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

## **SA1-2E Short Form**

## STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

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

FOR COPYRIGHT OFFICE USE ONLY

DATE RECEIVED AMOUNT 8/24/2023 \$ ALLOCATION NUMBER

Return completed workbook by email to

## coplicsoa@copyright.gov

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

Α	ACC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting		20231 Barcode Data Filing Period (optional - see instructions)
Period		
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		Frontier Telephone of Rochester Inc
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		401 Merrit 7
		(Number, street, rural route, apartment, or suite number) Norwalk, CT 06851
		(City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)
Privacy Act Notice	e: Section	n 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
Name	Frontier Telephone of Rochester Inc	6370
	Instructions: List each separate community served by the cable system. A "community	
	"a separate and distinct community or municipal entity (including unincorporated co	
D	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list	
	as the "first community." Please use it as the first community on all future filings.	
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	ome parks should be reported in parentheses below the
Area	identified city.	
Served		
		CTATE
-	CITY OR TOWN	STATE
First	Middletown	NY
Community	Port Jervis	NY
	Montgomery	NY
dd Rows as Necessary	Chester	NY
	Village of Chester	NY
	Deer Park	NY
	Goshen	NY
	New Windsor	NY
	Village of Wurtsboro	NY

								FORM SA1-		
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						515		
	Frontier Telephone of R	Rochester In	C						6370	
-	SECONDARY TRANSMISSION	I SERVICE: SU	JBSCR	IBERS AND R	ATES					
E	In General: The information in s	•		-		•				
Secondary	system, that is, the retransmissi about other services (including preservices)									
Transmission	last day of the accounting period				-			sting on the		
Service: Sub-	Number of Subscribers: Bot	h blocks in spa	ce E ca	all for the numb	per of subs	cribers to the ca	•			
scribers and	down by categories of secondar	•		• • •		•				
Rates	each category by counting the n separately for the particular serv		-	•••		•	-	s charged		
	<b>Rate:</b> Give the standard rate of							rge and the		
	unit in which it is generally billed	I. (Example: "\$2	20/mth'	'). Summarize	any standa					
	category, but do not include disc							iss that salls		
	<b>Block 1:</b> In the left-hand block systems most commonly provide									
	that applies to your system. Not									
	categories, that person or entity									
	subscriber who pays extra for ca					d in the count u	nder "Serv	rice to the		
	first set" and would be counted of Block 2: If your cable system	•			• • •	service that ar	e different	from those		
	printed in block 1 (for example, t	-		•						
	with the number of subscribers a					•				
	sufficient.									
	BLC	OCK 1 NO. OF					BLOC	K 2 NO. OF		
	CATEGORY OF SERVICE	SUBSCRIBE	ERS	RATE	CATE	EGORY OF SEF	RVICE	SUBSCRIBERS	RAT	
	Residential:									
	<ul> <li>Service to first set</li> </ul>		27	24.99						
	<ul> <li>Service to additional set(s)</li> </ul>									
	<ul> <li>FM radio (if separate rate)</li> </ul>									
	Motel, hotel									
	Commercial		0	34.99						
	Converter									
	• Residential									
	<ul> <li>Non-residential</li> </ul>									
_	SERVICES OTHER THAN SEC In General: Space F calls for ra					all vour cable sv	stem's ser	vices that were		
F	not covered in space E, that is,	•			•	• •				
	service for a single fee. There a				•		• •	,		
Services Other Than	furnished at cost or (2) services									
Secondary	amount of the charge and the un enter only the letters "PP" in the		usuali	y billed. If any i	rates are c	narged on a var	lable per-	brogram basis,		
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.									
Rates	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.									
		BLO						BLOCK 2		
	CATEGORY OF SERVICE Continuing Services:			GORY OF SEF ation: Non-res		RATE	CATEG	ORY OF SERVICE	RAT	
	• Pay cable			otel, hotel	Sidential					
	• Pay cable—add'l channel			mmercial						
	Fire protection		_	y cable						
	•Burglar protection			y cable-add'l c	hannel					
	Installation: Residential			e protection						
	• First set			rglar protectior	ı					
	<ul> <li>Additional set(s)</li> </ul>			services:						
	• FM radio (if separate rate)			connect						
	• Converter		• Dis	sconnect						
			• Ou	tlet relocation						
			• Mo	ove to new add	ress					

Marra	LEGAL NAME OF OWNER O	JF CABLE SYSTEM:		SYSTEM						
Name	Frontier Telephone o	of Rochester Inc		63						
	PRIMARY TRANSMITTERS:	TELEVISION								
G Primary ransmitters: Television	In General: In space G, id carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do not list the station her station was carried only or • List the station here, and basis. For further informatic Column 1: List each station multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast) For the meaning of these to	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do <i>not</i> 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 <i>only</i> on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.								
	Column 4: Give the location	ion of each station. For U.S. stations, list adian stations, if any, give the name of th <b>2. B'CAST CHANNEL NUMBER</b>	t the community to which the statio	•						
	WCBSH2	2. B'CAST CHANNEL NOMBER	N	Primary						
	WNBCHD	4	N	Primary						
Rows as Necessary	WNYWHD	5	N	Primary						
(OWS as ivelessury	WABCHD	7	N	Primary						
	WWORHD	9	N	Primary						
	WPIXHD	11	N	Primary						
	WNETHD	13	E	Primary						
	WLIWHD	21	E	Primary						
	NYLIFEHD	25	E	Primary						
	WPXNHD	31	E	Primary						
	WXTVHD	41	N	Primary						
	WNJUHD	47	N	Primary						
	WRNN-DT	48		Primary						
	WNJN HD	50	Ν	Primary						
	TBN HD	54	Ν	Primary						
	WFUT	68	N	Primary						
	Bounce	70	N-M	Multicast						
	MNM	71	N-M	Multicast						
	DECADES	72	N-M	Multicast						
		73	N-M	Multicast						
	HEROES	10								
	HEROES GET TV	73	N-M	Multicast						
			N-M N-M	Multicast Multicast						
	GET TV	74								

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTEM						
Name	Frontier Telephone of Rochester Inc									
	PRIMARY TRANSMITTERS:			63						
0		lentify every television station (including	translator stations and low power	r television stations)						
G		em during the accounting period, except								
Primary	0	in effect on June 24, 1981, permitting th $(e)(2)$ and $(4)$ , or 76.63 (referring to 76.6	•	•						
ransmitters:		as explained in the next paragraph.								
Television		s: With respect to any distant stations ca	arried by your cable system on a	substitute program						
		ules, regulations, or authorizations: re in space G—but do list it in space I (th	ne Special Statement and Progra	am Log)—if the						
	station was carried only of		le opeoial etatement and riogra							
		also in space I, if the station was carried								
		ion concerning substitute basis stations, on's call sign. <i>Do not</i> report origination p								
		ed with a station according to its over-the	-	-						
	"WETA-2" as the same on	the form.								
	<b>Column 2:</b> Give the channel number the FCC assigned to the television station for broadcasting over the air in its community									
	of license. For example, WRC is channel 4 in Washington, D.C. <b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial									
	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M"									
		(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).								
		For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. <b>Column 4:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the								
	FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.									
			-	-						
			-	-						
			-	-						
	FCC. For Mexican or Cana	adian stations, if any, give the name of th	ne community with which the stat	ion is identified.						
	FCC. For Mexican or Cana	adian stations, if any, give the name of the na	ae community with which the stat	ion is identified. 4. LOCATION OF STATION						
	FCC. For Mexican or Cana 1. CALL SIGN BUZZR	adian stations, if any, give the name of the na	ne community with which the stat 3. TYPE OF STATION N-M	ion is identified. 4. LOCATION OF STATION Multicast						
	FCC. For Mexican or Cana 1. CALL SIGN BUZZR TELEX	2. B'CAST CHANNEL NUMBER         78         80	ae community with which the stat 3. TYPE OF STATION N-M N-M	ion is identified.  4. LOCATION OF STATION Multicast Multicast						
	FCC. For Mexican or Cana 1. CALL SIGN BUZZR TELEX ANTTV	2. B'CAST CHANNEL NUMBER         78         80         81	ane community with which the stat 3. TYPE OF STATION N-M N-M N-M	ion is identified.  4. LOCATION OF STATION Multicast Multicast Multicast						
	FCC. For Mexican or Cana 1. CALL SIGN BUZZR TELEX ANTTV	2. B'CAST CHANNEL NUMBER         78         80         81	ane community with which the stat 3. TYPE OF STATION N-M N-M N-M	ion is identified.  4. LOCATION OF STATION Multicast Multicast Multicast						
	FCC. For Mexican or Cana 1. CALL SIGN BUZZR TELEX ANTTV	2. B'CAST CHANNEL NUMBER         78         80         81	ane community with which the stat 3. TYPE OF STATION N-M N-M N-M	ion is identified.  4. LOCATION OF STATION Multicast Multicast Multicast						
	FCC. For Mexican or Cana 1. CALL SIGN BUZZR TELEX ANTTV	2. B'CAST CHANNEL NUMBER         78         80         81	ane community with which the stat 3. TYPE OF STATION N-M N-M N-M	ion is identified.  4. LOCATION OF STATION Multicast Multicast Multicast						

EGAL NAME O								SYSTEM I 637
	t every radio s	tation ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) n the basis of or detailed info aper SA1-2 fo Column 1: lo Column 2: S Column 3: If ignal, indicate	it is carried by monitoring, to prmation about rm. dentify the call tate whether t the radio stat this by placing	y the sys be rece it the Co sign of he static ion's sig g a chec	I-Band FM Carriage: Under ( stem whenever it is received a ived at the headend, with the pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column.	at the system's he system's FM ant his point, see pa sed by the cable s	eadend, and (ź enna, during c ge (v) of the g system as a s	2) it can certain s eneral i eparate	be expected, tated intervals. Instructions in the.	Primary Transmitters Radio
			on (the community to which the the community with which the		-	C or, in	the case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
						· <b>-</b>	·	
						·		
							·	

Accounting Perio	od: 2023/1						FORM	SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF							SYSTEM ID#
	Frontier Telephone of	Rocheste	er Inc					63707
Substitute	SUBSTITUTE CARRIAGE In General: In space I, identi substitute basis during the are explanation of the programm	fy every noi	nnetwork televi eriod, under sp	<i>sion program,</i> broadcast by ecific present and former F(	a <i>distant</i> sta CC rules, reg	ulations, or auth	orizations	. For a further
Substitute Carriage: Special Statement and Program Log	<ol> <li>SPECIAL STATEMENT</li> <li>During the accounting per broadcast by a distant star</li> <li>Note: If your answer is "No log in block 2.</li> <li>LOG OF SUBSTITUTE In General: List each substice clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call Column 4: Give the broat the case of Mexican or Can Column 5: Give the mor first. Example: for May 7 give</li> </ol>	<b>CONCER</b> iod, did you tion? ," leave the <b>EPROGRA</b> titute progra ice, please of every no distant stati gulations, of ies like "mo Bulls." n was broa sign of the adcast stati hadian station th and day ye "5/7." es when the	<b>EXING SUBS</b> ar cable system a rest of this para add additional onnetwork televition and that ye for authorization ovies" or "bask dcast live, enter station broadc on's location (for s, if any, the when your system e substitute pro-	<b>FITUTE CARRIAGE</b> n carry, on a substitute ba ge blank. If your answer is ate line. Use abbreviations rows to the tables. vision program ("substitute our cable system substitut hs. See page (v) of the gen etball." List specific progra er "Yes." Otherwise enter f asting the substitute progra the community to which the community with which the stem carried the substitute ogram was carried by your	sis, any nonr s "Yes," you r s wherever p e program") t ed for the pro- neral instruct im titles, for e 'No." am. e station is lid e station is lid program. Us	network television must complete ossible, if their hat, during the ogramming of a ions for further example, "I Lov censed by the F entified). se numerals, w m. List the time	on progra <b>YES</b> the progra meaning accountin another st information re Lucy" of FCC or, in with the modes accurated	am X NO am is ng cation on. or n onth
	to delete under FCC rules a was substituted for program effect on October 19, 1976.	and regulati	ons in effect d	as permitted to delete und	d; enter the l er FCC rules WHE	etter "P" if the I	isted prog ns in TE	
	1. TITLE OF PROGRAM		3. STATION'S CALL SIGN		5. MONTH AND DAY	6. TIME FROM —		DELETION
L								

Accounting Period:	2023/1	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Frontier Telephone of Rochester Inc	SYSTEM ID# 63707
<b>K</b> Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form.         Gross receipts from subscribers for secondary transmission service(s)         during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	mission service
L Copyright Royalty Fee	<ul> <li>COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe:</li> <li>Complete block 1, block 2, or block 3.</li> <li>Use block 1 if the amount of gross receipts in space K is \$137,100 or less.</li> <li>Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to</li> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600. See page (vi) of the general instructions located in the paper SA1-2 form for more information.</li> </ul>	\$263,800.
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00.	r this six-month
	Line 1. Royalty fee for accounting period	\$ 52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	•
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137)	,100)
	1. Base amount under statutory formula         \$         263,800.00	-
	2. Enter amount of gross receipts from space K	_
	3. Subtract line 2 from line 1	-
	4. Enter the amount of gross receipts from space K	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	
	8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$52)	7,600)
	1. Enter the amount of gross receipts from space K	-
	2. Base amount under statutory formula	_
	3. Subtract line 2 from line 1	_
	4. Multiply line 3 by .01	

4. Multiply line 3 by .01			
5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	\$	1,319.00	
6. Interest charge. Enter the amount from line 4, space Q, page 8		0.00	
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6.		· · · · · <u> </u>	
FILING FEE AND TOTAL REMITTANCE DUE			
1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	\$	52.00	
2. Filing Fee (See the instructions for more information on filing fee calculations)	\$	15.00	
3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3		\$	67.00
EFT Trace # or TRANSACTION ID #			
		• • • •	
	<ol> <li>5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)</li></ol>	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)       \$ 1,319.00         6. Interest charge. Enter the amount from line 4, space Q, page 8       0.00         7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6       0.00         FILING FEE AND TOTAL REMITTANCE DUE         1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)       \$ 52.00         2. Filing Fee (See the instructions for more information on filing fee calculations)       \$ 15.00         3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3       \$

Accounting Period:	2023/1		FORM SA1-2E. PAGE 7
Name		OWNER OF CABLE SYSTEM: hone of Rochester Inc	SYSTEM ID# 63707
M Channels	to its subscribers 1. Enter the tota	ou must give (1) the number of channels on which the cable system carried television broadcast stations s, and (2) the cable system's total number of activated channels during the accounting period. I number of channels on which the cable	28
	on which the c	I number of activated channels able system carried television broadcast stations cast services	350
N Individual to Be Contacted		<b>D BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> (Identify an individual about this statement of account.)	
for Further Information	Name	Karol Whittaker Telephone 214-53	34-6827
	Address 	1919 McKinney Ave         (Number, street, rural route, apartment, or suite number)         Dallas, TX 75201         (City, town, state, zip)         karol.whittaker@ftr.com         Fax (optional)	
O Certification	<ul> <li>I, the undersigned (Owned)</li> <li>(Owned)</li> <li>(Agention)</li> <li>X (Officient)</li> <li>I have examined</li> </ul>	(This statement of account must be certified and signed in accordance with Copyright Office regulations) ed, hereby certify that (Check one, <i>but only one</i> , of the boxes.) er other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or t of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system a line 1 of space B and that the owner is not a corporation or partnership; or cer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the line 1 of space B. d the statement of account and hereby declare under penalty of law that all statements of fact contained herein te, and correct to the best of my knowledge, information, and belief, and are made in good faith. ion 1001(1986)]	



	X /s/ Jessica Matushek
	Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)
Typed or printed	name: Jessica Matushek
	Sr. Director Accounting icial position held in corporation or partnership)
Date:	8/24/2023

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

Ontier Telephone of Rochester Inc       637         PECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS       Image: Content of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sectores and amounts 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."       P         For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.       Special Statement contenting Gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?       No       Special Statement form subscribers receiving below.       Special Statement form subscribers receiving secondary transmissions pursuant to section 119."       Special Statement form subscribers receiving below.       Special Statement form subscribers receives for secondary transmissions for form subscribers receives for secondary transmissions       Special Statement form subscribers receives for secondary transmissions	ounting Period: 2	2023/1	FORM SA1-2E. PAGE 8
SPECIAL STATEMENT Control 1988 amended The 17, section 111(d)(1)(A), of the Copyright Act by adding the following agenetacies. The Sadelike Home Viewer Act of 1988 amended The 17, section 111(d)(1)(A), of the Copyright Act by adding the following agenetacies. The determining the total number of subscribers and the gross amounts paid to the cable system for the basic scribers and amounts oblicated from subscribers receiving ascending viewnings prevaid to scriber and amount solution fracture agenetacies. The origination on when to exclude these amounts, see the note on page (wil) of the general instructions located in the paper SA1-2 form. The statelite carrier to satellite carrier(s) below. There the amount of late payment or underpayment. For more information on interest assessment, see page (will) of the general instructions located in the paper SA1-2 form. There is a subscriber to advect the sum here	AL NAME OF OW	NER OF CABLE SYSTEM:	SYSTEM ID
The Statilite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: arvice of providing secondary transmissions optimary transmissions pursuant to each system for the basic scribers 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 coctated in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? Norme Maing Address Nume Maing Address INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For more information of interest rates and enter the sum here Line 1 Enter the amount of late payment or underpayment. For a moust complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest rates and enter the sum here Line 2 Multiply line 1 by the interest rate' and enter the sum here in space Lipage 8), block 1, line 2, or block 2, line 8, or block 3, line 6 interest Charge) ' To view the interest rate chant click on www.copyright.gov/ficensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707 4150 or licensing/goophid.gov/ ' To view the linetest rate chant click on www.copyright.gov/ficensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707 4150 or licensing/goophid.gov/ ' To view the linetest rate chant click on www.copyright.gov/ficensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707 4150 or licensing/goophid.gov. ' The is the decimal equivalent of 1365, which is the interest assessment for one day late. NOTE: If you are fling this w	ontier Telepho	one of Rochester Inc	6370
made by satellite carriers to satellite dish owners?       NO         Image Address       Image Address         Name       Name         Maing Address       Maing Address         INTEREST ASSESSMENT       Name         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 (vii) of the general instructions located in the paper SA1-2 form.         Line 1 Enter the amount of late payment or underpayment.       x         Line 2 Multiply line 1 by the interest rate* and enter the sum here       -         x	The Satellite H lowing sentence "In dete service scribers For more inforr located in the p	ome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- e: rmining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." nation on when to exclude these amounts, see the note on page (vii) of the general instructions paper SA1-2 form.	P Special Statement Concerning Gross Receipts Exclusion
Name       Name         Maling Address       Maling Address         INTEREST ASSESSMENT       You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Interest Assessme         Line 1       Enter the amount of late payment or underpayment.       x	made by satelli	te carriers to satellite dish owners?	
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x	Line i Entert		
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Line 3 Multiply line 2 by the number of days late and enter the sum here	Line 2 Multiply	/ line 1 by the interest rate* and enter the sum here	
x 0.00274         Line 4       Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6       \$		xdays	
Line 4 Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	Line 3 Multiply		
in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6		x 0.00274	
(interest charge)         * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.         ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.         NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.         Owner         Address         ID number         First community served		· · ·	
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**Privacy Act Notice**: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.