### THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 201 SA3

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

### **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].

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R
For courier deliveries, see
page ii of the general
instructions

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period	January 1- June 30, 2023				
<b>B</b> Owner	Instructions: Your file has been established under the information given belincorrect 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 rate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the busin if there were different owners during the accounting period, only the own a single statement of account and royalty fee payment covering the entire according to the conduction of the system's list of the system's	s a subsidiary of and ness of the cable system on the last day of counting period.	other corporation, give the stem fifthe accounting period s	e full corpo-	032909
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM NORTHLAND CABLE TELEVISION, INC (GREEN	WOOD)	a.c.		2004
			*(	)329092 032909	20231* 2023/1
	101 STEWART ST, SUITE 700 SEATTLE, WA 98101				
<b>C</b> System	INSTRUCTIONS: In line 1, give any business or trade names used to names already appear in space B. In line 2, give the mailing address  IDENTIFICATION OF CABLE SYSTEM:	•	•	•	
•	names already appear in space B. In line 2, give the mailing address	•	•	•	
•	names already appear in space B. In line 2, give the mailing address  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	of the system, if d	ifferent from the addre	ess given in s	space B
System	names already appear in space B. In line 2, give the mailing address  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)  Instructions: For complete space D instructions, see page 1b. Identifications.	of the system, if d	ifferent from the addre	ess given in s	space B
System  D  Area Served First	names already appear in space B. In line 2, give the mailing address  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)  Instructions: For complete space D instructions, see page 1b. Identiwith all communities.	of the system, if d	ifferent from the addre	ess given in s	space B
System  D  Area Served	names already appear in space B. In line 2, give the mailing address  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)  Instructions: For complete space D instructions, see page 1b. Identiwith all communities. CITY OR TOWN	of the system, if d	mmunity served below	ess given in s	space B
System  D  Area Served First	names already appear in space B. In line 2, give the mailing address  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)  Instructions: For complete space D instructions, see page 1b. Identify with all communities. CITY OR TOWN  GREENWOOD COUNTY	of the system, if d	mmunity served below	ess given in s	n page 1b
System  D  Area Served First Community	names already appear in space B. In line 2, give the mailing address  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)  Instructions: For complete space D instructions, see page 1b. Identiwith all communities. CITY OR TOWN GREENWOOD COUNTY  Below is a sample for reporting communities if you report multiple of CITY OR TOWN (SAMPLE)  Alda	fy only the frst cor  STATE  SC  hannel line-ups in  STATE  MD	mmunity served below  Space G.  CH LINE UP	and relist or	n page 1b
System  D  Area Served First	names already appear in space B. In line 2, give the mailing address  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)  Instructions: For complete space D instructions, see page 1b. Identify with all communities. CITY OR TOWN GREENWOOD COUNTY  Below is a sample for reporting communities if you report multiple of CITY OR TOWN (SAMPLE)	of the system, if d	mmunity served below  Space G.  CH LINE UP	and relist or	n page 1b

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 filing, a determination that would be made by a court of law.

Form SA3c Rev: 04/2011

LEGAL NAME OF OWNER OF CARLE OVOTEM			SYSTEM ID#	
LEGAL NAME OF OWNER OF CABLE SYSTEM:  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 unincorp areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frs of system identification hereafter known as the "first community." Please use it as the first	orated communit at community that	ies within unincorp you list will serve	orated	D Area Served
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hombelow the identified city or town.	ne parks should b	e reported in pare	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 th on a 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 to	e column blank. elevant communit nity basis, associ l a subscriber gro	If you report any si y with a subscriber iate each commun	ations group, ity with a	
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
GREENWOOD COUNTY	sc	Α		First
ABBEVILLE COUNTY (UNINC)	SC	A		Community
CITY OF GREENWOOD	SC	A		
GREENWOOD COUNTY (UNINC)	SC	A		
HODGES	SC	A		
LAURENS COUNTY	SC	A		
LAURENS COUNTY (UNINC)	SC	A		
NINETY SIX	SC	Â		
TOWN OF WARE SHOALS				
	SC	A		
WARE SHOALS	SC	A		
Edgefield	SC	A		
Saluda	SC	Α		
***************************************				

**ACCOUNTING PERIOD: 2023/1** FORM SA3 PAGE 2 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 032909 NORTHLAND CABLE TELEVISION, INC (GREENWOOD) SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES Ε 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 Secondary about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the **Transmission** last day of the accounting period (June 30 or December 31, as the case may be). Service: Sub-Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken scribers and down by categories of secondary transmission service. In general, you can compute the number of subscribers in Rates 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 BLOCK 1 BLOCK 2 NO. OF CATEGORY OF SERVICE SUBSCRIBERS RATE CATEGORY OF SERVICE **SUBSCRIBERS** RATE Residential: · Service to first set 2,819 · Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial 400 39.99 Converter Residential Non-residential 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 F 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 Services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the Other Than amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, Secondary enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Transmissions: Block 2: List any services that your cable system furnished or offered during the accounting period that were not Rates listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

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

FORM SA3. PAGE 3.						OVOTEM ID#	
	LEGAL NAME OF (					SYSTEM ID#	Name
	NORTHLAN	D CABLE	TELEVISION,	INC (GREE	NWOOD)	032909	ramo
PRIMARY TRANSMITTERS	S: TELEVISION						
In General: In space G, in	dentify every tel	evision statio	n (including trans	lator stations and	low power television stati	ons)	
	•	• • •	,		y on a part-time basis und		G
					etwork programs [sections		
				2) and (4))]; and (	(2) certain stations carried	on a	Primary
substitute program basis,							Transmitters
				ny distant stations	s carried by your cable sys	stem on a substitute	Television
basis under specific FCC	, 0	,		anial Statement a	and Dragram Lag \if the		
Do not list the station he	•		n space i (the Sp substitute basis	eciai Statement a	ind Program Log)—if the		
		•		h on a substituto	basis and also on some ot	ho	
	•				ns, see page (v) of the ger		
					n program services such a		Identif\
			_		For example, report multi-		
			· ·	•	eam separately; for examp		
WETA-simulcast).			roportou iii ooiuii	(	oann oopanatory, tor onamp		
	Column 2: Give	the channel	number the FCC	has assigned to	the television station for bi	roadcasting over-th	ne-air ir
its community of license.	For example, W	RC is Chann	el 4 in Washingto	on, D.C. This may	be different from the char	nnel	
on which your cable syste	em carried the s	tation.	· ·	•			
1	Column 3: India	cate in each c	ase whether the	station is a netwo	ork station, an independent	t station, or a nonc	ommercia
					"I" (for independent), "I-M		
'	,, ,		,,	`	ercial educational multicas	st)	
For the meaning of these							
				ervice area, (i.e. "o	distant"), enter "Yes". If no	t, enter "No". For a	n ex
planation of local service				4			
	•				mplete column 5, stating th		/ou
					g "LAC" if your cable syste	en	
carried the distant station					icity subject to a royalty paymer	nt hannung it in the	auhia a
					or an association represe		Subjec I
					ansmitter, enter the design		
					basis, enter "O." For a furt		
explanation of these three					basis, criter O. 1 or a fart	110	
					list the community to whic	h the station is lice	ı nsed by th€
FCC. For Mexican or Can					•		l
Note: If you are utilizing r				•			
		CHANN	EL LINE-UP	AA			
1.0411	2 P'CAST	2 TVDE	4 DISTANTS		6 LOCATION OF STATE		

		CHANN	EL LINE-UP	AA	
1. CALL S	_	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

**ACCOUNTING PERIOD: 2023/1** FORM SA3. PAGE 3. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 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 LID AA

<u> </u>		CHANN	EL LINE-UP	AA	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WSPA HD	7	N-M	No		SPARTANBURG, SC
WYCW	45	I	No		ASHEVILLE, NC
WYCW-CW HD	0	I-M	No		ASHEVILLE, NC
WYCW-DT2 True	0	I-M	No		ASHEVILLE, NC
WYFF	36	N	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: 2023/1 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). AM or FM CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN S/D LOCATION OF STATION

FORM SA3. PAGE 5. ACCOUNTING PERIOD: 2023/1

FURINI SAS. PAGE 5.							ACCOUNTING	3 PERIOD: 2023/1
LEGAL NAME OF OWNER OF NORTHLAND CABLE 1			GREENWOOD)			S	YSTEM ID# 032909	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEI	NT AND PROGRAM LOC	 }				
In General: In space I, identi substitute basis during the ac explanation of the programm	counting pe ing that mus	riod, under spe t be included in	cific present and former FC0 this log, see page (v) of the	rules, regula	ations, or autho	,		Substitute
1. SPECIAL STATEMENT								Carriage: Special
<ul> <li>During the accounting peri broadcast by a distant stat</li> </ul>		r cable system	carry, on a substitute basis	s, any nonnet			ХNо	Statement and Program Log
<b>Note:</b> If your answer is "No" log in block 2.	, leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	ıst complete th	e program		
period, was broadcast by a under certain FCC rules, red Do not use general categori "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call s Column 4: Give the broathe case of Mexican or Cancolumn 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please a of every noi distant stati gulations, o es like "mo Bulls." n was broac sign of the s dcast static adian statio th and day re "5/7." es when the Example: a er "R" if the nd regulatio	m on a separa attach additional attach additional attach additional attach additional attach	al pages. sion program (substitute pur cable system substitute pour cable system substitute of the substitute of the substitute of the substitute of the substitute program of the substitute program of the substitute program of the substitute program was carried by your country of the substitute program was carried by your country of the substitute of the substituted for program of the accounting period;	rogram) that, I for the program instruction it itles, for example of the program in the program. Use the program in the progra	during the accramming of an ns for further in ample, "I Love nsed by the FO tiffied).  numerals, with List the times 8:30 p.m. should now system was ter "P" if the list	counting other station formation Lucy" or CC or, in the mont accurately accurately accurately serequired ted pro	h	
9	I IRSTITI IT	E PROGRAM			EN SUBSTITU		7. REASON	
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIM		FOR DELETION	
1. THEE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	TO		
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					_			
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ACCOUNTING PERIOD: 2023/1 FORM SA3. PAGE 6.

Accounting	2111021 2023, 2									OTTIV	ONO. I NOL O.		
Name	NORTHLAN		SYSTEM: ELEVISION, INC	С	(GREENW	/OC	DD)			S	7STEM ID# 032909		
<b>J</b> Part-Time Carriage Log	time carriage du hours your syst Column 1 (Column 5 of spa Column 2 (Dourred during the Give the mont "4/10."  • State the start television statio "app." Example	s space ties in ue to lack of act em carried that call sign): Give ace G.  lates and hour is accounting ph and day wher ing and ending n's broadcast d: "12:30 a.m3"	ivated channel cap station. If you nee the call sign of even s of carriage): For eriod. In the carriage occu- times of carriage to ay, you may give and 3:15 a.m. app."	paced received receiv	city, you are reconcer space, plead distant station ach station, lissed. Use numerate nearest qua approximate e	quire ease who t the als, v arter ndin	ed to complete the attach additional cose basis of carred dates and hours with the month fill hour. In any case hour, followed	f carriage as "LAC" for part- s log giving the total dates and pages. age you identified by "LAC" in when part-time carriage oc- st. Example: for April 10 give where carriage ran to the end of the by the abbreviation e: "5/10-5/14, 6:00 p.m.—					
			DATE	ES /	AND HOURS (	OF F	PART-TIME CAF	RRIAGE					
		WHEN	I CARRIAGE OCC	CUE	RRFD			WHEN	I CARRIAGE OC	CUF	RRED		
	CALL SIGN		HOL		S		CALL SIGN		НО	URS	3		
		DATE	FROM		TO			DATE	FROM		ТО		
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FORM	SA3. PAGE 7.						
LEGA	AL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name			
NO	RTHLAND CABLE TELEVISION, INC (GREENWOOD)		032909	Hame			
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  Set 1. The figure you give in this space E of the system's secondary transmission service (as identified in space E) during the accounting service (s) during the accounting period.  Set 2. The figure you give in this space E of the system's secondary transmission service (as identified in space E) during the accounting period.  Set 3. The figure you give in this space E of the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s)  during the accounting period.  Set 3. The figure you give in this space E of the system's secondary transmission service (as identified in space E) during the accounting period.  Set 3. The figure you give in this space E of the system's secondary transmission service (as identified in space E) during the accounting period.  Set 3. The figure you give in this space E of the system's secondary transmission service (as identified in space E) during the accounting period.  Set 4. The figure you give in the total of the system's secondary transmission service (as identified in space E) during the accounting period.  Set 4. The figure you give in the total of the system's secondary transmission service (b) A figure you give in the total of the system's secondary transmission service (c) A figure you give in the total of the young transmission service (c) A figure you give in t							
IIVIP	ORIANI: You must complete a statement in space P concerning gross receipts.	(Amount of	gross receipts)				
<ul><li>Instru</li><li>Com</li><li>If you fee fee fee fee fee fee fee fee fee fe</li></ul>	ARIGHT ROYALTY FEE Inctions: Use the blocks in this space L to determine the royalty fee you owe: Implete block 1, showing your minimum fee. Implete block 2, showing whether your system carried any distant television stations. Incomparison block 2 and carry any distant television stations, leave block 3 blank. Enter the amount from block 1 on line 1 of block 4, and calculate the total royalty fee. Incompanying this form and attach the schedule to your statement of account.	of the DSE Scho	edule	L Copyright Royalty Fee			
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be en k 3 below.						
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be ente glow.	ered on line 2 in	block				
▶ If pa	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	be entered on li	ne				
Block 1	<b>MINIMUM FEE</b> : All cable systems with semiannual gross receipts of \$527,600 or more ar least the minimum fee, regardless of whether they carried any distant stations. This fee is 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	\$	564,792.10				
	Enter the result here.						
	This is your minimum fee.	\$	6,009.39				
Block 2 Block 3	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the info space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column a "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.  In No—Leave block 3 below blank and column and the part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	4, you must chec	ck				
	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	\$	6,009.39	Cable systems			
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> 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		0.00	submitting additional			
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7 should contact the Licensing			
	TOTAL ROYALTY FEE. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	6,009.39	Division for the appropriate form for submitting the			
	Remit this amount via electronic payment payable to Register of Copyrights. (See	e page (i) of the		additional fees.			

	general instructions for more information.)	

ACCOUNTING PERIOD: 2023/1

FORM SA3. PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
1101110	NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	032909
	CHANNELS	
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast station	ons
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Chamileis	Enter the total number of channels on which the cable	
	system carried television broadcast stations	29
		_
	2. Enter the total number of activated channels	1
	on which the cable system carried television broadcast stations and nonbroadcast services	215
	and nonbroadcast services	
NI	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom	
N	we can write or call about this statement of account.)	
Individual to		
Be Contacted	Maria Canaanlana	1 224 2242
for Further Information	Name Marie Censoplano Telephone 914	1-234-6313
	Frankista and Britan Only 200	
	Address Four International Drive, Suite 330 (Number, street, rural route, apartment, or suite number)	
	Rye Brook, NY 10573	
	(City, town, state, zip)	
	[Four (entional)]	
	Email (optional) Fax (optional)	
	CERTIFICATION /This statement of account must be cartifed and sixned in accordance with Converget Office regulation	
0	<b>CERTIFICATION</b> (This statement of account must be certifed and signed in accordance with Copyright Offce regulation as explained in the general instructions.)	is,
Certifcation	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 identified 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 in line 1 of space B and that the owner is not a corporation or partnership; or	em as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of in line 1 of space B.	of the cable system
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained he are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	rein
	[18 U.S.C., Section 1001(1986)]	
	Handwritten signature: /s/ Daniel J White	
	Typed or printed name: Daniel J. White	
	Types of printed faile.	
	Title CVD Financial Blanning	
	Title: SVP - Financial Planning  (Title of official position held in corporation or partnership)	
	Date: 8/25/23	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	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 adding t lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the beservice of providing secondary transmissions of primary broadcast transmitters, the system shall not include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section	pasic lude sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary transminate by satellite carriers to satellite dish owners?  X NO  YES. Enter the total here and list the satellite carrier(s) below	iissions	Concerning 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 underposed for an explanation of interest assessment, see page (viii) of the general instructions.  Line 1 Enter the amount of late payment or underpayment	payment.	Q 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	-	
x 0.00  Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	274 	
(interest of	charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistanc contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	e 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 Copyright Offce, please list below the owner, address, frst community served, accounting period, and ID number as given in the 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 Offce to collect the personally identifying information (PII) requested on the form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and 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.

## 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),(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, 198l, 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 DSE 0.330% of gross receipts

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

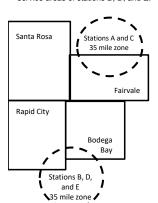
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

#### **EXAMPLE:**

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

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



Distant Stations Carr	ied	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6.384.00

		ψ0,004.00			
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.

Name		DWNER OF CABLE SYSTEM CABLE TELEN		IC (GR	EENWOO	D)			S	032909
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated	Column 2 figure should a Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of al 2: For each station, correspond with the 3: For each station, 1: Divide the figure i 1: at least to the third 5: For each indepen value as ".25." 6: Multiply the figure point. This is the sta	give the nur e information give the tota in column 2 d decimal po ident station	mber of ho n given in s al number of by the figu pint. This is n, give the '	urs your ca space J. Ca of hours tha ire in colum the "basis "type-value"	ble system carriculate only on- it the station br in 3, and give the of carriage value as "1.0." For e	ried the stati e DSE for ea oadcast ove ne result in c ue" for the st each network	on during the ach station. If the air durin lecimals in coation. If or noncomm	ig the accounting plumn 4. This figure terrial educational bound to no less that	period. e must station,
Channel Capacity			CATECOE		STATION	S: COMPU	TATION C	NE DSEc		
	1. CALL SIGN	2. NUM OF H	BER IOURS RIED BY	3. NUM OF H	IBER HOURS TION	4. BASIS O CARRIA VALUE	F	5. TYPE VALUE	6. DS	SE
			÷				х		=	
			÷ -				x x			
			÷							
			÷		=		х		=	
			÷						=	
			÷		=		х		=	
	Add the DSEs	of CATEGORY L of each station. Im here and in line			dule,			0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effer broadcast capace I).     Column 2: at your option.     Column 4:	te the call sign of ear I by your system in ect on October 19, 1 one or more live, no For each station give This figure should Enter the number o Divide the figure in This is the station's	substitution 1976 (as sho nnetwork prove the numb correspond of days in the column 2 by	for a programs dur ber of live, i with the in e calendar y the figure	ram that yo letter "P" ir ing that opt nonnetwork formation in year: 365, o in column	ur system was a column 7 of spond carriage (a programs carrin space I. except in a leaf 3, and give the	permitted to pace I); and as shown by t ied in substi o year. result in col	delete under the word "Yes" tution for programm 4. Round	FCC rules and re in column 2 of grams that were do	eleted
						ONS: COMP				1
	1. CALL 2 SIGN	2. NUMBER OF PROGRAMS	3. NUME OF DA IN YEA	AYS	4. DSE	1. CALL SIGN	2. NUN OF PRO	MBER OGRAMS	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		ER OF DSEs: Give to sapplicable to your		from the bo	oxes in parts	2, 3, and 4 of the	his schedule	and add them	to provide the tota	I
Total Number	1. Number o	f DSEs from part 2				)			0.00	
of DSEs		f DSEs from part 3							0.00	
	3. Number o	f DSEs from part 4					<b></b>		0.00	
	TOTAL NUMBE	R OF DSEs						<b></b>		0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/1

LEGAL NAME OF O			C (GREE	NWOOD)			S'	YSTEM ID# 032909	Namo
schedule.	"Yes," leave the re	emainder of p	•	7 of the DSE sche	edule blank a	nd complete pa	 art 8, (page 16) of	the	6
If your answer if "No," complete blocks B and C below.  BLOCK A: TELEVISION MARKETS								Computation of	
	1981?	schedule—[ C below.	OO NOT COM	PLETE THE REM	AINDER OF I	PART 6 AND 7	·	gulations in	3.75 Fee
		BLOC	JK B: CARR	IAGE OF PERI	WILLIED DS	⊳ES			+
Column 1: CALL SIGN  Column 2: BASIS OF PERMITTED CARRIAGE	under FCC rules instructions for the Satellite Television Enter the approper (Note the FCC rules Stations carria 76.61(b)(c)]  B. Specialty station C. Noncommerical C. Noncommerical Grandfatherecinstructions for E. Carried pursuants F. A station presents of the Station presents instruction for E. Carried pursuants for the Station presents instruction for E. Carried pursuants for the Station presents for the Station pr	and regulation of the post of	ons prior to Ju dule. (Note: Ti and Localism dicating the ba diations cited b to the FCC ma d in 76.5(kk) (7 all station [76.5 65) (see parag dule). ual waiver of F ed on a part-tir vithin grade-B	asis on which you delow pertain to the arket quota rules [76.59(d)(1), 76.61(9(c), 76.61(d), 76. graph regarding suffect (76.7) the or substitute be contour, [76.59(d))	urther explanarefers to an excarried a permose in effect of 6.57, 76.59(b) (e)(1), 76.63(a) referring the stitution of goasis prior to June 19.50 asis prior to June 19.50	ation of permittivempt multicas mitted station. In June 24, 198 I), 76.61(b)(c), In preferring to 7 g to 76.61(d)] irandfathered s	ed stations, see the stream as set for the s	he rith in the	
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 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	
	•								
						1		0.00	
			אן טכא כי ככ	MPUTATION O	E 2 75 EEE				1
Line 1: Enter the	total number of				r 3.73 FEE				
Line 2: Enter the	sum of permitte	ed DSEs from	m block B ab	ove					
Line 3: Subtract (If zero, le				r of DSEs subject t 7 of this schedu		rate.			
Line 4: Enter gro	ess receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ine 4 by 0.0375	and enter si	um here				<u>, x</u>		permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	: 3	311111111111111111111111111111111111111					carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	ce L (page 7)	)		0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name NORTHLAND CABLE TELEVISION, INC (GREENWOOD) 032909 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 Worksheet for 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 identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 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. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE PERIOD CARRIAGE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . x No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

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)	564,792.10	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the 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 defned 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 E is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	DSE	
	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		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the E 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)	OSE	
	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		

ACCOUNTING PERIOD: 2023/1

			ULE. PAGE 16.
Name		ME OF OWNER OF CABLE SYSTEM:  NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	032909
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 Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
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	
Computation of Base Rate Fee	You mi 6 was In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.  book A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  but answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below.  but answer is "Yes" (that is, if you carried one or more partial	w
		DI COLLA CARRIAGE OF PARTIALLY PICTANT CTATIONS	
	• Did y	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS  our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	5047004	•
		Enter the amount of gross receipts from space K (page 7) ▶ \$ 564,792.1	<u>U</u>
	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 <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts (the amount in section 1).	
		and in block 3, line 1, space L (page 7)  Base Rate Fee	<u>-</u>
	l		

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2023/1

LEGAL N	IAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	
NOR	THLAND CABLE TELEVISION, INC (GREENWOOD) 032909	Name
Section 4	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	_
4	A. Enter 0.01064 of gross receipts  (the amount in section 1)	8
	B. Enter 0.00701 of gross receipts  (the amount in section 1) \$	Computation of
	C. Multiply line B by 3.000 and enter here <b>&gt;</b> \$	Base Rate Fee
	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 <b>&gt;</b>	
	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	
shall in	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals astead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-Space G.	9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must:	of Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	and Syndicated Exclusivity Surcharge for
must a	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. ver, if your cable system is wholly located outside all major television markets, complete block A only.	Partially Distant Stations, and
Step 1	b Identify a Subscriber Group for Partially Distant Stations : For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	for Partially Permitted Stations
outside	:: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by me token, the station is distant to the subscriber.)	
subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable in will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
subscr	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.	
Identi     Give	n section:  ify the communities/areas represented by each subscriber group.  the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the ibers in the group.	
• If:		
and 4	r system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
, ,	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, t 6 of this schedule.	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
• Calcu	alate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions.	
page. DSEs t	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show ctual calculations on the form.	

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.

LEGAL NAME OF OWNE			GREENW	/OOD)			932909	Name
Bl	OCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	UP	•
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
								Distant
								Stations
	<b></b>							
	<b> </b>							
	•							
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
,		·				<u>·</u>		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<b>.</b>					,		
	<b></b>							
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
		_				-		
Base Rate Fee: Add th	e hase rat	e fees for each subsc	riber aroun	as shown in the hoves	ahove		<del></del>	
Enter here and in block			mber group	as snown in the boxes	above.	\$	0.00	

						-		
BLOCK A	A: COMPUTATION	OF BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP			
FIR	ST SUBSCRIBER G	ROUP		SECOND	SUBSCRIBER GRO	UP		
MUNITY/ AREA		0	COMMUNITY/ ARE	Α		0		
LL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
_								
DSEs		0.00	Total DSEs	Total DSEs				
s Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
THII	RD SLIBSCRIBER G	SULIB		FOLIRTH	I SUBSCRIBER GRO	NI ID		
	RD SUBSCRIBER G		COMMUNITY/ ARE		SUBSCRIBER GRO	OUP 0		
	RD SUBSCRIBER G	ROUP 0	COMMUNITY/ ARE		SUBSCRIBER GRO			
MUNITY/ AREA			COMMUNITY/ ARE		SUBSCRIBER GRO			
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA		0		A		0		
MUNITY/ AREA  LL SIGN DSE  DSE  DSEs		DSE  DSE	Total DSEs	DSE	CALL SIGN	DSE		
MUNITY/ AREA  LL SIGN DSE		DSE	CALL SIGN	DSE		DSE		
MUNITY/ AREA  LL SIGN DSE  DSEs  Receipts Third Group	CALL SIGN	0.00 0.00	Total DSEs Gross Receipts Fou	DSE	CALL SIGN	0 DSE		
MUNITY/ AREA  LL SIGN DSE  DSE  DSEs		DSE  DSE	Total DSEs	DSE	CALL SIGN	DSE		
L SIGN DSE  L SIGN DSE  DSEs  Receipts Third Group	CALL SIGN	0.00 0.00	Total DSEs Gross Receipts Fou	DSE	CALL SIGN	0 DSE		
SIGN DSE SIGN DSE	CALL SIGN	0.00 0.00	Total DSEs Gross Receipts Fou	Tth Group	CALL SIGN	0 DSE		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	NORTHLAND CABLE TELEVISION, INC (GREENWOOD)	032909
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and the 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 tolovision market	Second 50 major television market
OT Base Rate Fee	☐ First 50 major television market  INSTRUCTIONS:	Second 50 major television market
and	Step 1: In line 1, give the total DSEs by subscriber group for commercial	al VHF Grade B contour stations listed in block A, part 9 o
Syndicated Exclusivity Surcharge	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	
for Partially Distant Stations	<ul> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of</li> <li>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.</li> </ul>	rmula outlined in block D, section 3 or 4 of part 7 of this
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 4. Entrolle VIIIE DOEs	Line 4. February VIII DOF-
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF 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 ear in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	

LEGAL NAME OF OWNER OF CABLE SYSTEM:		SYS	STEM ID#
Northland Cable Television, Inc			32909 Name
CITY OR TOWN	STATE		First
Greenwood	SC		Community
Clocimoda	00		
Line 1. ROYALTY FEE FROM SPACE L			
		\$ 6,0	009.39 Total
Line 2. FILING FEE		7	<b>'25.00</b> Fee
Line 3. TOTAL ROYALTY AND FILING FEES PAYABLE FOR	ACCOUNTING PERIOD		
Add lines 1 and 2 and enter here		\$ 6,7	<b>'34.39</b>
Effective January 1, 2014, purposent to the Catallite Tolevisian Ex	stension and Localism Act o	f 2010 (STELA) which groates	
Effective January 1, 2014, pursuant to the Satellite Television Extension and Localism Act of 2010 (STELA), which granted authority to the Copyright Office to establish fees for the filing of statements of account (SOAs) under the section 111, 119, and			
122 statutory licenses, the Office now assesses filing fees for ALL SOAs for current, past and future accounting periods. For details, see the Federal Register, November 29, 2013 (78 FR 71498). Please be advised that the filing fee is deducted before the royalty payment is credited; thus the omission of the appropriate filing fee will result in an underpayment of royalty fees. Please			