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.

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
02/20/23	\$ ALLOCATION NUMBER

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period		2022/2				
Bowner	rate	Give the full legal name of the owner of the cable system. If the owner is title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner agle statement of account and royalty fee payment covering the entire account covering the interest of the conduction of the covering the entire accounts. The conduction of the covering the entire accounts are given by the covering the entire accounts. The covering the covering the entire accounts are covering the entire accounts and covering the entire accounts are covering the entire accounts. The covering the covering the entire accounts are covering the entire accounts. The covering the entire accounts are covering the entire accounts are covering the entire accounts. The covering the entire accounts are covering the entire accounts are covering the entire accounts are covering the entire accounts. The covering the entire accounts are covering the entire accou	ess of the cable system or on the last day of a counting perioa	em the accounting period should s	submi -	6844 420222
					6844	2022/2
					0044	ZUZZIZ
		2200 AVENUE A BETHLEHEM, PA 18017-2108				
С		TRUCTIONS: In line 1, give any business or trade names used to in				
	nan	nes already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address give	n in space	В.
System	1	IDENTIFICATION OF CABLE SYSTEM:				
		MAILING ADDRESS OF CABLE SYSTEM:				
	2	(Number, street, rural route, apartment, or suite number)				
		(City, town, state, zip code)				
D	Ins	tructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and rel	ist on page	e 1b
Area	with	all communities.				
Served		CITY OR TOWN	STATE			
First		ALLENTOWN CITY	PA			
Community	В	elow is a sample for reporting communities if you report multiple cha	annel line-ups in S	pace G.		
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	B GRP#
Sample	Ald		MD	A		1
•		ance	MD	В		2
	Ger	ing	MD	В		3

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

FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 6844 SERVICE ELECTRIC CABLE TV INC 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 entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served

Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.

If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).

When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below.

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#
ALLENTOWN CITY	PA	Α	1
Lower Macungie	PA	Α	1
South Whitehall	PA	Α	1
Whitehall	PA	Α	1
Upper Macungie	PA	Α	1
Salisbury	PA	Α	1
Upper Saucon	PA	Α	1
Fountain Hill	PA	Α	1
North Whitehall	PA	Α	1
Catasauqua	PA	Α	1
Hanover (Lehigh County)	PA	Α	1
Alburtis	PA	Α	1
Lower Milford	PA	Α	1
Lowhill	PA	Α	1
Coopersburg	PA	Α	1
Weisenberg	PA	Α	1
Coplay	PA	Α	1
Emmaus	PA	Α	1
Macungie	PA	Α	1
Upper Milford	PA	Α	1
Greenwich	PA	Α	1
Longswamp	PA	Α	1
Hereford	PA	Α	1
Springfield	PA	Α	1
Riegelsville	PA	Α	1
Haycock	PA	Α	1
Durham	PA	Α	1
Richland	PA	Α	1
Nockamixon	PA	Α	3
Bridgeton	PA	Α	3
Tinicum	PA	Α	3
Milford	PA	Α	1
Nazareth	PA	Α	2
Pen Argyl	PA	Α	2
Upper Mt. Bethel	PA	Α	2
Wind Gap	PA	Α	2
Upper Nazareth	PA	Α	2
Lower Nazareth	PA	Α	2
Hellertown	PA	Α	2
Williams	PA	Α	2
Bethlehem	PA	Α	2
Bethlehem	PA	Α	2

First Community

See instructions for additional information on alphabetization.

Add rows as necessary.

Bangor	PA	Α	2
Roseto	PA	Α	2
Lower Saucon	PA	Α	2
Lower Mt. Bethel	PA	Α	2
Plainfield	PA	Α	2
Bushkill	PA	Α	2
Portland	PA	Α	2
Tatamy	PA	Α	2
Moore	PA	Α	2 2
Bath	PA	Α	
Washington	PA	Α	2
Freemansburg	PA	Α	2
Hanover (Northampton County)	PA	Α	2
East Allen	PA	Α	2
East Bangor	PA	Α	2
Allen	PA	Α	2
Chapman	PA	Α	2
North Catasauqua	PA	Α	2
Easton	PA	Α	2
West Easton	PA	Α	2
Forks	PA	Α	2
Glendon	PA	Α	2
Palmer	PA	Α	2
Stockertown	PA	Α	2
Wilson	PA	Α	2
Northampton	PA	Α	2
Alexandria	NJ	В	4
Bloomsbury	NJ	В	4
Frenchtown	NJ	В	4
Holland	NJ	В	4
Kingwood	NJ	В	4
Milford	NJ	В	4
Alpha	NJ	В	4
Greenwich	NJ	В	4
Harmony	NJ	В	4
Lopatcong	NJ	В	4
Phillipsburg	NJ	В	4
Pohatcong	NJ	В	4

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

SERVICE ELECTRIC CABLE TV INC

6844

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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 about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: 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 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.

BL	OCK 1		BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	l	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
Residential:							
 Service to first set 	50,754	\$	24.99	Residential Converter	96,621	\$4.95	
 Service to additional set(s) 							
 FM radio (if separate rate) 							
Motel, hotel	39	\$	90.00				
Commercial	239	\$	86.00				
Converter							
Residential	28,291	\$	12.95				
Non-residential	6,362	\$	18.95				
		1			1	I	

F

Services Other Than Secondary Transmissions: Rates

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 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 furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, 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.

Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

	BLOCK 2						
CATEGORY OF SERVICE	TEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE						
Continuing Services:			Installation: Non-residential				
Pay cable	\$	22.99	Motel, hotel			Expanded Basic	\$82.00
Pay cable—add'l channel	\$	16.49	Commercial			НВО	\$22.99
Fire protection			Pay cable			Cinemax	\$16.49
•Burglar protection			Pay cable-add'l channel			Playboy	\$18.99
Installation: Residential			Fire protection			HBO/Cinemax Combo	\$32.49
First set	\$	49.95	Burglar protection			Showtime/TMC Combo	\$10.99
Additional set(s)	\$	29.95	Other services:			Starz!/Encore Combo	\$20.49
• FM radio (if separate rate)			Reconnect	\$	29.95	iNDemand	PP
Converter	\$	29.95	Disconnect				
			Outlet relocation	\$	29.95		
			Move to new address	\$	29.95		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name SERVICE ELECTRIC CABLE TV INC 6844 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 located in the paper SA3 form. 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 WETA-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 located in the paper SA3 form. 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 located in the paper SA3 form. 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 located in the paper SA3 form. 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-UP A 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER **STATION** (If Distant) **KYW** 3 Ν Philadelphia, PA KYW-2 3.2 N-M Philadelphia, PA See instructions for additional information KYW-3 N-M 3.3 Philadelphia, PA on alphabetization. **WPHL** 17 ı Philadelphia, PA WPHL-2 17.2 I-M Philadelphia, PA WPHL-3 17.3 I-M Philadelphia, PA WPHL-4 17.4 I-M Philadelphia, PA **WPPT** 35 ı Philadelphia, PA WPPT-2 35.2 I-M Philadelphia, PA **WNYW** 5 ı Yes New York, NY WPVI 6 Ν Philadelphia, PA WPVI-2 6.2 N-M Philadelphia, PA WPVI-3 6.3 N-M Philadelphia, PA **WDPN** 2 I Wilmington, DE WDPN-2 2.2 I-M Wilmington, DE WDPN-3 2.3 I-M Wilmington, DE WDPN-4 2.4 I-M Wilmington, DE WDPN-5 2.5 I-M Wilmington, DE

Primary

Transmitters:

Television

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name SERVICE ELECTRIC CABLE TV INC 6844 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 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 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 located in the paper SA3 form.

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 WETA-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 located in the paper SA3 form.

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 located in the paper SA3 form.

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 located in the paper SA3 form.

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.

		CHANN	EL LINE-UP	Α	
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
WDPN-6	2.6	I-M			Wilmington, DE
WDPN-7	2.7	I-M			Wilmington, DE
WPPX	61	I			Wilmington, DE
WPPX-5	61.5	I-M			Wilmington, DE
WWOR	9	I	Yes	0	New York, NY
WCAU	10	N			Philadelphia, PA
WCAU-2	10.2	N-M			Philadelphia, PA
WCAU-3	10.3	N-M			Philadelphia, PA
WPIX	11	I	Yes	0	New York, NY
WLVT	39	E			Allentown, PA
WLVT-DT3	39.3	E-M			Allentown, PA
WLVT-DT4	39.4	E-M			Allentown, PA
WTXF	29	I			Philadelphia, PA
WTXF-2	29.2	I-M			Philadelphia, PA
WTXF-4	29.4	I-M			Philadelphia, PA
WACP	4	I			Atlantic City, NJ
WPSG	57	I			Philadelphia, PA
WPSG-4	57.4	I-M			Philadelphia, PA

Transmitters:

Television

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name SERVICE ELECTRIC CABLE TV INC 6844 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**

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- 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 located in the paper SA3 form.

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

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 located in the paper SA3 form.

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 located in the paper SA3 form.

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.

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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.

		CHANN	EL LINE-UP	Α	
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
WFMZ	69	I			Allentown, PA
WFMZ-W	69.2	I-M			Allentown, PA
WBPH	60	I			Bethlehem, PA
WBPH-2	60.2	I-M			Bethlehem, PA
WTVE	51	I			Reading, PA
WGTW	48	I			Philadelphia, PA
WUVP	65	I			Philadelphia, PA
WUVP-2	65.2	I-M			Philadelphia, PA
WUVP-3	65.3	I-M			Philadelphia, PA
WHYY	12	E			Wilmington, DE
WHYY-DT2	12.2	E-M			Wilmington, DE
WWSI	62	I			Atlantic City, NJ
WWSI-2	62.2	I-M			Atlantic City, NJ
WFPA	28	I			Philadelphia, PA
WMCN	44	I			Philadelphia, PA

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name SERVICE ELECTRIC CABLE TV INC 6844 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 located in the paper SA3 form. 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 WETA-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 located in the paper SA3 form. 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 located in the paper SA3 form. 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 located in the paper SA3 form. 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-UP B										
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					
WCBS	2	N			New York, NY					
WCBS-2	2.2	N-M			New York, NY					
WCBS-3	2.3	N-M			New York, NY					
KYW	3	N			Philadelphia, PA					
WPHL	17	I			Philadelphia, PA					
WNYW	5	I			New York, NY					
WNYW-2	5.2	I-M			New York, NY					
WPVI	6	N			Philadelphia, PA					
WWOR	9	I			New York, NY					
WWOR-3	9.3	I-M			New York, NY					
WCAU	10	N			Philadelphia, PA					
WPIX	11	l			New York, NY					
WPIX-2	11.2	I-M			New York, NY					
WPIX-3	11.3	I-M			New York, NY					
WPIX-4	11.4	I-M			New York, NY					
WLVT	39	E			Allentown, PA					
WLVT-DT3	39.3	E-M			Allentown, PA					
WLVT-DT4	39.4	E-M			Allentown, PA					

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name SERVICE ELECTRIC CABLE TV INC 6844 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 located in the paper SA3 form. 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 WETA-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 located in the paper SA3 form. 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 located in the paper SA3 form. 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 located in the paper SA3 form. 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-UP B 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF CARRIAGE (Yes or No) NUMBER STATION (If Distant) **WTXF** 29 I Philadelphia, PA **WABC** 7 Ν New York, NY WABC-2 N-M 7.2 New York, NY WABC-3 7.3 N-M New York, NY **WNBC** 4 Ν New York, NY WNBC-2 4.2 N-M New York, NY WNBC-3 4.3 N-M New York, NY **WPSG** 57 ı Philadelphia, PA **WFMZ** 69 ı Allentown, PA WFMZ-W 69.2 I-M Allentown, PA **WBPH** 60 ı Bethlehem, PA **WNJT** 52 Ε Trenton, NJ **WPXN** 31 ı New York, NY WPXN-5 31.5 I-M New York, NY

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

Newton, NJ

Paterson, NJ

Paterson, NJ

Wilmington, DE

WMBC

WXTV

WXTV-2

WHYY

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I-M

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FORM SA3E. PAGE 3. LEGAL NAME OF OWN	NER OF CABLE SY	YSTEM:			SYSTEM ID#				
SERVICE ELEC	CTRIC CABL	E TV INC			6844	Name			
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON							
carried by your cable s FCC rules and regulat	system during t ions in effect or	he accountino n June 24, 19	period, except 81, permitting th	(1) stations carrie	s and low power television stations) ed only on a part-time basis under tain network programs [sections	G Primary			
6.59(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 ubstitute 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 specifc F0 • Do not list the station	CC rules, regula here in space	ations, or auth G—but do lis	orizations:		ent and Program Log)—if the	Television			
	and also in spa formation cond	ace I, if the sta			itute basis and also on some other of the general instructions located				
Column 1: List each each multicast stream	ch station's call associated with	h a station ac	cording to its ov	er-the-air designa	es such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example				
its community of licens	se. For example	e, WRC is Ch	•		tion for broadcasting over-the-air in may be different from the channel				
	e in each case v	whether the s			ependent station, or a noncommercial cast), "I" (for independent), "I-M"				
For the meaning of the	ese terms, see	page (v) of th	e general instru	ctions located in t	ommercial educational multicast). he paper SA3 form. es". If not, enter "No". For an ex-				
	ave entered "Y	es" in column	4, you must cor	mplete column 5,	e paper SA3 form. stating the basis on which your ttering "LAC" if your cable system				
	sion of a distant	multicast stre	eam that is not s	subject to a royalt	capacity. y payment because it is the subject stem or an association representing				
tion "E" (exempt). For sexplanation of these th	simulcasts, also rree categories	o enter "E". If , see page (v	you carried the) of the general	channel on any o	try transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the				
FCC. For Mexican or (Note: If you are utilizir		. ,		•	h which the station is identifed. channel line-up.				
	T	CHANN	EL LINE-UP	В					
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION				
WHYY-DT2	NUMBER 12.2	STATION E-M		(If Distant)	Wilmington, DE				
WNJU	47				Linden, NJ				
WNJU-2	47.2	I-M			Linden, NJ				
WJLP	33	I			New York, NY				
WJLP-3	33.3	I-M			New York, NY				
WFUT	68	1-1 I			Newark, NJ				
WFUT-2		! N#							
WFU1-2	68.2	I-M			Newark, NJ				

ACCOUNTING PERIOD: 2022/2 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 6844 SERVICE ELECTRIC CABLE TV INC 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. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally 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 located in the paper SA3 form. 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). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.							ACCOUNTING	PERIOD: 2022,		
LEGAL NAME OF OWNER OF SERVICE ELECTRIC (5	SYSTEM ID# 6844	Name		
SUBSTITUTE CARRIAG	E: SPECIA	L STATEME	NT AND PROGRAM LO	3						
In General: In space I, ident substitute basis during the a explanation of the programn 1. SPECIAL STATEMEN	ccounting pening that must	eriod, under spe st be included i NING SUBST	ecific present and former FC n this log, see page (v) of the TTUTE CARRIAGE	CC rules, regula ne general instr	ations, or auth ructions locate	norizations. ed in the pa	For a further per SA3 form.	Substitute Carriage: Special		
During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program roadcast by a distant station?										
Note: If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is	"Yes," you mu	st complete	the prograr	n	Program Log		
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love Column 2: If the prograic Column 3: Give the call Column 4: Give the broatthe case of Mexican or Car Column 5: Give the moifirst. Example: for May 7 gi Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	of every non distant state egulations, of every non distant state egulations, of extreme the egulations of the state of the egulation of the e	nnetwork televion and that your authorization to use general of the BA Basketball: deast live, enter station broadca on's location (the station broadca on's location broadca on's location broadca on the station broadca on the station broadca on the station and the station broadca of the station and the station broadca of the station broadca of the station and the station broadca of th	ision program (substitute pur cable system substitute such categories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "lasting the substitute programe community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01: was substituted for programing the accounting period	ed for the progneral instruction r "basketball". No." am. estation is lice station is iden program. Use cable system. 15 p.m. to 6:2 amming that yel; enter the let	ramming of a ns located in List specific nsed by the Fatified). numerals, which is the time 8:30 p.m. shour system water "P" if the I	another state the paper program FCC or, in ith the mones accurately ould be was required isted pro	ith Y			
	SUBSTITUT	E PROGRAM	I		N SUBSTIT		7. REASON FOR			
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TI FROM —		DELETION			
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FORM SA3E, PAGE 6.

ACCOUNTING PERIOD: 2022/2 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 6844 SERVICE ELECTRIC CABLE TV INC **PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name				
SE	RVICE ELECTRIC CABLE TV INC			6844	Name				
Inst all a (as	OSS RECEIPTS Tructions: The figure you give in this space determines the form you fle and the amount amounts (gross receipts) paid to your cable system by subscribers for the system's second identified in space E) during the accounting period. For a further explanation of how to be (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	ondary t	transmissio e this amou	n service nt, see	K Gross Receipts				
IMP	during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.		(Amount of g	20,314,881.50 ross receipts)					
ConConIf you feeIf you	(RIGHT ROYALTY FEE ictions: Use the blocks in this space L to determine the royalty fee you owe: inplete block 1, showing your minimum fee. inplete block 2, showing whether your system carried any distant television stations. Our system did not carry any distant television stations, leave block 3 blank. Enter the air from block 1 on line 1 of block 4, and calculate the total royalty fee. Our system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.				L Copyright Royalty Fee				
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should book 3 below.								
3 be	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.								
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be	entered on	line					
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K		64 percent						
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.		<u> </u>	20,014,001.00					
	This is your minimum fee.	\$		216,150.34					
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting peri X Yes—Complete the DSE schedule. No—Leave block 3 below blank and the space of the stations of the statio	mn 4, yo iod?	ou must che	eck					
Block	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	253,120.29					
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			0.00					
	Line 3. Add lines 1 and 2 and enter here	\$		253,120.29					
Block	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee								
4	from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger		\$	253,120.29	Cable systems				
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: 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 deposits under				
	zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)								
	Line 4. FILING FEE		\$	725.00	the Licensing additional fees.				
					Division for the appropriate				
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		253,845.29	form for submitting the				
	EFT Trace # or TRANSACTION ID # 76371792728				additional fees.				
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to								

	LEGAL NAME OF OWNER O	F CABLE S	SYSTEM:	SYSTEM ID#						
Name	SERVICE ELECTR	IC CAE	LE TV INC	6844						
	CHANNELS									
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations									
•••	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
Channels		()	, 3							
			hannels on which the cable	77						
	system carried telev	vision br	oadcast stations							
	2. Enter the total num	nber of a	ctivated channels							
			carried television broadcast stations	368						
	and nonbroadcast s	services								
N	INDIVIDUAL TO BE	CONTA	CTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual							
	we can contact about	t this sta	tement of account.)							
Individual to Be Contacted										
for Further	Name Joseph	G. Ma	icus Telephone	(610) 625-8526						
Information				<u></u>						
	Address 2200 Av	enue/	A							
			oute, apartment, or suite number)							
	Bethleh	em, P	A 18017-2108							
	(City, town, s	tate, zip)								
	Email		Fax (optional)							
	OFFICION (TILL)			1.6						
_	CERTIFICATION (This	s statem	ent of account must be certifed and signed in accordance with Copyright Office re	egulations.						
O Certifcation	. I the undersigned be	araby aa	tifu that (Chark and hut ank and of the haves)							
Certification	• I, the undersigned, ne	егеру се	tify that (Check one, but only one, of the boxes.)							
	(Owner other than	corpor	ation or partnership) I am the owner of the cable system as identifed in line 1 of space	ce B; or						
	_									
			n corporation or partnership) I am the duly authorized agent of the owner of the cab	ole system as identified						
	in line 1 of space	ce B and	that the owner is not a corporation or partnership; or							
			n officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as	owner of the cable system						
	in line 1 of space	ce B.								
	I have examined the	stateme	nt of account and hereby declare under penalty of law that all statements of fact conta	ined herein						
	are true, complete, and [18 U.S.C., Section 10		to the best of my knowledge, information, and belief, and are made in good faith.							
	[10 0.0.0., 000.011 10	701(1000	п							
		Χ	/s/ Joseph G. Macus							
			electronic signature on the line above using an "/s/" signature to certify this statement. John Smith). Before entering the first forward slash of the /s/ signature, place your curso	or in the box and press the						
			ton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lot							
	Typed or printed name: Joseph G. Macus									
		, , peu	or prince manife.							
		Title:	Vice President (Title of official position held in corporation or partnership)							
			(True of official position field in corporation of partnership)							
		Data	Echruany 20, 2023							
		Date:	February 20, 2023							

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 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 telephor 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 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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name				
SERVICE ELECTRIC CABLE TV INC 6844					
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 in the paper SA3 form.	Gross Receipts Exclusion				
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?					
X NO					
YES. Enter the total here and list the satellite carrier(s) below					
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 underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q				
Line 1 Enter the amount of late payment or underpayment	Interest Assessment				
x					
Line 2 Multiply line 1 by the interest rate* and enter the sum here					
xdays					
Line 3 Multiply line 2 by the number of days late and enter the sum here					
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 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 Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original 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 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 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.

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carriec 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 in the paper SA3 form.

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 SA3E (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 accoun (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 C of your Form SA3E, 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 or 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 SA3E (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 particula 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 ε 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, ir 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 SA3E (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 beer 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),(c),(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 statior 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 Syndicatec 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 pursuan to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/o 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 ir
 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.

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
 the rates given above;
 the total number of DSEs for that group's complement of stations;
 and
 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.

Santa Rosa	Stations A and C 35 mile zone
\ an	Bodega Bay

	Distant Stations Carried		Identification of	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	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 DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6.384.00

		ψ0,001.00			
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)

ACCOUNTING PERIOD: 2022/2

DSE SCHEDULE. PAG	E 11. (CONTINUED)										
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#					
I	SERVICE ELECTRIC CA	BLE TV INC				6844					
	SUM OF DSEs OF CATEGOR										
	Add the DSEs of each station.										
	Enter the sum here and in line	1 of part 5 of this	s schedule.	0	3.00						
2	Instructions:										
2	In the column headed "Call sof space G (page 3).	Sign": list the cal	ll signs of all distant stations	identified by the	e letter "O" in column 5						
Computation	In the column headed "DSE"	: for each indepe	endent station, give the DSE	as "1.0"; for e	ach network or noncom-						
of DSEs for	mercial educational station, giv	ve the DSE as ".2	25."								
Category "O"			CATEGORY "O" STATION								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	WNYW WWOR	1.000									
	WPIX	1.000 1.000									
	WPIA	1.000									
Add rows as											
necessary.											
Remember to copy											
all formula into new											
rows.											
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
	0.0000										

Name		DWNER OF CABLE SYSTEM: ECTRIC CABLE TV	INC				5	SYSTEM ID# 6844	
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should correspond with the information given in space J. Calculate only one DSE for each station. Computation of DSEs for Stations Carried Part Time Due to Lack of Activated figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper								
Capacity		C	ATEGORY LA	C STATIONS:	COMPUTAT	ION OF DSEs			
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEN	R 3. N JRS C ED BY S	NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAC VALUE	F 5. TYPE		SE	
			÷		=	x	=		
			÷		= 	x x	=		
			÷		=	x	=		
			÷		=	x	=		
			÷		=	x	=		
			÷		= 	x x	=		
	Add the DSEs	OF CATEGORY LAC Sof each station. Im here and in line 2 of p		le,		0.00			
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations are also column 2: at your option. Column 3: Column 4: I	e the call sign of each stand of the call sign of each stand on October 19, 1976 (some or more live, nonnetwork). This figure should correst call the figure in column of the stand of of	itution for a prograi as shown by the le ork programs during number of live, no spond with the info s in the calendar ye no 2 by the figure ir (For more informat	m that your systen tter "P" in column that optional carr nnetwork program mation in space I ar: 365, except in column 3, and gi ion on rounding, s	n was permitted 7 of space I); an iage (as shown by a carried in substance a leap year. we the result in case page (viii) of	to delete under FCC ruled d y the word "Yes" in column stitution for programs that column 4. Round to no lead the general instructions in	2 of t were deleted es than the third	orm).	
		SU	SUBSTITUTE-BASIS STATIONS: COMPUT			ATION OF DSEs		1	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	
				=			÷	=	
		÷		=			-		
		=		=			÷	=	
		÷		=			÷ ÷	=	
	Add the DSEs	OF SUBSTITUTE-BAS	IS STATIONS:			0.00		-	
5		ER OF DSEs: Give the ams applicable to your system		es in parts 2, 3, and	I 4 of this schedul	le and add them to provide	e the tota		
Total Number	1. Number of	f DSEs from part 2 ●				•	3.00		
of DSEs	2. Number of	f DSEs from part 3 ●				>	0.00		
	3. Number of	f DSEs from part 4 ●				>	0.00		
	TOTAL NUMBE	R OF DSEs					·	3.00	

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/2

	OWNER OF CABLE						S'	YSTEM ID# 6844	Name
In block A: • If your answer if schedule.	ck A must be comp "Yes," leave the re	emainder of p	·	7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	the	6
n your unower n	ito, complete ble			ELEVISION M	ARKETS				Computation of
effect on June 24,	m located wholly o , 1981? iplete part 8 of the olete blocks B and	schedule—D	•					gulations in	3.75 Fee
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulations e DSE Schee	ons prior to Jui dule. (Note: Ti	part 2, 3, and 4 o ne 25, 1981. For fu ne letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see tl	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfatherece instructions fo E Carried pursua *F A station pre	lles and reguled pursuant to as defined al educational station (76.6 or DSE sched ant to individuciously carried the station w	lations cited boot the FCC made in 76.5(kk) (7 all station [76.555) (see paragule). It is all waiver of F don a part-tin ithin grade-Boot in the first state of the f	76.59(d)(1), 76.61(9(c), 76.61(d), 76. graph regarding su CC rules (76.7) ne or substitute ba contour, [76.59(d)(ose in effect of 76.57, 76.59(b) (e)(1), 76.63(a) (e)(3) referring the stitution of goods asis prior to June 20.57, 76.59 (e)	n June 24, 198), 76.61(b)(c), a) referring to 7 g to 76.61(d) randfathered s	76.63(a) referring 6.61(e)(1 stations in the		
Column 3:		e stations ide	ntified 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	
WNYW	D	1.00							
WWOR WPIX	D	1.00							
WPIX	D	1.00							
		•						3.00	
				NADUTATION OF	F 0 75 555				-
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				-
	total number of								
Line 2: Enter the	sum of permitte	d DSEs fror	n block B ab	ove			,		
	line 2 from line 1 leave lines 4–7 b			•		rate.			
Line 4: Enter gross receipts from space K (page 7)								Do any of the DSEs represent partially	
Line 5: Multiply I	ine 4 by 0.0375 a	and enter su	ım here				x		permited/ partially nonpermitted carriage?
Line 6: Enter tot	al number of DSI	Es from line	3						If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

	OWNER OF CABLE						S	YSTEM ID# 6844	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS			2. PERMITTED BASIS			2. PERMITTED BASIS	3. DSE	6
									Computation 6
									3.731 66
					•				
		<u> </u>							

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SERVICE ELECTRIC CABLE TV INC 6844 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) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters Permitted 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 in the paper SA3 form. 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 6. PERMITTED 1. CALL 3. ACCOUNTING 4. BASIS OF 5. PRESENT 2. PRIOR **PERIOD** CARRIAGE DSE DSE SIGN DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **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? X Yes—Complete blocks B and C . 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 community served by the cable system prior to March 31, 1972? (refe commercial VHF station that places a grade B contour, in whole 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 No—Enter zero and proceed to part 8. No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN CALL SIGN DSE DSE DSE CALL SIGN WNYW 1.00 WNYW 1.00 **WWOR** 1.00 **WWOR** 1.00 **WPIX** 1.00 **WPIX** 1.00 3.00 3.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SERVICE ELECTRIC CABLE TV INC	SYSTEM ID# 6844	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	20,314,881.50	7
Section 2	A. Enter the total DSEs from block B of part 7	3.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	3.00	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? X Yes—Complete section 3 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 Dis 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	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	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
3b	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 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 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 Dis 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)	SE	
	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		

	LEGAL NAM	Æ OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name		SERVICE ELECTRIC CABLE TV INC	6844					
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). 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)	6844					
		Syndicated Exclusivity Surcharge.						
Computation of Base Rate Fee	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5. In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.							
		DI COMA CARRIAGE OF RARTIALLY RICTANT CTATIONS						
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS						
	_	our 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 following sections.						
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE						
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ \$						
	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.)						
	Section 3	If the figure in section 2 is 4.000 or less , 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)						
		C. Subtract 1.000 from total DSEs (the figure 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 base rate fee. Enter here and in block 3, line 1, space L (page 7)						
		Base Rate Fee						

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/2

	AME OF OWNER OF CABLE SYSTEM: ICE ELECTRIC CABLE TV INC	SYSTEM ID# 6844	Name
	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 Base Rate Fee
	C. Multiply line B by 3.000 and enter here \$		Dase Nate i ee
	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 >		
	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	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channels.		9
In Gene	oral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must:		Computation of Base Rate Fee
station DSEs a	ivide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine nd the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge
NOTE:	If any portion of your cable system is located within the top 100 television market and the station is not exempt in pute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be able system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
	Identify a Subscriber Group for Partially Distant Stations	tion var	for Partially Permitted
	For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lot the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
subscril	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. per group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
groups.	ting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syssection:	tem's subscriber	
	y the communities/areas represented by each subscriber group.		
subscri	ne call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to al pers in the group.	I of the	
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it i	n parts 2, 3,	
2) any p	f 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 b 6 of this schedule.	olock B,	
•	e DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	ate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general i paper SA3 form.	nstructions	
page. I	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the n making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee	at is, the total	

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actual calculations on the form.

ACCOUNTING PERIOD: 2022/2 DSE SCHEDULE. PAGE 18. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 6844 SERVICE ELECTRIC CABLE TV INC 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.

Na	6844							
				TE FEES FOR EACH				Bl
	COND SUBSCRIBER GROUP					SUBSCRIBER GROU		
Comp	npton County, PA		OMMUNITY/ AREA Northam		Berks, Bucks Counties, P		Lehigh,	COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base I							1.00	WNYW
á							1.00	WWOR
Syn							1.00	VPIX
Exc								
Sur								
Pa								
Dis								
Sta							-	
Ola								
							-	
	0.00			Total DSEs	3.00			otal DSEs
					407.68	s 10,264,	roup	Gross Receipts First G
	6,188.86	<u>\$ 6,946</u>	d Group	Gross Receipts Second		¥ 10,204,	oup	,, , , , , , , , , , , , , , , , , , ,
	6,188.86	\$ 6,940	d Group	Gross Receipts Second	101100	10,204,	oup	
	0.00	\$ 6,946		Base Rate Fee Second	120.29			3ase Rate Fee First Gr
	0.00		d Group		120.29		-oup	
	0.00	\$	d Group FOURTH	Base Rate Fee Second	120.29	\$ 253,	oup THIRD :	Base Rate Fee First G
	0.00	\$ I SUBSCRIBER GROUF	d Group FOURTH	Base Rate Fee Second	120.29	\$ 253,	oup THIRD :	Base Rate Fee First G
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00	\$ SUBSCRIBER GROUF	d Group FOURTH Hunterd	Base Rate Fee Second COMMUNITY/ AREA	, 120.29	\$ 253, SUBSCRIBER GROU County, PA	THIRD :	Base Rate Fee First Gr
	0.00 Downties,N. DSE	\$ SUBSCRIBER GROUF don and Warren Co	FOURTH Hunterd DSE	Base Rate Fee Second COMMUNITY/ AREA CALL SIGN	120.29 P DSE	\$ 253, SUBSCRIBER GROU County, PA CALL SIGN	THIRD: Bucks (COMMUNITY/ AREA

ACCOUNTING PERIOD: 2022/2

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name SERVICE ELECTRIC CABLE TV INC 6844 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs 3.00 Line 1: Enter the VHF DSEs 3.00 Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE \$ <mark>0.00</mark> First Group 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 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group \$ 0.00 SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown \$ 0.00