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

## SA1-2E Short Form

STATEMENT OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instructions are located in the first tab of this workbook	08/27/2018	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

A	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2018/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		Barcode Data Filing Period (optional - see instructions)	
Period			
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.	
Owner		List any other name or names under which the owner conducts the business of the cable system.	
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.	
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		Zito Media LP	
	-	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		Zito Media	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		PO Box 665 (Number, street, rural route, apartment, or suite number)	
		Coudersport, PA 16915 (City, town, state, zip)	
С		<b>RUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these as already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
	-	Zito Media - Wilcox	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Zito Media LP	1859
D	Instructions: List each separate community served by the cable system. A "c "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future f	rated communities within unincorporated areas and including single, at you list will serve as a form of system identification hereafter known
Area	Note: Entities and properties such as hotels, apartments, condominiums, or	mobile home parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	07475
First	Jones Township	STATE PA
Community		
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ARI E SYSTEM						FORM SA1	TEM I
Name	Zito Media LP	ADEL OTOTENI.						010	18
Е	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission	pace E should on of television	cover all and radio	categories of s broadcasts by	econdary / your sys	stem to subscrib	oers. Give	information	
Secondary Transmission	about other services (including p last day of the accounting period						hose existi	ng on the	
Service: Sub-	Number of Subscribers: Both	h blocks in spac	ce E call	for the number	of subsc	ribers to the cat			
scribers and Rates	down by categories of secondary each category by counting the n								
Nates	separately for the particular serv	ice at the rate i	ndicated-	-not the numb	er of sets	s receiving serv	ice).	-	
	Rate: Give the standard rate c								
	unit in which it is generally billed category, but do not include disc				y stanuar		s within a p		
	Block 1: In the left-hand block								
	systems most commonly provide that applies to your system. Note								
	categories, that person or entity								
	subscriber who pays extra for ca					in the count un	der "Servic	e to the	
	first set" and would be counted of Block 2: If your cable system I					service that are	different fr	rom those	
	printed in block 1 (for example, t	iers of services	that inclu	ude one or mor	e second	ary transmissio	ons), list the	em, together	
	with the number of subscribers a sufficient.	and rates, in the	e right-ha	nd block. A two	o- or three	e-word descripti	on of the s	ervice is	
		OCK 1					BLOCK	< 2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RA
	Residential:								
	Service to first set		89	17.55					
	<ul> <li>Service to additional set(s)</li> </ul>								
	• FM radio (if separate rate)								
	Motel, hotel Commercial								
	Converter								
	Residential								
	Non-residential								
_	SERVICES OTHER THAN SEC In General: Space F calls for rat	-			pect to all	l your cable sys	tem's servi	ces that were	
F	not covered in space E, that is, the	hose services t	hat are n	ot offered in co	mbinatio	n with any seco	ndary tran	smission	
Services	service for a single fee. There ar furnished at cost or (2) services						• • • •		
Other Than	amount of the charge and the un	nit in which it is							
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rat		he cable	system for eac	h of the s	annlicable servic	has listed		
Rates	Block 2: List any services that							were not	
	listed in block 1 and for which a s brief (two- or three-word) descrip				ned. List	these other serv	vices in the	form of a	
	bhei (two- of three-word) descrip								
	CATEGORY OF SERVICE	BLO RATE		DRY OF SERV		RATE	CATEG	BLOCK 2 ORY OF SERVICE	RA
	Continuing Services:	TUTE		ion: Non-resid		TUTE	0/(TEO		101
	• Pay cable	17.50	• Mote	l, hotel					
	Pay cable—add'l channel			mercial					ļ
	Fire protection		• Pay						
	•Burglar protection Installation: Residential			cable-add'l cha	nnel				
				protection lar protection					
		50.00	urg						
	First set     Additional set(s)	50.00	Other se	ervices:					
	First set	50.00		ervices:		30.00			
	<ul><li>First set</li><li>Additional set(s)</li></ul>	50.00	• Reco			30.00			
	<ul> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>	50.00	Reco     Disco     Outle	onnect		30.00 30.00 30.00			

unting Period: 2	2018/1			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
	Zito Media LP			1859
<b>G</b> Primary ransmitters: Television	PRIMARY TRANSMITTERS: In General: In space G, ide carried by your cable syster FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations: basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, WI Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te	ntify every television station (including in during the accounting period, <i>except</i> in effect on June 24, 1981, permitting the b)(2) and (4), or 76.63 (referring to 76.63 is explained in the next paragraph. With respect to any distant stations ca les, regulations, or authorizations: in space G—but do list it in space I (the a substitute basis. also in space I, if the station was carrier in concerning substitute basis stations, i's call sign. <i>Do not</i> report origination p with a station according to its over-the	t (1) stations carried only on a part-time carriage of certain network program (1(e)(2) and (4))]; and (2) certain station arried by your cable system on a substitute basis and also see page (v) of the general instruction or ogram services such as HBO, ESPP e-air designation. For example, report evision station for broadcasting over the station, an independent station, or a function of the general education (for network multicast), "I" (for independent or "E-M" (for noncommercial education uctions in the paper SA1-2 form.	evision stations) ne basis under ns [sections ons carried on a stitute program og)—if the on some other ons. N, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast).
		2. B'CAST CHANNEL NUMBER	,	5
	WJAC	6.1	<u>N</u>	Johnstown PA
	WPSU	3	E	State College PA
s Necessary	WPSU	3.1	E	State College PA
	WATM	23	N	Altoona PA
	WATM	23.1	N .	Altoona PA
	WATM	23.3	 	Altoona PA
	WATM	23.4	<u>N</u>	Johnstown PA
	WWCP	8	N	Johnstown PA
	WWCP	8.1	<u>N</u>	Johnstown PA
	WTAJ	10	N	Altoona PA
	WTAJ	10.1	N	Altoona PA
	WPCW	19.1		Jeannette PA

			(STEM <sup>.</sup>					I SA1-2E. PAGE
Zito Media L								3131EM II 18
	•							10
PRIMARY TRA	NSMITTERS	RADIO						<b>-</b> -
			arried on a separate and discr nerally receivable by your cat					Н
	-	-	I-Band FM Carriage: Under (			-		Primary
			stem whenever it is received a					Transmitters
			ved at the headend, with the					Radio
or detailed into		it the Co	pyright Office regulations on	this point, see pa	ge (v) of the g	eneral i	nstructions in the.	
•		sign of e	each station carried.					
			on is AM or FM.	ad by the cable of	wetom as a s	oparato	and discrete	
		-	nal was electronically process k mark in the "S/D" column.	sed by the cable s	system as a se	eparate		
Column 4: O	Give the station	n's locati	on (the community to which th			C or, in	the case of	
lexican or Can	adian stations	s, if any,	the community with which the	station is identifi	ed).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	od: 2018/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	Zito Media LP							1859
	SUBSTITUTE CARRIAGI				G			
	In General: In space I, identi		-		-	ion that your ca	able svste	m carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN			TITUTE CARRIAGE				
Special	During the accounting per				s, any nonnet	twork televisior	n program	ı
Statement and	broadcast by a distant star	-					YES	X NO
Program Log	,				0.4 11		-	
	Note: If your answer is "No'	, leave the	rest of this pag	e blank. If your answer is	'Yes," you mu	ist complete th	ie progran	n
	log in block 2.							
	2. LOG OF SUBSTITUTE In General: List each subst			to line. Lice abbroviations	whorovor pos	sible if their m	ooning is	
	clear. If you need more spa				wherever pos		leaning is	
				sion program ("substitute	orogram") tha	t, during the ac	ccounting	
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor	gulations, o	r authorizations	s. See page (v) of the gene	eral instruction	ns for further in	nformation	1.
	"NBA Basketball: 76ers vs.		vies of Daske	tball. List specific program	Tulles, for exa	ample, I Love	Lucy of	
			dcast live, enter	r "Yes." Otherwise enter "N	lo."			
				sting the substitute progra				
				e community to which the			CC or, in	
	the case of Mexican or Can Column 5: Give the mon			tem carried the substitute			h the mon	ith
	first. Example: for May 7 giv		when your byb			numerale, wit		
	Column 6: State the time	es when the		gram was carried by your				У
	to the nearest five minutes.	Example: a	program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. shou	uld be	
	stated as "6:00–6:30 p.m."	or "P" if the	listed program	was substituted for progra	mming that y	our evetem wa	s roquiro	d
	to delete under FCC rules a							
	was substituted for program							
	effect on October 19, 1976.							
						N SUBSTITU	ITE	
	s	UBSTITUT	E PROGRAM	1		AGE OCCUR		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIME	ES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	TO	
						_		
						_		
						_		
						_		
						_		
						_		
						_		
						_		

Accounting Period:	2018/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Zito Media LP	SI	/STEM ID# 1859
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. If all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	mission service s amount, see	e ,032.01
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> 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 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	this six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	\$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,	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		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527	(,600)	
	1. Enter the amount of gross receipts from space K	·	
	2. Base amount under statutory formula		
	2. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1 319 00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8		
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!

Accounting Period:	2018/1		FORM SA1-2E. PAGE 7
Name	LEGAL NAME C Zito Media L	OF OWNER OF CABLE SYSTEM: LP	SYSTEM ID 1859
<b>M</b> Channels	<ol> <li>to its subscrib</li> <li>1. Enter the to system carr</li> <li>2. Enter the to on which the</li> </ol>	You must give (1) the number of channels on which the cable system carried television broadcast stations bers, and (2) the cable system's total number of activated channels during the accounting period. total number of channels on which the cable ried television broadcast stations total number of activated channels total number of activated stations	12 187
N Individual to Be Contacted		TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom act about this statement of account.)	
for Further Information	Name	Teri McMullen Telephone	814-260-0434
	Address	PO Box 665 (Number, street, rural route, apartment, or suite number)	
		Coudersport PA 16915 (City, town, state, zip)	
	Email	teri.mcmullen@zitomedia.com Fax (optional)	
O Certification	I, the undersi      (Ov     (Ag     X     (O      I have exami are true, comp	ON (This statement of account must be certified and signed in accordance with Copyright Office regulations)         signed, hereby certify that (Check one, but only one, of the boxes.)         wner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B;         gent 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         Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner in line 1 of space B.         sined the statement of account and hereby declare under penalty of law that all statements of fact contained herein plete, and correct to the best of my knowledge, information, and belief, and are made in good faith.         ection 1001(1986)]         X       /s/James Rigas         Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)         Typed or printed name:       James Rigas	stem as identified
		Typed or printed name: James Rigas Title: President	
		(Title of official position held in corporation or partnership)	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on 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 telephoi 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 search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in t 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 lay

unting Period: 2018/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
Media LP	185
<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 Act by adding the following sentence:         <ul> <li>"In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."</li> </ul> </li> <li>For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.</li> <li>During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?</li> <li>X NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below</li></ul>	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	

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