This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

				Return completed workbook	
-	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	by email to:	
	ary Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov	
General instru	ems (Short Form) uctions are located of this workbook	2/24/21	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150	
Α	ACCOUNTING PERIOD COVERE	BY THIS STATEMENT: (Y	YYY/(Period))		
	2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31		
		Barcode Data Filing Period (optional	I - see instructions)		
Accounting Period		_			
В	Instructions: Give the full legal name of the owner of title of the subsidiary, not that of the pa		sidiary of another corporation, give the full cor	porate	
Owner	List any other name or names under whether the state of t	nich the owner conducts the business of	the cable system.		
	If there were different owners during the single statement of account and royalty		the last day of the accounting period should s nting period.	ubmit a	
	Check here if this is the system's first fil	ing. If not, enter the system's ID numbe	r assigned by the Licensing Division.	565	
	LEGAL NAME OF OWNER/MAILI	NG ADDRESS OF CABLE SYSTEM	Λ		
	Zito Canton LLC				
	BUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFEREN	Т)		
	Zito Media				
	MAILING ADDRESS OF OWNER O	OF CABLE SYSTEM			
	PO Box 665 (Number, street, rural route, apartment, or suite	number)			

 1
 Zito Media - Canton PA

 MAILING ADDRESS OF CABLE SYSTEM:

 2

 (Number, street, rural route, apartment, or suite number)

 (City, town, state, zip code)

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

INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these

names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B

Coudersport, PA 16915

IDENTIFICATION OF CABLE SYSTEM:

(City, town, state, zip)

С

System

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito Canton LLC	SYSTEM ID# 565
D	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated con	y" is the same as a "community unit" as defined in FCC rules: nmunities within unincorporated areas and including single,
U	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis as the "first community." Please use it as the first community on all future filings.	
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile hour identified city.	ome parks should be reported in parentheses below the
		07475
First	CITY OR TOWN Canton Borough	STATE PA
Community	Alba	PA
	Grover	PA
ows as Necessary	Canton Township	PA
	Ward Township	PA
	Leroy/Canton	PA

	LEGAL NAME OF OWNER OF C							FORM SA1	TEM I		
Name	Zito Canton LLC							010	5		
E	SECONDARY TRANSMISSION In General: The information in s					v transmission	service of	the cable			
	system, that is, the retransmission	•		-		•					
Secondary	about other services (including p						those exist	ting on the			
Transmission Service: Sub-	last day of the accounting period						hla avatam	brokon			
scribers and	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										
Rates	each 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	-	-	•				-			
	category, but do not include disc	counts allowed	for adva	nce payment.							
	Block 1: In the left-hand block										
	systems most commonly provide that applies to your system. Not										
	categories, that person or entity			-		-					
	subscriber who pays extra for ca										
	first set" and would be counted of										
	Block 2: If your cable system printed in block 1 (for example, f	-		•							
	with the number of subscribers a										
	sufficient.		Ū	,							
	BLO	OCK 1 NO. OF	- T				BLOCK	K 2 NO. OF	1		
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RA		
	Residential:										
	 Service to first set 		311	25.23							
	 Service to additional set(s) 										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial Converter										
	Residential										
	Non-residential										
									1		
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s						
F	In General: Space F calls for ra	•	,		•						
•	not covered in space E, that is, t service for a single fee. There a										
Services	furnished at cost or (2) services	•			0		• •	,			
Other Than	amount of the charge and the un		usually	billed. If any r	ates are cl	narged on a var	iable per-p	rogram basis,			
Secondary	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										
ransmissions: Rates	Block 2: List any services that	listed in block 1 and for which a separate charge was made or established. List these other services in the form of a									
	listed in block 1 and for which a	separate charg		ade or establ	ished. List	these other ser					
	-	separate charg		ade or establ	shed. List	these other ser	-				
	listed in block 1 and for which a brief (two- or three-word) descri	separate charg ption and includ BLO(de the ra	nade or establ te for each.				BLOCK 2	-		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	separate charg	de the ra CK 1 CATEG	nade or establ te for each. ORY OF SER	VICE	these other ser	CATEGO	BLOCK 2 DRY OF SERVICE	RA		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	separate charg ption and includ BLOO RATE	de the ra CK 1 CATEG Installa	nade or establ te for each. ORY OF SER tion: Non-res	VICE		CATEGO		RA		
ransmissions: Rates	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	separate charg ption and includ BLO(de the ra CK 1 CATEG Installa • Mot	ade or establ te for each. ORY OF SER tion: Non-res el, hotel	VICE		CATEGO		RAT		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	separate charg ption and includ BLOO RATE	de the ra CK 1 CATEG Installa • Mot • Con	ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial	VICE		CATEGO		RAT		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	separate charg ption and includ BLOO RATE	de the ra CK 1 CATEG Installa • Mot • Con • Pay	ade or establ te for each. ORY OF SER tion: Non-res el, hotel imercial cable	VICE idential		CATEGO		RAT		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	separate charg ption and includ BLOO RATE	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay	ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable	VICE idential		CATEGO		RA		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection	separate charg ption and includ BLO(RATE 17.95	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire	ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l cl protection	VICE idential		CATEGO		RAT		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	separate charg ption and includ BLOO RATE	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable	VICE idential		CATEGO		RA		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	separate charg ption and includ BLO(RATE 17.95	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s	ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection	VICE idential		CATEGO		RA		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	separate charg ption and includ BLO(RATE 17.95	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec	ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection ervices:	VICE idential	RATE	CATEGO		RA		
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	separate charg ption and includ BLO(RATE 17.95	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec • Disc	ade or establ te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection ervices: onnect	VICE idential	RATE	CATEGO		RA		

counting Period: 2	2020/2			FORM	SA1-2E. PAGE 3					
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:			SYSTEM ID#					
Name	Zito Canton LLC				565					
	PRIMARY TRANSMITTERS:	TELEVISION								
G 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, <i>except</i> (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 									
	• Do not list the station here station was carried only on									
	basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on t	also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the the form. el number the FCC assigned to the tele	see page (v) of the general instruct program services such as HBO, ESI e-air designation. For example, repo	ions. PN, etc. Identify each ort multistream						
	Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	(RC is channel 4 in Washington, D.C. a case whether the station is a network s ering the letter "N" (for network), "N-M" ("E" (for noncommercial educational), o erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	for network multicast), "I" (for indep or "E-M" (for noncommercial educati actions in the paper SA1-2 form. the community to which the station	endent), "I-M" onal multicast). is licensed by the						
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STA	ΓΙΟΝ					
	WBRE	28.1	N	Wilkes-Barre PA						
	WNEP	16.1	N	Scranton PA						
d Rows as Necessary	WOLF	56.1	Ν	Hazelton PA						
	WQMY	53.1	I	Williamsport PA						
	WSWB	38.1	l	Scranton PA						
	WVIA	44	E	Scranton PA						
	WYOU	22.1	Ν	Scranton PA						
		••••••••••••••••••••••••••••••••••••••								

EGAL NAME OF			· • · Em.					SYSTEM I
	every radio s	tation ca	rried on a separate and discr nerally receivable by your cab					н
eceivable if (1) n the basis of a for detailed info aper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation about m. lentify the call tate whether the the radio stati this by placing ive the station	the sys be recei t the Co sign of e he statio on's sign a check i's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s pyright Office regulations on t each station carried. In is AM or FM. hal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante his point, see pag ed by the cable s he station is licens	adend, and (2 nna, during ca ge (v) of the g ystem as a se wed by the FC0) it can l ertain st eneral ir parate a	be expected, ated intervals. Instructions in the. and discrete	Primary Transmitters Radio
				T				
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	od: 2020/2						FORM	I SA1-2E. PAGE 5.		
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#		
Name	Zito Canton LLC							565		
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LO)G					
l	In General: In space I, ident substitute basis during the a explanation of the programn	tify every nor	nnetwork televi eriod, under sp	<i>sion program,</i> broadcast b becific present and former F	y a <i>distant</i> sta FCC rules, reg	ulations, o	r authorization	ns. For a further		
Substitute Carriage:		-			ule general ins		n the paper o	A1-2 10111.		
Special	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
Statement and										
Program Log	broadcast by a distant sta	ition?					YES	× NO		
	Note: If your answer is "No	o", leave the	rest of this pa	ige blank. If your answer i	s "Yes," you r	nust com	plete the prog	gram		
	log in block 2.		·							
	2. LOG OF SUBSTITUT	E PROGRA	MS							
	In General: List each subs	titute progra	am on a separ		s wherever p	ossible, if	their meaning	g is		
	clear. If you need more spa									
				vision program ("substitut						
	period, was broadcast by a under certain FCC rules, re									
	Do not use general catego									
	"NBA Basketball: 76ers vs.	Bulls."		er "Yes." Otherwise enter		,	· _ · · · · _ · · ,			
	Column 3: Give the call	sign of the	station broado	asting the substitute prog	ram.					
			````	the community to which th		,	the FCC or,	in		
	the case of Mexican or Car						la with than	a a m th		
	first. Example: for May 7 gi		wnen your sy	stem carried the substitut	e program. U	se numera	ais, with the h	nonth		
			e substitute pr	ogram was carried by you	ır cable syste	m List the	times accura	atelv		
	to the nearest five minutes									
	stated as "6:00–6:30 p.m."									
				n was substituted for prog						
					nd: onter the l	etter "P" if	the listed nr	odram		
	to delete under FCC rules							ogram		
	was substituted for program	mming that y						ogram		
		mming that y								
	was substituted for prograr effect on October 19, 1976	nming that y		as permitted to delete und	der FCC rules		Iations in	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976	uming that y	your system w	as permitted to delete und	der FCC rules	and regu	Iations in			
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
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	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
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	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
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	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
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	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		
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	was substituted for prograr effect on October 19, 1976 S	UBSTITUTI	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI	N SUBST AGE OCO 6.	Iations in TTUTE CURRED TIMES	7. REASON FOR		

Accounting Period:	2020/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito Canton LLC	SI	STEM ID# 565
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmit (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form.         Gross receipts from subscribers for secondary transmission service(s)         during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	ission service amount, see	9,146.22 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00	this six-mon	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1		
	1. Base amount under statutory formula		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informati		nts!

Accounting Period:	2020/2									FO	RM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWN Zito Canton LLC	NER OF CABLE SYSTEM:									SYSTEM ID# 565
M Channels	to its subscribers, ar 1. Enter the total nur system carried tele 2. Enter the total nur on which the cable	nust give (1) the number o nd (2) the cable system's t mber of channels on which evision broadcast stations mber of activated channel e system carried television services	total numbers the cable the cable the cable the cable the cable the cable the cable	iber of a ble 	activated chann	els during the	e accounting p	eriod.	s 	7 65	
N Individual to Be Contacted		E CONTACTED IF FURTH ut this statement of accourt		ORMAT	TION IS NEEDE	ED (Identify ar	n individual to v	whom			
for Further Information	Name <b>T</b>	eri McMullen						Telepho	ne <b>814-260</b>	-0434	
	(N C	O Box 665 tumber, street, rural route, apart coudersport PA 169 ity, town, state, zip)		uite numb	ber)						
	Email	teri.mcmullen@	@zitomedia	dia.com	n		Fax (opti	onal)			
O	<ul> <li>I, the undersigned, I</li> <li>(Owner of (Agent of in line</li> <li>X (Officer of in line</li> <li>I have examined the</li> </ul>	Typed or printed Title: (Title of o	one, but only partnership ration or pa owner is no (if a corpora d hereby de ny knowledg X Enter an e Enter sign ed name: Presid	nly one nip) I am partners not a con pration) declare o dge, info /s/J n electro gnature Jam	e, of the boxes.) m the owner of t rship) I am the c orporation or par I or a partner (if a under penalty o	he cable syste fuly authorized thership; or a partnership) f law that all s elief, and are n s the line above nature" (e.g.,	em as identified d agent of the c of the legal end tatements of fa made in good fa	in line 1 of spa wner of the cat ity identified as ct contained he aith. tatement.	ce B; or le system as i owner of the o		
		Date:					02/26	6/2021			

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

	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Canton LLC	565
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.	Receipts Exclusion
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?	
YES. Enter the total here and list the satellite carrier(s) below	
	-
Name     Name       Mailing Address     Mailing Address	  
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
x1%	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	_
Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ -	
(interest charge)	-
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner	
Address	
Address ID number	"
	n n

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