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

STATEM	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
	ary Transmissions by ems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instru	uctions are located o of this workbook	2/7/23	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED	D BY THIS STATEMENT: (Y Period 1 = January 1 - June 30 22 Barcode Data Filing Period (optional	Period 2 = July 1 - December 31	
Accounting				

A	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20222 Barcode Data Filing Period (optional - see instructions)
Accounting		
Period		
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		Northland Communications, Inc.
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		PO Box 66 (Number, street, rural route, apartment, or suite number)
		Clear Lake, IA 50428 (City, town, state, zip)
•	INSTR	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
С	names	s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1	IDENTIFICATION OF CABLE SYSTEM:
	· ·	
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zjp code)
		$\mathbf{b}_{1}$ we have a second s

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 sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I					
Name	Northland Communications, Inc.	618					
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rul "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including singl discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter kno 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 mobi identified city.						
	CITY OR TOWN	STATE					
First	Ventura	IA					
Community							
dd Rows as Necessary							

	LEGAL NAME OF OWNER OF C						FORM SA1		
Name	Northland Communicat						010	6182	
		10113, 1110.							
Е	SECONDARY TRANSMISSION								
	In General: The information in s system, that is, the retransmission			-	•				
Secondary	about other services (including p								
Fransmission	last day of the accounting period	I (June 30 or D	ecember 31,	as the case may b	be).		0		
Service: Sub-	Number of Subscribers: Both	•							
scribers and Rates	down by categories of secondar each category by counting the n	•	•		•				
Rates	separately for the particular serv			• • •	•		charged		
	Rate: Give the standard rate of				•	,	e and the		
	unit in which it is generally billed	· ·	,		lard rate variatior	ns within a p	articular rate		
	category, but do not include disc						a that askis		
	Block 1: In the left-hand block systems most commonly provide	•		Ũ	•				
	that applies to your system. Not								
	categories, that person or entity								
	subscriber who pays extra for ca					nder "Servic	e to the		
	first set" and would be counted of Block 2: If your cable system					e different fr	om those		
	printed in block 1 (for example, t	•		•					
	with the number of subscribers a								
	sufficient.								
-	BLC	DCK 1 NO. OF			BLOCK 2				
	CATEGORY OF SERVICE	SUBSCRIB		ATE CAT	TEGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RA	
	Residential:								
	Service to first set		97	\$41.95					
	<ul> <li>Service to additional set(s)</li> </ul>		199	\$4.95					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential								
	Non-residential							 	
	SERVICES OTHER THAN SEC		NSMISSION			·			
-	In General: Space F calls for ra				all your cable sy	stem's servi	ces that were		
F	not covered in space E, that is, t				,	,			
Services	service for a single fee. There ar furnished at cost or (2) services								
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		acaanj smo		enalgee en a tai	anio hei hi	- <u>-</u>		
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.								
Rates	<b>Block 2:</b> 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) descrip	vices in the	IOTTI OF A						
		BLO							
	CATEGORY OF SERVICE	RATE	-	OF SERVICE	RATE	CATEGO	BLOCK 2 RY OF SERVICE	RA	
	Continuing Services:			Non-residential					
	• Pay cable		• Motel, he	otel		Cinema	x Plex	\$14.	
	• Pay cable—add'l channel		Commer	cial		HBO Ple	ex	\$18.	
	Fire protection		• Pay cab	e		HBO &	Cinemax	\$32.	
	•Burglar protection		•Pay cab	e-add'l channel		Showtin	ne Plex	\$14.	
	Installation: Residential		Fire prot	ection		Starz Pl	ex	\$12.	
	• First set	\$99.95	• Burglar µ	protection					
	<ul> <li>Additional set(s)</li> </ul>	\$90.00	Other servi	ces:					
			-		¢25.00			1	
	• FM radio (if separate rate)		<ul> <li>Reconne</li> </ul>	CI	\$35.00				
	( )		• Reconne • Disconne		\$35.00				
	• FM radio (if separate rate)			ect	\$35.00				

	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTE
lame	Northland Communic	cations, Inc.		6
	PRIMARY TRANSMITTERS:	TELEVISION	-	
G imary smitters: evision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a <b>Substitute Basis Stations</b>	lentify every television station (including to em during the accounting period, <i>except</i> is in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61 as explained in the next paragraph. <b>s:</b> With respect to any distant stations car rules, regulations, or authorizations:	<ul> <li>(1) stations carried only on a part e carriage of certain network program 1(e)(2) and (4))]; and (2) certain state</li> </ul>	-time basis under rams [sections ations carried on a
	• Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further information	re in space G—but do list it in space I (the n a substitute basis. also in space I, if the station was carried ion concerning substitute basis stations, s	both on a substitute basis and als see page (v) of the general instruc	so on some other stions.
		on's call sign. <i>Do not</i> report origination pr ed with a station according to its over-the-	-	-
	"WETA-2" as the same on	6		
	of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast)	WRC is channel 4 in Washington, D.C. th case whether the station is a network s tering the letter "N" (for network), "N-M" (for ), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct	station, an independent station, or for network multicast), "I" (for indep r "E-M" (for noncommercial educal	a noncommercial pendent), "I-M"
	Column 4: Give the location	on of each station. For U.S. stations, list t adian stations, if any, give the name of the	the community to which the station	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	КІМТ	3	N	MASON CITY IOWA
	KIMT-MY3.2	3.2	N-M	MASON CITY IOWA
s as Necessary	KIMT-ION	39	N-M	MASON CITY IOWA
	KIMT 3.4	3.4	N-M	MASON CITY IOWA
	KAAL	6	N	AUSTIN MINNESOTA
	KAAL 6.2	6.2	N-M	AUSTIN MINNESOTA
	• • • • • • • • • • • • • • • • • • • •			
	KXLT	47	Ν	ROCHESTER MINNESOTA
	KXLT KXLT 47.2	47 47.2	N N-M	ROCHESTER MINNESOTA
	KXLT 47.2	47.2	N-M	ROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3	47.2 47.3	N-M N-M	ROCHESTER MINNESOTA ROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3 KXLT 47.4	47.2 47.3 47.4	N-M N-M N-M	ROCHESTER MINNESOTA ROCHESTER MINNESOTA ROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5	47.2 47.3 47.4 47.5	N-M N-M N-M N-M	ROCHESTER MINNESOTA ROCHESTER MINNESOTA ROCHESTER MINNESOTA ROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5 KTTC	47.2 47.3 47.4 47.5 10	N-M N-M N-M N-M	ROCHESTER MINNESOTA ROCHESTER MINNESOTA ROCHESTER MINNESOTA ROCHESTER MINNESOTA ROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5 KTTC KTTC-CW	47.2 47.3 47.4 47.5 10 10.2	N-M N-M N-M N-M N I	ROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5 KTTC KTTC-CW KTTC 10.3	47.2 47.3 47.4 47.5 10 10.2 10.3	N-M N-M N-M N-M I N-M	ROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5 KTTC KTTC-CW KTTC 10.3 KTTC 10.4	47.2 47.3 47.4 47.5 10 10.2 10.3 10.4	N-M N-M N-M N-M 1 N-M N-M N-M	ROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5 KTTC KTTC-CW KTTC 10.3 KTTC 10.4 KTTC 10.5	47.2 47.3 47.4 47.5 10 10.2 10.3 10.4 10.5	N-M N-M N-M N-M N 1 1 N-M N-M N-M	ROCHESTER MINNESOTA         ROCHESTER MINNESOTA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5 KTTC KTTC-CW KTTC 10.3 KTTC 10.4 KTTC 10.5 KYIN	47.2 47.3 47.4 47.5 10 10.2 10.3 10.4 10.5 11	N-M N-M N-M N-M I N-M N-M N-M N-M E	ROCHESTER MINNESOTA         MASON CITY IOWA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5 KTTC KTTC-CW KTTC 10.3 KTTC 10.4 KTTC 10.5 KYIN KYIN11.2	47.2 47.3 47.4 47.5 10 10.2 10.3 10.4 10.5 11 11.2	N-M N-M N-M N-M 1 1 N-M N-M N-M E E E-M	ROCHESTER MINNESOTA         MASON CITY IOWA         MASON CITY IOWA
	KXLT 47.2 KXLT 47.3 KXLT 47.4 KXLT 47.5 KTTC KTTC-CW KTTC 10.3 KTTC 10.4 KTTC 10.5 KYIN KYIN11.2 KYIN11.3	47.2 47.3 47.4 47.5 10 10.2 10.3 10.4 10.5 11 11.2 11.3	N-M N-M N-M N-M 1 N-M N-M N-M E E E-M E-M	ROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAROCHESTER MINNESOTAMASON CITY IOWAMASON CITY IOWAMASON CITY IOWA

Northland C	F OWNER OF (							SYSTEM II 618
	t every radio s	station ca	rried on a separate and discr nerally receivable by your cab					Н
eceivable if (1) in the basis of for detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation about rm. dentify the call tate whether to the radio stat this by placing Sive the station	y the sys be recein the Co sign of e the station ion's sign g a check n's location	I-Band FM Carriage: Under ( tem whenever it is received a ved at the headend, with the pyright Office regulations on each station carried. n 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	at the system's he system's FM ante this point, see pa sed by the cable s ne station is licens	adend, and (2 enna, during c ge (v) of the g ystem as a se sed by the FC	) it can l ertain st eneral ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
		T			r	[		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
ONE								

Accounting Perio		·					F	ORM SA1-2E. PAGE 5		
Name	LEGAL NAME OF OWNER OF							SYSTEM ID#		
	Northland Communica		•					61822		
	SUBSTITUTE CARRIAG	E: SPECIA	L STATEME	NT AND PROGRAM LO	)G					
I	In General: In space I, ident									
Substitute	substitute basis during the a explanation of the programm									
Carriage:	1. SPECIAL STATEMEN				ano gonorar me					
Special	During the accounting per				asis, any nonr	network te	evision p	rogram		
Statement and Program Log	broadcast by a distant sta	ation?			-		YES			
• •	Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program									
	log in block 2.			igo blank. In your anowor	o 100, you i	ndot oomp		nogram		
	period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. <b>Column 2:</b> If the progran <b>Column 3:</b> Give the call <b>Column 4:</b> Give the broa the case of Mexican or Car <b>Column 5:</b> Give the mon first. Example: for May 7 gi <b>Column 6:</b> State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	ace, please a e of every nor a distant stati egulations, or ries like "mov . Bulls." m was broad sign of the s adcast statio nadian statio nth and day v ive "5/7." nes when the . Example: a ter "R" if the	add additional nnetwork tele ion and that y r authorization vies" or "bask dcast live, entr station broadc on's location (f ons, if any, the when your sy e substitute pr program carr listed program	I rows to the tables. vision program ("substitut our cable system substitu ns. See page (v) of the ge etball." List specific progr er "Yes." Otherwise enter sasting the substitute prog the community to which the community with which the stem carried the substitut ogram was carried by you ried by a system from 6:0 n was substituted for prog	e program") ti ted for the pro- meral instruct am titles, for e "No." ram. he station is lid e station is lid e program. Us in cable system 1:15 p.m. to 6 gramming that	hat, during ogramming ions for fu example, " censed by entified). se numera m. List the :28:30 p.n	the acco g of anoth rther infor I Love Lud the FCC als, with th times acc n. should em was <i>re</i>	unting ler station mation. cy" or or, in ne month curately be equired		
	was substituted for program	mming that y						l program		
	was substituted for prograr effect on October 19, 1976	mming that yes.	our system w	as permitted to delete un	der FCC rules	and regu	Iations in			
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE		as permitted to delete un	der FCC rules	and regu N SUBST AGE OCC	Iations in	7. REASON FOR DELETION		
	was substituted for prograr effect on October 19, 1976	UBSTITUTE	our system w	as permitted to delete un	der FCC rules WHE CARRI	and regu N SUBST AGE OCC	Iations in ITUTE CURRED	7. REASON FOR DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOR DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOR DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOR DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FO		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOI DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOR DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOR DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOR DELETION		
	was substituted for prograr effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	WHE CARRI, 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED	7. REASON FOR DELETION		

Accounting Period:	2022/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
Name	Northland Communications, Inc.		61822
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form.         Gross receipts from subscribers for secondary transmission service(s) during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	ission service amount, see	5,742.82 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 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	00)	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		hts!

Accounting Period:	2022/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Northland Communications, Inc.	SYSTEM ID# 61822
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
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name Sarah McChesney Telephone 641-	357-2111
	Address       PO Box 66 (Number, street, rural route, apartment, or suite number)         Clear Lake, IA 50428 (City, town, state, zip)         Email       cltelacctg@cltel.com       Fax (optional) 641-357-8800	
	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
O Certification	<ul> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of in line 1 of space B.</li> <li>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)]</li> </ul>	
	X       /s/ Thomas A. Lovell         Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)         Typed or printed name:       Thomas A. Lovell         Title:       CEO         (Title of official position held in corporation or partnership)	
	Date: 2/7/2023	

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
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
thland Communications, Inc.	6182
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS         The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:             "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."     </li> <li>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.</li> <li>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?</li> </ul>	P Special Statement Concerning Gross Receipts Exclusion
NO	
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 Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	
x	—
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x 0.00274	
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	
* 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.	
contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
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	
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	
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	

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 th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.