media, Inc.									
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP								
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:									
Computation of	☐ First 50 major television market	Second 50 major television market								
Base Rate Fee	INSTRUCTIONS:									
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comme	ercial VHF Grade B contour stations listed in block A, part 9 of								
Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as									
Surcharge for	Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number									
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the									
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP								
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs								
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs								
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the								
	total number of DSEs for	total number of DSEs for								
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge								
	computation	computation								
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY								
	SURCHARGE	SURCHARGE								
	First Group	Second Group								
	SEVENTH SUBSCRIBER GROUP	EIGHTH SUBSCRIBER GROUP								
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs								
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs								
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the								
	total number of DSEs for	total number of DSEs for this subscriber group								
	this subscriber group subject to the surcharge	subject to the surcharge								
	computation	computation								
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY								
	SURCHARGE Third Group	SURCHARGE Fourth Group								
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page									

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Name	Nittany Media, Inc.		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP		
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:		
Computation of	☐ First 50 major television market ☐ Second 50 major television mar	ket	
Base Rate Fee	INSTRUCTIONS:		
and	Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of		
Syndicated Exclusivity	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as		
Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none enter zero.		
for Partially Distant Stations	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.		
	NINTH SUBSCRIBER GROUP TENTH SUBS	CRIBER GROUP	
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt 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	1 the or	
		<mark>\$ 0</mark>	
	ELEVENTH SUBSCRIBER GROUP TWELVTH SUBSCRIBER GROUP		
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs		
	Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs	<u>-</u>	
	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	the or	
	SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY		
	SURCHARGE Third Group	<mark>\$ 0</mark>	
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)		