

This form is effective beginning with the July 1 to December 30, 2025, accounting period (2025/2).
 If you are filing for a prior accounting period, contact the Licensing Section for the correct form.

**SA1-2E
 Short Form**

STATEMENT OF ACCOUNT
*for Secondary Transmissions by
 Cable Systems (Short Form)*

General instructions are located
 in the first tab of this workbook.

FOR COPYRIGHT OFFICE USE ONLY	
DATE RECEIVED	AMOUNT
3/18/2026	\$
	ALLOCATION NUMBER

Return completed workbook by
 email to

coplicsoa@copyright.gov

For additional information,
 contact the U.S. Copyright
 Office Licensing Section at
 (202) 707-8150.

Licensing Section
 Digitally signed by Licensing Section
 Date: 2026.04.13 15:40:09 -04'00'

A Accounting Period	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))					
	<table border="0"> <tr> <td><input type="text" value="2025/2"/></td> <td>Period 1 = January 1 - June 30</td> <td>Period 2 = July 1 - December 31</td> </tr> <tr> <td><input type="text"/></td> <td colspan="2">Barcode Data Filing Period (optional - see instructions)</td> </tr> </table>	<input type="text" value="2025/2"/>	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	<input type="text"/>	Barcode Data Filing Period (optional - see instructions)
<input type="text" value="2025/2"/>	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31				
<input type="text"/>	Barcode Data Filing Period (optional - see instructions)					

B Owner	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. 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.
	<input type="checkbox"/> Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Section. <input type="text" value="2588"/>
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM MASSILLON CABLE TV INC
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM PO BOX 1000 <small>(Number, street, rural route, apartment, or suite number)</small> MASSILLON, OH 44648-1000 <small>(City, town, state, zip)</small>

C System	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these 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.
	1 IDENTIFICATION OF CABLE SYSTEM: POWHATAN POINT
	2 MAILING ADDRESS OF CABLE SYSTEM: <small>(Number, street, rural route, apartment, or suite number)</small> <small>(City, town, state, zip code)</small>

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC	SYSTEM ID# 2588
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D

Area Served

Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.

	CITY OR TOWN	COUNTY	STATE
First Community	COLERAIN TWP	BELMONT COUNTY	OH
	YORK TWP	BELMONT COUNTY	OH
	POWHATAN POINT VILLAGE	BELMONT COUNTY	OH
	BARTON		OH
	CRESCENT		OH
	MAYNARD		OH
	BELLAIRE VILLAGE	BELMONT COUNTY	OH
	RICHLAND TWP	BELMONT COUNTY	OH
	PULTNEY TWP	BELMONT COUNTY	OH
	PEASE TWP	BELMONT COUNTY	OH
	SMITH TWP	BELMONT COUNTY	OH
	AMSTERDAM JEFFERSON	COUNTY	OH
	BERGHOLZ JEFFERSON	COUNTY	OH
	SPRINGFIELD JEFFERSON	COUNTY	OH
	LOUDON CARROLL	COUNTY	OH
	VILLAGE OF SALINEVILLE	COLUMBIANA COUNTY	OH
	WASHINGTON TWP	COLUMBIANA COUNTY	OH
	FOX TWP	CARROLL COUNTY	OH
	BRUSH CREEK TWP	TWP JEFFERSON	OH
	WARWOOD		WV
	BEECH BOTTOM		WV
	WINDSOR HEIGHTS	BROOKE COUNTY	WV
	VILLAGE OF WOODSFIELD	MONROE COUNTY	OH
	VILLAGE OF LEWISVILLE	MONROE COUNTY	OH
	CENTER TWP	MONROE COUNTY	OH
	SUMMIT TWP	MONROE COUNTY	OH
	LEE TWP	MONROE COUNTY	OH
	OHIO TWP	MONROE COUNTY	OH
	AUGUSTA TWP	CARROLL COUNTY	OH
	WASHINGTON TWP	CARROLL COUNTY	OH
	ATHENS TWP	HARRISON COUNTY	OH
	FREEPORT TWP	HARRISON COUNTY	OH
	FREEPORT VILLAGE	HARRISON COUNTY	OH
	MOOREFIELD TWP	HARRISON COUNTY	OH
	NEW ATHENS VILLAGE	HARRISON COUNTY	OH
	SOMERSET TWP	BELMONT COUNTY	OH
	UNION TWP	BELMONT COUNTY	OH
	WAYNE TWP	BELMONT COUNTY	OH
	WHEELING TWP	BELMONT COUNTY	OH
	BUFFALO TWP	BROOKE COUNTY	OH
	CLEARVIEW VILLAGE	OHIO COUNTY	WV
	WHEELING CITY	OHIO COUNTY	WV
	WEST LIBERTY TWP	OHIO COUNTY	WV
	WHEELING RICHLAND TWP	OHIO COUNTY	WV
	BEALLSVILLE VILLAGE	MONROE COUNTY	OH
CLARINGTON VILLAGE	MONROE COUNTY	OH	
FRANKLIN TWP	MONROE COUNTY	OH	
JERUSALEM VILLAGE	MONROE COUNTY	OH	
MALAGA TWP	MONROE COUNTY	OH	
SUNSBURY TWP	MONROE COUNTY	OH	
WAYNE TWP	MONROE COUNTY	OH	
WILSON VILLAGE	MONROE COUNTY	OH	
ADAMS TWP	MONROE COUNTY	OH	
GREEN TWP	MONROE COUNTY	OH	
MILTONSBURG VILLAGE	MONROE COUNTY	OH	
SALEM TWP	MONROE COUNTY	OH	
FRANKLIN TWP	COLUMBIANA COUNTY	OH	
SUMMITVILLE	COLUMBIANA COUNTY	OH	
WAYNE TWP	COLUMBIANA COUNTY	OH	
ROSS TWP	JEFFERSON COUNTY	OH	
SALEM TWP	JEFFERSON COUNTY	OH	
WASHINGTON TWP	BELMONT COUNTY	OH	
SENECA TWP	MONROE COUNTY	OH	
WELLSBURG	BROOKE COUNTY	WV	
MARION TWP	NOBLE COUNTY	OH	
SUMMERFIELD VILLAGE	NOBLE COUNTY	OH	
SWITZERLAND TWP	MONROE COUNTY	OH	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC		SYSTEM ID# 2588
D Area Served	<p>Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.</p>		
	CITY OR TOWN CADIZ TWP	COUNTY HARRISON COUNTY	STATE OH

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC	SYSTEM ID# 2588
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G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

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 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 explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific 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 multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC 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.

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 (iv) of the general instructions in the paper SA1-2 form.

Column 4: 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 identified.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WOUB PBS	20.1 - 44.1	E	ATHENS-CAMBRIDGE
WOUB OHIO CH	20.5-44.5	E-M	ATHENS-CAMBRIDGE
WOUB PBS KIDS	20.6-44.6	E-M	ATHENS-CAMBRIDGE
WQED PBS	13.1	E	PITTSBURGH
WQED CREATE	13.2	E-M	PITTSBURGH
WTOV NBC	9.1	N	STEUBENVILLE
WTOV FOX	9.2	N-M	STEUBENVILLE
WTOV Comet	9.3	N-M	STEUBENVILLE
WTRF CBS	7.1	N	STEUBENVILLE-OH-WHEELING WV
WTRF MyNetwork TV	7.2	N-M	STEUBENVILLE OH-WHEELING WV
WTRF ABC	7.3	N-M	STEUBENVILLE-OH-WHEELING WV
WTRF Court TV Myste	7.4	N-M	STEUBENVILLE-OH-WHEELING WV
WOUB Classic	20.2-44.2	E-M	ATHENS-CAMBRIDGE
WOUB PBS World	20.3-44.3	E-M	ATHENS-CAMBRIDGE
WOUB Create	20.4-44.4	E-M	ATHENS-CAMBRIDGE
WQED SHOWCASE	13.4	E-M	PITTSBURGH
WQED WORLD	13.3	E-M	PITTSBURGH
WPGH FOX	53.1	N	PITTSBURGH
WPNT MyNetwork TV	22.1	N	PITTSBURGH
WPGH Antenna TV	53.2	N-M	PITTSBURGH
WPGH CHARGE	53.3	N-M	PITTSBURGH
WNEO PBS	45.1	E	ALLIANCE
WNEO Fusion	45.2	E-M	ALLIANCE
FNX	45.3	E-M	ALLIANCE
WQED PBS Kids	13.5	E-M	PITTSBURGH
WBCB CW	21.2	N-M	YOUNGSTOWN
WYFX MY NETWORK	62.2	N-M	YOUNGSTOWN
WFMJ NBC	21.1	N	YOUNGSTOWN

Add Rows as Necessary

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC	SYSTEM ID# 2588
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Column 4: 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 identified.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WKBN CBS	27.1	N	YOUNGSTOWN
WYTV ABC	33.1	N	YOUNGSTOWN
WYFX FOX	62.1	N	YOUNGSTOWN
WVPB PBS	24.1	E	WHEELING
WVPB West Virginia	24.2	E-M	WHEELING
WVPB PBS Kids	24.3	E-M	WHEELING
WYFX Bounce	62.4	N-M	YOUNGSTOWN

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MASSILLON CABLE TV INC	SYSTEM ID# 2588
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K Gross Receipts	<p>GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file 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 located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.</p> <div style="text-align: right; border: 1px solid black; padding: 2px;"> \$ 379,516.90 (Amount of gross receipts) </div> <p>IMPORTANT: You must complete a statement in space P concerning gross receipts.</p>
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L Copyright Royalty Fee	<p>COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less. • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800. • 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.</p>
BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	
<p>Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-month accounting period is \$52.00.</p> <p>Line 1. Royalty fee for accounting period</p> <p>Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 0.00</p> <p>Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2</p>	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	
<p>1. Base amount under statutory formula \$ 263,800.00</p> <p>2. Enter amount of gross receipts from space K</p> <p>3. Subtract line 2 from line 1</p> <p>4. Enter the amount of gross receipts from space K</p> <p>5. Enter the amount from line 3</p> <p>6. Subtract line 5 from line 4</p> <p>7. Multiply line 6 by .005 (enter figure here)</p> <p>8. Interest charge. Enter the amount from line 4, space Q, page 8 0.00</p> <p>9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8</p>	
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
<p>1. Enter the amount of gross receipts from space K \$ 379,516.90</p> <p>2. Base amount under statutory formula \$ 263,800.00</p> <p>3. Subtract line 2 from line 1 \$ 115,716.90</p> <p>4. Multiply line 3 by .01 \$ 1,157.17</p> <p>5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,319.00</p> <p>6. Interest charge. Enter the amount from line 4, space Q, page 8 0.00</p> <p>7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 2,476.17</p>	

FILING FEE AND TOTAL REMITTANCE DUE

Filing Fee and Total Remittance Due	<p>1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 2,476.17</p> <p>2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 20.00</p> <p>3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 2,496.17</p> <p style="text-align: center;">EFT Trace # or TRANSACTION ID # 2800081T</p> <p style="text-align: center;">Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See Circular 74 for more information.</p>
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LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

MASSILLON CABLE TV INC

2588

SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS

The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:

“In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119.”

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.

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?

NO

YES. Enter the total here and list the satellite carrier(s) below. \$ _____

P

Special Statement Concerning Gross Receipts Exclusion

Name _____
Mailing Address _____

Name _____
Mailing Address _____

INTEREST ASSESSMENT

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 _____

x _____

Line 2 Multiply line 1 by the interest rate* and enter the sum here -

x _____ days

Line 3 Multiply line 2 by the number of days late and enter the sum here -

x 0.00274

Line 4 Multiply line 3 by 0.00274** and enter here
in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6 \$ -

(interest charge)

* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.

** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.

NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.

Owner _____
Address _____

ID number _____
First community served _____
Accounting period _____

Q

Interest Assessment

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