## **THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011** If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

DATE RECEIVED

8/28/23

STATEMENT OF ACCOUNT

for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are at the end of this form [pages (i)-(vii)]. FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

## SA1-2 Short Form

Return to: Library of Congress

Copyright Office Licensing Division 101 Independence Ave. SE

101 Independence Ave. SE Washington, DC 20557-6400 (202) 707-8150

For courier deliveries, see page ii of the general instructions

Α ACCOUNTING PERIOD COVERED BY THIS STATEMENT: January 1-June 30, 2023 Accounting Period Instructions: Your file has been established under the information given below. If there are any changes, draw a line through the В incorrect information and print or type the correct information beside it. Owner Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit single statement of account and royalty fee payment covering the entire accounting period. 003833 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 Cable Television, Inc (SENECA) \*00383320231\* 003833 2023/1 **4 International Drive** Rye Brook, NY 10573 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these С names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: System 1 Northland Cable Television MAILING ADDRESS OF CABLE SYSTEM: 615 N PINE STREET 2 (Number, street, rural route, apartm nent. or suite number) SENECA, SC 29679 Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entitiy (including unincorporated commuinites within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that list will serve as a form of system identification hereafter known 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, condiminiums, or mobile home parks should be reported in paratheses below the identified city. CITY OR TOWN STATE CITY OR TOWN STATE SENECA NORRIS SC SC First Community ANDERSON COUNTY (UNINC) **OCONEE CTY (UNINC WALHALLA** SC SC **OCONEE COUNTY (UNINC SENEC FIVE POINTS (UNINC OCONEE** SC SC SC CENTRAL PENDLETON SC LIBERTY SC PICKENS SC CLEMSON SC PICKENS COUNTY (UNINC) SC 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 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.

Form SA1-2c Rev 04/2011

PRIVATELY REPRODUCED NON-GOVERNMENT FORM (TBMJ123)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:							
Name	Northland Cable Television, Ir	c (SENECA)		0038				
	CITY OR TOWN	STATE	CITY OR TOWN	STATE				
	SIX MILE	SIG	CIT OKTOWN	OIALE				
D	WALHALLA	SC						
ontinued)	WEST UNION	SC						
	WESTMINSTER							
Area Served	WESTMINSTER	SC						
berveu								

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:										TEM IC
	Northland Cable Televis	sion, Inc (S	ENEC	<b>A</b> )							00383
Е	SECONDARY TRANSMISSION										
E	In General: The information in s	•		Ũ							
Secondary	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the										
Transmission	last day of the accounting period								ing on the		
Service: Sub-	,	·		,	,	,	cable	system	, broken		
scribers and	<b>Number of Subscribers:</b> Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in										
Rates	each category by counting the n								charged		
	separately for the particular serv					•					
	Rate: Give the standard rate of unit in which it is generally billed										
	category, but do not include disc				iy stanua	iru rate variati	JIS W	unin a		ale	
	Block 1: In the left-hand block				ies of sec	condary transr	nissio	n servi	ce that cat	ole	
	systems most commonly provide	•		•							
	that applies to your system. Not	e: Where an ir	ndividua	l or organizatior	ı is receiv	ving service th	at fall	s undei	different		
	categories, that person or entity					•		•		tial	
	subscriber who pays extra for ca					d in the count	unde	"Servi	ce 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, t	0		,							
	with the number of subscribers a										
	sufficient.		-				-				
	BLC	DCK 1 NO. OF					E	SLOCK			
		DATE	047				NO.				
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF S	ERVI	Æ	SUBSCF	RIBERS	RAT
	Residential:		4 4 2 4	05.00							
	Service to first set		1,431	25.00							
	Service to additional set(s)										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		542	70.70							
	Converter										
	Residential										
	<ul> <li>Non-residential</li> </ul>										
	Non-residential     SERVICES OTHER THAN SEC     In General: Space F calls for rai					Ill your cable s	systen	n's serv	rices that v	vere	
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Name		LEGAL NAME OF OW	NER OF CABLE SYS	TEM:	SYSTEM II				
Name		: (SENECA)	00383						
	PRIMARY TRANSMITTERS: TELEVISION								
•	In General: In space G, identify ev	very television station (inc	luding translator sta	ations and low power television stations)					
G				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								
Primary ransmitters:	76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis as evaluated in the part part as the program basis.								
Television	substitute program basis, as explained in the next paragraph Substitute Basis Stations: With respect to any distant stations carried by your cable system on a subst								
	basis under specific FCC rules, regulations, or authorizations:								
	<ul> <li>Do not list the station here in spa</li> </ul>		· ·	atement and Program Log)—if the					
	List the station have and also in	station was carried o							
	• List the station here, and also in			ubstitute basis and also on some othe g substitute basis stations, see page (v) of the	e general instructions				
				Do not report origination program services su	0				
		Column 2: Give the	number of the char	nnel on which the station's broadcasts are car	ried in its own commu				
	-	•		station. Identify each multicast strean					
		g to its over-thje-air desigi	nation. For exampl	e, report multicast stream "WETA-2" as					
	the same on the form.	Column 3: Indicate i	n each case wheth	er the station is a network station, an indepen	ndent station, or a nor				
	educational station, by entering the			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 (iv) of the general instructions								
	FCC For Maximum or Considion at			ation. For U.S. stations, list the community to	which the station is lic				
	FCC. FOI MEXICAN OF Canadian sta	allons, il any, give life nan		y with which the station is identifed					
		O DIOLOT							
	1. CALL SIGN	2. B'CAST	3. TYPE	6. LOCATION OF STATION					
	1. CALL SIGN	CHANNEL	OF	6. LOCATION OF STATION					
		CHANNEL NUMBER	-						
	WGGS-IND	CHANNEL NUMBER 16.1	OF STATION	Greenville SC					
	WGGS-IND WHNS-Bounce .4	CHANNEL NUMBER 16.1 21.4	OF STATION I I-M	Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2	CHANNEL NUMBER 16.1 21.4 21.2	OF STATION I I-M I-M	Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery	CHANNEL NUMBER 16.1 21.4 21.2 21.3	OF STATION I-M I-M I-M	Greenville SC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1	OF STATION I-M I-M I-M I-M	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1	OF STATION I-M I-M I-M I-M I-M	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VOD	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1	OF STATION I-M I-M I-M I-M I-M I-M	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX WHNS-FOX HD WHNS-FOX VOD WHNS-Grit .5	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.5	OF STATION I-M I-M I-M I-M I-M I-M I-M	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX WHNS-FOX HD WHNS-FOX VOD WHNS-Grit .5 WLOS - ABC	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.5 13.1	OF STATION I-M I-M I-M I-M I-M I-M I-M N-M	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX WHNS-FOX VOD WHNS-FOX VOD WHNS-Grit .5 WLOS - ABC WLOS - ABC HD	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.5 13.1 13.1	OF STATION I I-M I-M I-M I-M I-M I-M N-M N-M	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX WHNS-FOX VOD WHNS-GVI .5 WLOS - ABC WLOS - ABC HD WLOS - Antenna TV	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.5 13.1 13.1 13.3	OF STATION I I-M I-M I-M I-M I-M I-M N-M N-M I-M	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC					
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	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VOD WHNS-GRIT .5 WLOS - ABC WLOS - ABC WLOS - ABC HD WLOS - Stadium WLOS-DT2 MNT	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.5 13.1 13.1 13.3 13.4 13.2	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VOD WHNS-Grit .5 WLOS - ABC WLOS - ABC WLOS - ABC HD WLOS - Antenna TV WLOS - Stadium WLOS-DT2 MNT WLOS-DT2 MNT HD	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.1 21.5 13.1 13.1 13.3 13.4 13.2 13.2	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC					
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	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VOD WHNS-Grit .5 WLOS - ABC WLOS - ABC WLOS - ABC HD WLOS - Antenna TV WLOS - Stadium WLOS-DT2 MNT WLOS-DT2 MNT HD WMYA-DABL WNTV-ETV World .3	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.1 21.1	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VDD WHNS-Grit .5 WLOS - ABC WLOS - ABC WLOS - ABC HD WLOS - Antenna TV WLOS - Stadium WLOS-DT2 MNT WLOS-DT2 MNT HD WMYA-DABL WNTV-ETV World .3 WNTV-PBS	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.1 21.1	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VDD WHNS-Grit .5 WLOS - ABC WLOS - ABC WLOS - ABC HD WLOS - Antenna TV WLOS - Stadium WLOS-DT2 MNT WLOS-DT2 MNT WLOS-DT2 MNT HD WMYA-DABL WNTV-ETV World .3 WNTV-PBS	CHANNEL NUMBER           16.1           21.4           21.2           21.3           21.1           13.2           40.1           29.3           29.1           29.1	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Greenville SC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VDD WHNS-Grit .5 WLOS - ABC WLOS - ABC WLOS - ABC HD WLOS - Antenna TV WLOS - Stadium WLOS-DT2 MNT WLOS-DT2 MNT HD WMYA-DABL WNTV-ETV World .3 WNTV-PBS	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.1 21.1	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VDD WHNS-Grit .5 WLOS - ABC WLOS - ABC WLOS - ABC HD WLOS - Antenna TV WLOS - Stadium WLOS-DT2 MNT WLOS-DT2 MNT WLOS-DT2 MNT HD WMYA-DABL WNTV-ETV World .3 WNTV-PBS	CHANNEL NUMBER           16.1           21.4           21.2           21.3           21.1           13.2           40.1           29.3           29.1           29.1	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Greenville SC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VOD WHNS-Grit .5 WLOS - ABC WLOS - ABC WLOS - ABC HD WLOS - ABC HD WLOS - ABC HD WLOS - Stadium WLOS-DT2 MNT WLOS-DT2 MNT WLO	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.5 13.1 13.1 13.3 13.4 13.2 13.2 13.2 40.1 29.3 29.1 29.1 29.4	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Greenville SC Greenville SC Greenville SC Greenville SC					
	WGGS-IND WHNS-Bounce .4 WHNS-Cozi .2 WHNS-DT3 Ion Mystery WHNS-FOX WHNS-FOX HD WHNS-FOX VOD WHNS-GRIT .5 WLOS - ABC WLOS - ABC HD WLOS - ABC HD WLOS - AABC HD WLOS - Stadium WLOS-DT2 MNT WLOS-DT2 MNT WLOS-DT2 MNT HD WMYA-DABL WNTV-ETV World .3 WNTV-PBS WNTV-PBS HD WNTV-PBS Kids .4	CHANNEL NUMBER 16.1 21.4 21.2 21.3 21.1 21.1 21.1 21.1 21.5 13.1 13.1 13.3 13.4 13.2 13.2 40.1 29.3 29.1 29.1 29.4 29.2	OF STATION I I-M I-M I-M I-M I-M I-M I-M I-M I-M I	Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Asheville NC Greenville SC Greenville SC Greenville SC Greenville SC Greenville SC					

		LEGAL NAME OF OW	NER OF CABLE SYS	TEM:	FORM SA1-2. PAGE SYSTEM I				
Name		Northland Cable	Television, Ind	: (SENECA)	0038				
	PRIMARY TRANSMITTERS: TELEVISION								
G	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections]								
Primary ransmitters: Television		), or 76.63 (referring I in the next paragrap	to 76.61(e)(2) and ( h	(4))]; and (2) certain stations carried on a control of the control of the carried by your cable	system on a substitut				
	<ul><li>basis under specifc FCC rules, regulat</li><li>Do not list the station here in space C</li></ul>		ce I (the Special St						
	• List the station here, and also in space			ubstitute basis and also on some othe					
	This way be different from the shares	Column 1: List each Column 2: Give the	station's call sign. number of the char	g substitute basis stations, see page (v) of the Do not report origination program services suc nel on which the station's broadcasts are carr otetica. Identify each multicest threat	h as HBO, ESPN, et				
		its over-thje-air desig	nation. For exampl	station. Identify each multicast strean e, report multicast stream "WETA-2" as	dent station are nor				
	educational station, by entering the let (for independent multicast), "E" (for no For the meaning of these terms, see p	ter "N" (for network), ' ncommercial education age (iv) of the genera	"N-M" (for network i onal), or "E-M" (for i il instructions	noncommercial educational multicast)	,				
	<b>Column 4:</b> Give the location of each station. For U.S. stations, list the community to which the station FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed								
	1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	6. LOCATION OF STATION					
	WUNF-PBS	NUMBER 33.1	STATION	Asheville NC					
	WYCW-CW	62.1	I-M	Asheville NC					
	WYCW-CW HD	62.1	I-M	Asheville NC					
	WYCW-Rewind TV	62.3	I-M	Asheville NC					
	WYFF MeTV .2	4.2	I-M	Greenville SC					
	WYFF-NBC	4.1	N-M	Greenville SC					
	WYFF-NBC HD	4.1	N-M	Greenville SC					
			1						

## ACCOUNTING PERIOD: 2023/1

ORM SA1-2. F	PAGE 4. F OWNER OF (		(STEM-					OVOTEM ID#	NI
			nc (SENECA)					SYSTEM ID# 003833	Name
General: List I-band basis w becial Instruct ceivable if (1) in the basis of r or detailed info Column 1: Id Column 2: S Column 3: If gnal, indicate the Column 4: G	ARY TRANSMITTERS: RADIO heral: List every radio station carried on a separate and discrete basis and list those FM stations carried on an hd basis whose signals were "generally receivable" by your cable system during the accounting period. al Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally able if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. tailed information about the the Copyright Office regulations on this point, see page (v) of the general instructions. umn 1: Identify the call sign of each station carried. umn 2: State whether the station is AM or FM. umn 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete indicate this by placing a check mark in the "S/D" column. umn 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of						H Primary Transmitters Radio		
exican or Can	adian stations	s, if any, t	he community with which the	es	station is identifie	d).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	Γ	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
				1					
		+							
				1					
				1					
				ł					

FORM SA1-2. PAGE 5.

	LEGAL NAME OF OWNER OF	CABLE SYS	TEM					SYSTEM ID#
Name	Northland Cable Telev						`	003833
I	SUBSTITUTE CARRIAGE	fy every no	nnetwork televi	sion program broadcast by	a distant sta			
Substitute	substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a furthe explanation of the programming that must be included in this log, see page (v) of the general instructions.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE							For a lutther
Carriage:								
Special Statement and	<ul> <li>During the accounting per</li> </ul>	•	ur cable syster	m carry, on a substitute ba	asis, any noi	nnetwork televi	sion progra	ım
Program Log	broadcast by a distant sta							XNo
	Note: If your answer is "No log in block 2.	", leave the	e rest of this pa	ige blank. If your answer i	is "Yes," you	must complete	e the progra	am
	2. LOG OF SUBSTITUTE		AMS					
	In General: List each subs				is wherever	possible, if the	ir meaning	is
	clear. If you need more spa Column 1: Give the title			vision program (substitute	e program) tl	nat, during the	accounting	
	period, was broadcast by a	distant sta	tion and that y	our cable system substitu	ited for the p	rogramming of	f another st	ation
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.	Bulls."				1 /	,	
				er "Yes." Otherwise enter asting the substitute prog				
	Column 4: Give the broa	adcast stati	on's location (	the community to which the	ne station is		e FCC or, ir	ı
	the case of Mexican or Car			community with which th stem carried the substitut			with the m	onth
	first. Example: for May 7 give		when your sy		e program.	JSE Humerais,		Jinin
				ogram was carried by you				ely
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example:	a program car	ried by a system from 6:0	1:15 p.m. to	6:28:30 p.m. s	noula be	
	Column 7: Enter the lett			n was substituted for proc				ed
	to delete under FCC rules a gram was substituted for pr							1
	effect on October 19, 1976.		g				guiadone il	
					WH	EN SUBSTIT	UTE	
	SI	JBSTITUT	E PROGRAM		CAR	RIAGE OCCU		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		NES TO	
						_		
					]	_		
						_		
						_		
						<b></b>		
						<u> </u>		
						_		
					]	_		

FORM SA1-2.	PAGE 6.	•
	LEGAL NAME OF OWNER OF CABLE SYSTEM:     SYSTE       Northland Cable Television, Inc (SENECA)     00	M ID# 03833 <sup>Name</sup>
	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.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	
Instructions	T ROYALTY FEE : 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 \$263,800 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 of the general instructions for more information.	L Copyright Royalty Fee
	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 this six-mon accounting period is \$52.00 Line 1. Royalty fee for accounting period	
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	
	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	.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 \$ 348,146.00	
	2. Base amount under statutory formula	
	3. Subtract line 2 from line 1 \$ 84,346.00	
	4. Multiply line 3 by .01	
	5. Royalty due on the first \$263,800 of gross recepits (under statutory formula) \$ 1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 2,162	.46
	FILING FEE AND TOTAL REMITTANCE DUE	·
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)       \$ 2,162         2. Filing Fee (See the instructions for more information on filing fee calculations)       \$ 20	.46
		82.46
	EFT Trace # or TRANSACTION ID # Not Available	
	See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.	

		FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Northland Cable Television, Inc (SENECA)	SYSTEM ID# 003833
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast state to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	ations
Chaimeis	1. Enter the total number of channels on which the cable system carried television broadcast stations	29
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	150
N Individual to Be Contacted	<b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> : (Identify an individual to whom we can write or call about this statement of account.)	
for Further Information	Name Marie Censoplano Telephone 9	14-235-8313
	Address 4 International DF Suffee 330 (Number, street, rural route, apartment, or suite number) Rye Brook, NY 10573 (City, town, state, zip)	
	Email (optional) marie.censoplano@vyvebb.com Fax (optional) 914-234-8363	
O Certifcation	<ul> <li>CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulat as explained in the general instructions.)</li> <li>I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)</li> </ul>	
	<ul> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B;</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or</li> </ul>	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owned in line 1 of space B.	er of the cable system
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained 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)]	herein
	Handwritten signature: /s/ Daniel J White	
	Typed or printed name: <b>Daniel J White</b>	
	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 sufficiency of the fling, a determination that would be made by a court of law.

FORM SA1-2. PAGE 8.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
Northland Cable Television, Inc (SENECA)	003833	Name
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright A lowing sentence:         <ul> <li>"In determining the total number of subscribers and the gross amounts paid to the cable s service of providing secondary transmissions of primary broadcast transmitters, the system scribers and amounts collected from subscribers receiving secondary transmissions pursu.</li> </ul> </li> <li>For more information on when to exclude these amounts, see the note on page (vii) of the generation of the accounting period did the cable system exclude any amounts of gross receipts for seemade by satellite carriers to satellite dish owners?</li> <li>NO</li> </ul>	ystem for the basic m shall not include sub- uant to section 119." al instructions.	P Special Statement Concerning Gross Receipts Exclusion
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 payr For an explanation of interest assessment, see page (viii) of the general instructions.	nent or underpayment.	Q
Line 1 Enter the amount of late payment or underpayment	x	Interest Assessment
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** enter here and on line 3, block 4, space L, (page 7)	- (interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For fur contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	ther assistance 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 C list below the owner, address, first community served, ID number, and accounting period as given		
Owner Address		
ID number First community served Accounting period		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the person	ally identifying information (PII) requested	l on th

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