THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA3 Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGH	T OFFICE USE ONLY	
DATE RECEIVED	AMOUNT	
2-28-23	\$	
	ALLOCATION NUMBER	

Return to:
Library of Congress
Copyright Office
Licensing Division
101 Independence Ave. SE
Washington, DC 20557-6400
(202) 707-8150

For courier deliveries, see page ii of the general instructions

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting Period	July 1-December 31, 2022			
B	Instructions: Your file has been established under the information given below incorrect information and print or type the correct information beside it. Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines if there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting the conduction of th	a subsidiary of anoth as of the cable syste on the last day of the unting period.	er corporation, give the further than the second in the se	ıll corpo-
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM NORTHLAND CABLE TELEVISION, INC (GREENW	OOD)		
			()3290920222 032909 2022/2
	101 STEWART ST, SUITE 700 SEATTLE, WA 98101			
C System	INSTRUCTIONS: In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of IDENTIFICATION OF CABLE SYSTEM:	•	•	•
	NORTHLAND CABLE TELEVISION MAILING ADDRESS OF CABLE SYSTEM: 235 NORTH CREEK BLVD (Number, street, rural route, apartment, or suite number) GREENWOOD, SC 29649 (City, town, state, zip code)			
D Area	Instructions: For complete space D instructions, see page 1b. Identify with all communities.	only the frst comm	nunity served below and	d relist on page 1b
Served First	CITY OR TOWN GREENWOOD COUNTY	STATE SC		
Community	Below is a sample for reporting communities if you report multiple cha		pace G.	
Sample	CITY OR TOWN (SAMPLE) Alda Alliance	STATE MD MD	CH LINE UP A B	SUB GRP#
	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 effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Form SA3c Rev: 04/2011

FORM SA3. PAGE 1b.			CVCTEM ID#	
NORTHLAND CABLE TELEVISION, INC (GREENWOOD)			032909	Name
Instructions: List each separate community served by the cable system. A "community in FCC rules: "a separate and distinct community or municipal entity (including unincorpareas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The front system identification hereafter known as the "first community." Please use it as the firm	orated communiti at community that	es within unincorpo you list will serve a	orated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile hor below the identified city or town.	ne parks should b	e reported in parer	ntheses	
If all communities receive the same complement of television broadcast stations (i.e., or all communities with the channel line-up "A" in the appropriate column below or leave the onal partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community-by-community-by-designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns of the part o	ne column blank. I elevant communit unity basis, associ I a subscriber gro	f you report any sta y with a subscriber ate each communi	ations group, ty with a	
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
GREENWOOD COUNTY	sc	Α		First
ABBEVILLE COUNTY (UNINC)	SC	Α		Community
CITY OF GREENWOOD	SC	Α		•
GREENWOOD COUNTY (UNINC)	sc	Α		
HODGES	SC	Α		
LAURENS COUNTY	SC	Α		
LAURENS COUNTY (UNINC)	SC	Α		
NINETY SIX	SC	A		
TOWN OF WARE SHOALS	SC	A		
WARE SHOALS	SC SC	Α Α		
Edgefield Saluda	SC	A		
Jaiuu				
	1	1		

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

NORTHLAND CABLE TELEVISION, INC (GREENWOOD)

SYSTEM ID#

032909

Ε

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				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE		CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
Residential: • Service to first set	3,030	\$	25.00					
Service to additional set(s)FM radio (if separate rate)								
Motel, hotel								
Commercial	400	\$	39.99					
Converter								
ResidentialNon-residential								
	1			11		1		

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

Block 2: List any services that your cable system furnished or offered during the accounting period that were not

listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

BLOCK 1						BLOCK 2		
CATEGORY OF SERVICE		RATE	CATEGORY OF SERVICE	F	RATE		CATEGORY OF SERVICE	RATE
Continuing Services:			Installation: Non-residential					
Pay cable	\$	25.50	Motel, hotel					
 Pay cable—add'l channel 	\$	16.00	Commercial					
Fire protection	[Pay cable					
 Burglar protection 	[Pay cable-add'l channel 					
Installation: Residential	[Fire protection					
First set	\$	50.00	Burglar protection					
 Additional set(s) 	\$	20.00	Other services:					
FM radio (if separate rate)			Reconnect	\$	75.00			
Converter			Disconnect					
	[Outlet relocation	\$	45.00			
			Move to new address	\$	45.00			

ACCOUNTING PERIOD: 2022/2 FORM SA3. PAGE 3 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 032909 NORTHLAND CABLE TELEVISION. INC. (GREENWOOD) PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute p Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject

of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.

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

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

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

ACCOUNTING PERIOD: 2022/2 FORM SA3. PAGE 4.

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

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FORM SA3. PAGE 5. ACCOUNTING PERIOD: 2022/2

FURM SA3. PAGE 5.							ACCOUNTING	3 PERIOD: 2022/2
LEGAL NAME OF OWNER OF NORTHLAND CABLE 1			GREENWOOD)			S	YSTEM ID# 032909	Name
SUBSTITUTE CARRIAGE	: SPECIA	I STATEMEN	T AND PROGRAM LOG					
In General: In space I, identi substitute basis during the ac explanation of the programm	ify every nor	nnetwork televis eriod, under spe	ion program broadcast by a cific present and former FC	C rules, regula	ations, or autho	•		 Substitute
1. SPECIAL STATEMENT	CONCER	NING SUBST	ITUTE CARRIAGE					Carriage:
 During the accounting per broadcast by a distant state 	-	ır cable system	n carry, on a substitute bas	is, any nonne	_		n X No	Special Statement and Program Log
Note: If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is	"Yes," you m	ust complete t	he prograr	m	
period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe 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."	nce, please of every no distant state gulations, or ies like "mo Bulls." In was broad sign of the adcast stationation state and any we "5/7." It was when the Example: a er "R" if the and regulation ogramming	attach addition onnetwork televion and that your authorization ovies" or "basked dcast live, enterstation broadcapn's location (thous, if any, the when your system of a program carrilisted program ons in effect do	al pages. rision program (substitute pour cable system substitute solutions. See page (vi) of the general ser "Yes." Otherwise enter "I asting the substitute programe community to which the community with which the stem carried the substitute agram was carried by your ided by a system from 6:01:	program) that ad for the program heral instructi m titles, for ex No." am. station is lice station is ide program. Use cable system 15 p.m. to 6: amming that d; enter the le	t, during the acgramming of a ons for further xample, "I Love ensed by the F ntified). e numerals, win. List the times 28:30 p.m. showetter "P" if the li	ccounting nother stat informatio e Lucy" or FCC or, in th the mor a accuratel ould be as required isted pro	tion on. oth	
					EN SUBSTITU		7. REASON	
1. TITLE OF PROGRAM	2. LIVE?	E PROGRAM 3. STATION'S		5. MONTH	IAGE OCCUR 6. TIM		FOR DELETION	
1. THEE OF TROOPS	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	TO		
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ACCOUNTING PERIOD: 2022/2 FORM SA3. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 032909 NORTHLAND CABLE TELEVISION, INC (GREENWOOD) PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED CALL SIGN **CALL SIGN** HOURS HOURS DATE **FROM** TO DATE **FROM** TO

FORM	SA3. PAGE 7.		
LEGA	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
NO	RTHLAND CABLE TELEVISION, INC (GREENWOOD)	032909	Name
Inst all a (as i page	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount ymounts (gross receipts) paid to your cable system by subscribers for the system's secon identified in space E) during the accounting period. For a further explanation of how to co e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	dary transmission service	K Gross Receipts
CODY	VDICHT BOVALTY FFF		
InstruConIf you fee to accompany	RIGHT ROYALTY FEE Ictions: Use the blocks in this space L to determine the royalty fee you owe: Inplete block 1, showing your minimum fee. Inplete block 2, showing whether your system carried any distant television stations. Input system did not carry any distant television stations, leave block 3 blank. Enter the amount of the properties of the complete the system did carry any distant television stations, you must complete the applicable part of the properties of the schedule to your statement of account.	ts of the DSE Schedule	L Copyright Royalty Fee
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.		
-	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be er elow.	itered on line 2 in block	
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	d be entered on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.		
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 601,867.00	
	This is your minimum fee.	\$ 6,403.86	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ir space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete the DSE schedule.	n 4, you must check	
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	\$ -	
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00	
	Line 3. Add lines 1 and 2 and enter here	\$ -	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 6,403.86	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	0.00	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing
	TOTAL ROYALTY FEE. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 6,403.86	Division for the appropriate form for submitting the
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S	ee page (i) of the	additional fees.

general instructions for more information.)	

ACCOUNTING PERIOD: 2022/2

FORM SA3. PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: NORTHLAND CABLE TELEVISION, INC (GREENWOOD) 032	и ID# 2 909						
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations. 21 2. Enter the total number of activated channels on which the cable system carried television broadcast stations							
	and nonbroadcast services							
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom we can write or call about this statement of account.) Name Marie Censoplano Telephone 914-234-8313							
Information								
	Address Four International Drive, Suite 330 (Number, street, rural route, apartment, or suite number)							
	Rye Brook, NY 10573 (City, town, state, zip)							
	Email (optional) Fax (optional)							
O Certifcation	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulations, as explained in the general instructions.) • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)							
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or							
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or							
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]							
	Handwritten signature: /s/ Daniel J White							
	Typed or printed name: Daniel J. White							
1	Title: SVP - Financial Planning							
	(Title of official position held in corporation or partnership)							

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 effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM: NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	SYSTEM ID# 032909	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by a lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system is service of providing secondary transmissions of primary broadcast transmitters, the system shall scribers and amounts collected from subscribers receiving secondary transmissions pursuant to	for the basic not include sub-	P Special Statement Concerning
For more information on when to exclude these amounts, see the note on page (vii) of the general instruction of the general instruction of the general instruction of the accounting period did the cable system exclude any amounts of gross receipts for secondary made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below		Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or For an explanation of interest assessment, see page (viii) of the general instructions.	underpayment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	- < 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 as contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	erest charge) sistance please	
** 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 Copyrigh please list below the owner, address, frst community served, accounting period, and ID number as giver filing.		
Owner Address		
First community served Accounting period ID number		

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 effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24. 1981.
- 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.

DSE SCHEDULE, PAGE 11.

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

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

• If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSE 1.064% of gross receipts Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSF 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

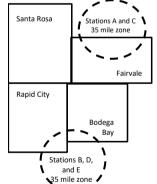
EXAMPLE:

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

In most cases under current ECC 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)

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

	LEGAL NAME OF	OWNER OF CABLE SYS	TEM:					S	SYSTEM ID#
Name	NORTHLAN	ID CABLE TELEV	ISION, INC	(GREENWOO	D)				032909
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions.)								
Capacity			CATEGOR	RY LAC STATIO	NS: COMPU	TATION OF	DSFs		
	1. CALL SIGN	2. NUM OF H	IBER HOURS RIED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS (CARRIA VALUE	OF :	5. TYPE VALUE	6. DS	E
			÷		=	x		=	
			÷		=	x		=	
			÷			X			
			- +			x x			
			÷		=	x		=	
			÷		=	x		=	
			÷		-	х		=	
	Add the DSEs	es OF CATEGORY Less of each station. Sum here and in line :					0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in eften to the Broadcast space I). Column 2 at your option Column 3 Column 4	ive the call sign of ead by your system in fect on October 19, 1 one or more live, nor in this figure should in the things of the station's interest in the station's	substitution for 1976 (as shown network progree the number correspond with flays in the coolumn 2 by the substitution of the s	or a program that your by the letter "P" ingrams during that opter of live, nonnetwork with the information in calendar year: 365, the figure in column	ur system was positional carriage (and programs carriants space I. except in a leap 3, and give the	permitted to dele lace I); and s shown by the w ed in substitution year. result in column	ete under F ord "Yes" in n for progra 4. Round t	CC rules and regulation 2 of arms that were deleted to no less than the	eted
		SI	UBSTITUT	E-BASIS STAT	IONS: COMF	PUTATION C	F DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	YS	1. CALL SIGN	2. NUMB OF PROG	ER RAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=			÷		=
		÷		=			÷		=
		-		=			÷ -		
		÷		=			÷		=
		÷		=			÷		=
	SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule,								
5		BER OF DSEs: Give to		om the boxes in parts	3, 3, and 4 of th	nis schedule and	add them to	provide the total	
Total Number	1. Numbe	er of DSEs from part 2	·			>		0.00	
of DSEs		er of DSEs from part 3				-		0.00	
		er of DSEs from part 4				. —		0.00	
							ſ		
	TOTAL NUME	BER OF DSEs					<u> </u>		0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/2

LEGAL NAME OF O			(GREEN	WOOD)			S	YSTEM ID# 032909	Name
Instructions: Bloc In block A: • If your answer if ' schedule. • If your answer if '	"Yes," leave the re	mainder of pa	pelow.			complete part t	3, (page 16) of the	,	6
				TELEVISION MA			-		Computation of 3.75 Fee
Column 1: CALL SIGN Column 2:	aplete part 8 of the olete blocks B and blete blocks B and blocks	schedule—Do C below. BLOG of distant sta and regulatio the DSE Sched on Extension a	CK B: CARR ations listed in prior to Junidule. (Note: Thand Localism Alicating the bas	LIAGE OF PERIOD DATE 2, 3, and 4 of the 25, 1981. For fur the letter M below reserved to f 2010.)	MITTED DS this schedule ther explanatifers to an exe	RT 6 AND 7. EEs that your system on of permitted mpt multicast settled station.	m was permitted to stations, see the tream as set forth	o carry	
BASIS OF PERMITTED CARRIAGE Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] M Retransmission of a distant multicast stream.									
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 o tter "F" in column 2			ksheet on page 14	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	
						-			
								0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of	DSEs from p	part 5 of this s	schedule					
Line 2: Enter the	sum of permittee	d DSEs from	block B abo	ve					
Line 3: Subtract (If zero, le				of DSEs subject of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	and enter sui	m here				. x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

Name	LEGAL NAME OF OWN	ER OF CABLE S	SYSTEM:						S	STEM ID#
Name	NORTHLAND C	ABLE TELE	VISION, INC	(GREENWO	OD)					032909
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identified by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division.									
		1	ED DSE FOR STA							
	1. CALL	2. PRIO		COUNTING		BASIS OF		RESENT	6. PE	RMITTED
	SIGN	DSE	PI	ERIOD	CA	RRIAGE	I	DSE		DSE
					••••••					
7	Instructions: Block A	must be comp	leted.							
	In block A:	"X								
Computation	,		e blocks B and C, b			- DCEbdul-				
of the	if your answer is	"No," leave blo	cks B and C blank							
Syndicated			BLOCI	K A: MAJOR	TELEVI	SION MARKE	ΞT			
Exclusivity										
Surcharge	• Is any portion of the c	able system wit	thin a top 100 major	television marke	et as defne	ed by section 76.	5 of FCC rul	es in effect June	e 24, 1981	1?
	Yes—Complete	blocks B and 0	C .		x	No—Proceed to	part 8			
					1					
	BLOCK B: C	arriage of VHF	/Grade B Contour	Stations		BLOCI	K C: Compu	tation of Exemp	ot DSEs	
	Is any station listed in	block B of part	6 the primary stres	am of a	Was a	ny station listed	in block B c	of part 7 carried	in any co	mmu-
	commercial VHF station	•			11	rved by the cabl		•	•	
	or in part, over the cal	-	,		11 -	ner FCC rule 76.			, ,	
	Yes—List each st	ation below with	its appropriate permi	itted DSE	Ш	Yes—List each sta	ation below w	vith its appropriate	e permitte	d DSE
	X No—Enter zero a	nd proceed to pa	art 8.			No—Enter zero ar	nd proceed to	part 8.		
	-									
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	N	DSE
				†						
				<u> </u>						
				<u> </u>						
				†						
		 		 			<u> </u>			
		 		 			<u> </u>			
		<u> </u>	TOTAL DSEs	0.00			<u> </u>	TOTAL DS	Es	0.00
	•				1.1					

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	SYSTEM ID# 032909	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	601,867.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSI is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	Ξ	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge \$\$\\$\$		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
44	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 DSI 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)	Ξ	
	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: NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	032909
	<u>'</u>	(ONLEH TOOK)	
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Exclusivity Surcharge		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	
	Instru	ctions:	
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of pa	rt
		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.	
Computation		ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of	-	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	ow .
Base Rate Fee	blank		
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "loca	al
		e area," see page (v) of the general instructions.	"
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	0
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes,"	
		use the total number of DSEs from part 5.).	00
	Section		
	3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	_
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		C. Subtract 1.000 from total DSEs	
		(the figure 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 base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	
		Base Rate Fee	······

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/2

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
NORT	THLAND CABLE TELEVISION, INC (GREENWOOD)	032909	Name
0 "			
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		•
-	A. Enter 0.01064 of gross receipts		8
	(the amount in section 1) >	_	
	B. Enter 0.00701 of gross receipts		0
	(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 E and enter here		
	G. Add lines A, C, and F. This is your base rate fee.		
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee	0.00	
	Dase Nate i ee	0.00	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast	signals shall	
instead	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel		9
Space			9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, t s from subscribers located within the station's local service area, from your system's total gross receipts. To take adv		Computation
	on, you must:	antage of this	of Base Rate Fee
Finat. F		Wa a a a a a a	and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine th		Syndicated
DSEs a	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for e		Exclusivity Surcharge
Finally	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in pa		Partially Distant
	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B belo ble system is wholly located outside all major television markets, complete block A only.	w. However, if	Stations, and
•	Identify a Subscriber Group for Partially Distant Stations		for Partially
	For each community served, determine the local service area of each wholly distant and each partially distant station	n vou	Permitted Stations
-	to that community.	,	5.11. 15.15
	For each wholly distant and each partially distant station you carried, determine which of your subscribers were local		
	the station's local service area. A subscriber located outside the local service area of a station is distant to that stationis distant to the subscriber.)	on (and, by the	
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. E	ach	
•	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that		
will hav	e only one subscriber group when the distant stations it carried have local service areas that coincide.		
_	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syste	m's subscriber	
groups	section:		
	fy the communities/areas represented by each subscriber group.		
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all c	of the	
	bers 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 a schedule; or,	parts 2, 3, and	
2) any _l	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in blo 6 of this schedule.	ck B,	
•	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general ins	structions.	
	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the pr		
page. DSEs f	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need calculations on the form.	is, the total	

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

NORTHLAND CABI			REENWO	DOD)		S	032909	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
	<u> </u>							Distant
	<u> </u>							Stations
			 		<u> </u>			
					_			
			ļ		<u> </u>			
			ļ		ļ			
			 					
						Ш		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
							1	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	 P		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			ļ		 			
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
, -					•			
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				<u> </u>				
Race Pate Foo: Add the	haso rate	foos for each subseri	her group o	as shown in the boxes ab	ove			
Enter here and in block			per group a	as shown in the boxes ab		\$	0.00	

Nonpermitted 3.75 Stations

NORTHLAND CAB			REENWO	DOD)			032909	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0 Computat				
CALL SIGN DSE		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
				-		-		Syndicated Exclusivity
		 				+		Surcharge
								for
								Partially
								Distant
			ļ					Stations
				-				
								
						H		
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	วเมต	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Orese rassipas i net on	- up	<u> </u>			О. опр			
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	P		FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				-				
				-				
								
								
								
			†					
								
			<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				11			DATE FORMS	
Base Rate Fee: Add the	base rate	e fees for each subscr	iber group a	as shown in the boxes a	bove.	UP	DATE FORMULA	
Enter here and in block			<u> </u>			\$	0.00	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	SYSTEM ID# 032909
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and th Syndicated Exclusivity Surcharge. Indicate which major television market 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 and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commerce this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the for schedule. In making this computation, use gross receipts figure your actual calculations on this form.	r the VHF Grade B contour stations that were classified as zero. DSEs used to compute the surcharge. rmula outlined in block D, section 3 or 4 of part 7 of this
	FIRST SUBSCRIBER GROUP	SECOND 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 total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE 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 total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for earnin the boxes above. Enter here and in block 4, line 2 of space L (page 7	

AL NAME OF OWNER OF CABLE SYSTEM: rthland Cable Television, Inc		SYSTEM ID# 32909	Name
CITY OR TOWN	STATE		First
Greenwood	sc		Commui
Line 1. ROYALTY FEE FROM SPACE L			
Line 2. FILING FEE		\$ 6,403.86 725.00	Total Fee
Line 3. TOTAL ROYALTY AND FILING FEES PAYAL Add lines 1 and 2 and enter here	BLE FOR ACCOUNTING PERIOD	\$ 7,128.86	
Effective January 1, 2014, pursuant to the Satellite Te authority to the Copyright Office to establish fees for t 122 statutory licenses, the Office now assesses filing details, see the Federal Register, November 29, 2013 the royalty payment is credited; thus the omission of t Please remit the royalty fee and filing fee in one EFT paym	the filing of statements of account (SC fees for ALL SOAs for current, past a B (78 FR 71498). Please be advised the the appropriate filing fee will result in a	DAs) under the section 111, 119, and and future accounting periods. For that the filing fee is deducted before an underpayment of royalty fees.	