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

prints correctly

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			
2/27/24	\$			
_,,	ALLOCATION NUMBER			

Return completed workbook by email to:

coplicsoa@loc.gov

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

$\overline{}$	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:										
Accounting	2023/2										
Period											
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 063302										
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Verizon New York Inc.										
				06330	220232						
				063302	2023/2						
	22001 Loudoun County Parkway										
	Ashburn, VA 20147										
C System	INSTRUCTIONS: In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of IDENTIFICATION OF CABLE SYSTEM: Verizon Fios TV (Albany, NY) VHO 15b MAILING ADDRESS OF CABLE SYSTEM: 1161 Washington Ave 2 (Number: street, rural route: apartment, or suite number: Albany, NY 12205 (City, town, state, zip code)										
D	Instructions: For complete space D instructions, see page 1b. Identify o	nly the frst commu	nity served below and relist	on page 1	b						
Area	with all communities.										
Served	CITY OR TOWN	STATE									
First	BETHLEHEM (TOWN)	NY									
Community	Below is a sample for reporting communities if you report multiple cha	. ' '		1							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP		GRP#						
Sample	Alda Alliance	MD MD	A B		2						
	Gering	MD	В		3						
	Solling	IVID			•						

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

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LEGAL NAME OF OWNER OF CABLE SYSTEM:

Verizon New York Inc.

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

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

CITY OR TOWN	STATE
BETHLEHEM (TOWN)	NY
COLONIE (TOWN) COLONIE (VILLAGE)	NY
COLONIE (VILLAGE)	NY
GUILDERLAND (TOWN)	NY
GUILDERLAND (TOWN) SCHENECTADY (CITY) SCOTIA (VILLAGE)	NY
SCOTIA (VILLAGE)	NY

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ACCOUNTING PERIOD: 2023/2

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	063302	
ommunity unit" as within unincorporulist will serve a future filings.	D Area Served	
or all), then either ou report any sta vith a subscriber of		
e each communit designated by a		
CH LINE UP	SUB GRP#	
Α		First
A		Community
A		
Α		
A		See instructions for
		additional information on alphabetization.
	011011011011011011011011011011011011011	
		Add rows as necessary.

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ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 2. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063302 Verizon New York Inc. SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES E 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 Secondary about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the Transmission last day of the accounting period (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 Service: Subdown by categories of secondary transmission service. In general, you can compute the number of subscribers in scribers and each category by counting the number of billings in that category (the number of persons or organizations charged Rates 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. BLOCK 1 BLOCK 2 NO. OF CATEGORY OF SERVICE SUBSCRIBERS RATE CATEGORY OF SERVICE **SUBSCRIBERS** RATE Residential: · Service to first set 42.24 · Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial 35.00 Converter Residential Non-residential 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 F 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 Services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the Other Than 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. Secondary

Transmissions: Rates

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 1				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE	
Continuing Services:		Installation: Non-residential			
• Pay cable	\$ 15.00	Motel, hotel		See Tab Attachment B	
 Pay cable—add'l channel 		Commercial			
 Fire protection 		Pay cable			
 Burglar protection 		 Pay cable-add'l channel 			
Installation: Residential		Fire protection			
• First set	\$ 99.00	Burglar protection			
 Additional set(s) 	\$ 60.00	Other services:			
 FM radio (if separate rate) 		Reconnect			
Converter		Disconnect			
		Outlet relocation	\$ 60.00		
		Move to new address			

Category of Service	Residential Rate	Commercial Rate
Block 1		
Pay Cable	15.00	15.00
Pay Cable - add'l Channel		
Installation - First Set	99.00	99.99
Installation - Additional Set(s)	60.00	34.99
Outlet Relocation	60.00	69.99
Block 2		
Fios Current TV	N/A	45.00
Fios Current TV for Bar/Restaurant	N/A	45.00
Fios TV Local	25.00	35.00
FIOS TV Local for Bar/Restaurant	N/A	35.00
Custom TV Kids & Pop	64.99	N/A
Custom TV Sports & News	64.99	N/A
Custom TV Action & Entertainment	64.99	N/A
Custom TV News & Variety	64.99	N/A
Custom TV Lifestyle & Reality Custom TV Infotainment & Drama	64.99 64.99	N/A N/A
Custom TV Home & Family	64.99	N/A
Fios TV Preferred HD	74.99	95.00
Fios TV Extreme HD	79.99	115.00
Fios TV Ultimate HD	89.99	125.00
Fios Local TV	70.00	N/A
Fios TV Test Drive	85.00	N/A
Your Fios TV	85.00	N/A
More Fios TV	109.00	N/A
The MostFios TV	129.00	N/A
Fios TV Mundo Total	129.00	N/A
Fios TV Mundo	109.00	N/A
Your Fios TV Spotlight Package	85.00	N/A
Sports Pass	14.00	15.00
Sports Pass (Ultimate HD Customers)	N/A	Included
Fox Soccer Plus	14.99	14.99
Fox Soccer Plus (Bar/Rest.)	N/A	Varies
Sports Pass (Bar/Rest.)	N/A	Varies
Cinemax	15.00	15.00
MGM+	15.00	15.00
HBO / HBO Max	15.00	15.00
Showtime	15.00	15.00
Starz	N/A	15.00
Starz/Encore	15.00	N/A
Spanish Language Package	N/A	Varies
Music Choice Package	N/A	34.99
Internaltional Language Packages	Varies	Varies
International Premium Channels On Demand Movies and Games	Varies	N/A
	Varies	Varies
On Demand Subscriptions	Varies Varies	Varies Varies
Pay Per View MLB Extra Innings	149.99	Varies
NBA League Pass	149.99	Varies
NHL Center Ice	99.99	Varies
CableCARD	10.00	10.00
	10.00	10.00
Digital Adapter	12.00	10.00
Set-Top Box First two boxes (each) Set-Top Box: Boxes 3-5 (each)	6.00	11.99
Set-Top Box: Boxes 3-5 (each) Set-Top Box: 6+ boxes	0.00 No additional charg∈	11.99
Streaming device connection bundle	20.00	N/A
Fios Quantum Gateway Router	N/A	N/A

Category of Service	Residential Rate	Commercial Rate
	\$18 rental,	\$15 rental,
Fios Wireless Router	\$299.99 purchase	\$299.99 purchase
	\$18 rental,	\$18 rental,
Verizon Router	\$399.99 purchase	\$399.99 purchase
Fios TV Activation Fee	99.00	99.99
DVR Service	12.00	12.00
Multi-room DVR Enhanced Service	20.00	20.00
Multi-room DVR Premium Service	30.00	30.00
Agent Assistance Fee	10.00	N/A
Fios TV Setup w New Outlets	160.00	N/A
New Outlet Install/Existing Relocation	60.00	69.99
Peak-Time Installation	N/A	49.99
Tech Visit Charge Subsequent	up to \$100	99.99
New Outlet Installation Subsequent	60.00	69.99
Existing Outlet Connection Subsequent	N/A	34.99
Existing Outlet Connection (up to 3)	N/A	89.99
Service Charge	up to \$100.00	120.00/55.00
Set-Top Box Return - UPS/Retail	Free	No Charge
Standard Shipping Charge	N/A	25.00
Expedited Shipping Charge (additional)	N/A	15.00
Set-Top Box Addition (self-install)	N/A	No Charge
Set-Top Box Add/Upgrade	25.00	N/A
TV Equipment Upgrade	50.00	50.00
TV Equipment Tech Install	up to \$100	N/A
Seasonal Service Suspenstion	50.00	N/A
Fios TV Suspend for non payment	50.00	29.99
Fios TV Voice Remote	24.99	24.99
Fios Replacement Remote	15.00	14.99
Unreturned/Damaged FIOS Quantum Router	100.00	N/A
Unreturned/Damaged Fios Router	175.00	up to 175.00
Unreturned/Damaged Verizon Router	200.00	200.00
Unreturned/Damaged CableCARD	70.00	70.00
Unreturned/Damaged Digital Adapter	90.00	90.00
Unreturned/Damaged STB SD	160.00	160.00
Unreturned/Damaged STB Media Client	115.00	N/A
Unreturned/Damaged STB Fios TV One Mini	115.00	115.00
Unreturned/Damaged STB Fios Svc Unit	210.00	210.00
Unreturned/Damaged STB HD	190.00	190.00
Unreturned/Damaged Fios TV+	90.00	N/A
Unreturned/Damaged STB HD DVR	260.00	260.00
Unreturned/Damaged STB Media Server	375.00	N/A
Unreturned/Damaged STB Fios TV One	375.00	375.00

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 063302 Verizon New York Inc. 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 (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) **WNYA** 51 Pittsfield ı No **WRGB** 6 N No Schenectady See instructions for Albany additional information **WXXA** 23 ı No on alphabetization. **WTEN** 10 N No Albany **WMHT** 17 Ε No Schenectady WMHT PBS Kids 17 E-M No Schenectady **WNYT** 13 N No Albany 45 **WCWN** I No Schenectady **WYPX** 55 I No Amsterdam **WNYA-simulcast** 51 I No Pittsfield 6 N **WRGB-simulcast** No Schenectady Albany WXXA-simulcast 23 ı No 10 N No Albany WTEN-simulcast WMHT-simulcast Ε No Schenectady 17 Ν Albany 13 No WNYT-simulcast 45 I WCWN-simulcast No Schenectady WYPX-simulcast 55 I No **Amsterdam** WNYT Me-TV 13 N-M No Albany

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063302 Verizon New York Inc. 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 (Yes or No) **CARRIAGE STATION** NUMBER (If Distant) Pittsfield WNYA Heroes & I 51 I-M No WTEN COZI TV 10 No N-M **Albany** See instructions for additional information WMHT Create 17 E-M No Schenectady on alphabetization. WMHT World 17 Schenectady E-M No **WXXA Grit** 23 I-M No Albany WTEN Antenna T 10 N-M No Albany WXXA DT2 OTBT 23 I-M No **Albany** WRGB TBD TV 6 N-M No Schenectady WRGB CometTV 6 N-M No Schenectady WCWN Charge TV 45 I-M No Schenectady WNYA Light TV 51 I-M No Pittsfield WNYA Catchy Co 51 I-M No **Pittsfield WNYT Start TV** 13 N-M No Albany **WCWN Stadium** 45 I-M No Schenectady WTEN ION Myster 10 N-M No Albany

ACCOUNTING PERIOD: 2023/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 063302 Verizon New York 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** 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 AM or FM LOCATION OF STATION AM or FM S/D LOCATION OF STATION

	SA3E. PAGE 7. AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
	rizon New York Inc.	063302	Name						
Inst all a (as pag	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount you mounts (gross receipts) paid to your cable system by subscribers for the system's second identifed in space E) during the accounting period. For a further explanation of how to come (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	ary transmission service	K Gross Receipts						
	(Amount of gross receipts)								
Instru Con Con If yo fee If yo acc	YRIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: implete block 1, showing your minimum fee. implete block 2, showing whether your system carried any distant television stations. It is stated as the property of the stated and the system did not carry any distant television stations, leave block 3 blank. Enter the amount from block 1 on line 1 of block 4, and calculate the total royalty fee. It is system did carry any distant television stations, you must complete the applicable parts of the property of the schedule to your statement of account.	of the DSE Schedule	Copyright Royalty Fee						
Ψ .	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be end k 3 below.	ntered on line 1 of							
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be enterlow.	ered on line 2 in block							
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	be entered on line							
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period.								
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 6,510,610.84							
	Enter the result here. This is your minimum fee.	\$ 69,272.90							
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the info space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4 "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? X Yes—Complete the DSE schedule.	4, you must check							
Block 3	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	_\$							
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	\$ -							
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 69,272.90	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						
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact the Licensing						
	\$ 725.00	additional fees. Division for the							
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.	¢ 00.007.00	appropriate form for						
	Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 69,997.90	submitting the additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See general instructions located in the paper SA3 form for more information.)	e page (I) or the							

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2023/2

LEGAL NAME OF OWNER OF	CABLE SYST	EM:				S	YSTEM ID#	Name	
Verizon New York Inc.							063302		
SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG						
In General: In space I, identif substitute basis during the ac- explanation of the programmi	counting per	iod, under spec	ific present and former FCC	rules, regulat	ions, or au	thorizations. Fo	r a further	Substitute	
1. SPECIAL STATEMENT	•							Carriage: Special	
During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program									
broadcast by a distant station?									
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.									
2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in									
					EN SUBS		7. REASON		
	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		5. MONTH		CURRED TIMES	FOR DELETION		
TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— TO	DELETION		
						_			
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ACCOUNTING PERIOD: 2023/2 FORM SA3E, PAGE 6.

ACCOUNTING I	PERIOD: 2023/2							FURIVI SA	JE. FAGE
Name	LEGAL NAME OF O		SYSTEM:						TEM ID#
J Part-Time Carriage Log	time carriage du hours your syste Column 1 (C column 5 of spa Column 2 (D curred during th Give the mont "4/10." State the start television statio "app." Example	s space ties in vue to lack of actiem carried that sall sign): Give face G. Lates and hours accounting per hand day when ling and ending in some some cast days.	evated channel capal station. If you need in the call sign of every s of carriage): For eleriod. In the carriage occurrent times of carriage to the ay, you may give an :15 a.m. app."	city, you are req more space, plead distant station weach station, list ed. Use numerathe nearest quar approximate en	ed a station's basis or uired to complete thit ase attach additional whose basis of carrial the dates and hours ls, with the month fire ter hour. In any case ding hour, followed by the the same. Examp	s log giving the pages. age you identifie when part-time st. Example: for where carriage by the abbreviat	total dates and ad by "LAC" in carriage oc- April 10 give a ran to the end ion		
			DATES	AND HOURS	OF PART-TIME CAF	RIAGE			
	CALL SIGN	WHEN	CARRIAGE OCCU	IRRED	CALL SIGN		N CARRIAGE C		ED .
	O'NEE GIGIT	DATE	HOUF FROM	RS TO	O/ LE GION	DATE	FROM	HOURS	ТО
		DATE	FROM	10		DATE	FROIVI		10
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Verizon New York Inc.	063302
M Channels	CHANNELS 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.	
Ghaineis	1. Enter the total number of channels on which the cable system carried television broadcast stations	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted for Further Information	Name Patrick Merrick Telephone 703-447-0209	
	Address 22001 Loudoun Coounty Parkway (Number, street, rural route, apartment, or suite number)	
	Ashburn, VA 20147 (City, town, state, zip)	
	Email patrick.merrick@verizon.com Fax (optional)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) [Owner other than corporation or partnership) am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	/s/ Brandon N. Egren	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	
	Typed or printed name: Brandon N. Egren	
	Title: Assistant Secretary, Verizon New York Inc. (Title of official position held in corporation or partnership)	
	Date: February 28, 2024	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephon 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 is 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

prints correctly

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM	
Verizon New York Inc. 0633	Name Name
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."	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions	Concerning Gross Receipts Exclusion
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
Line 2 Multiply line 1 by the interest rate* and enter the sum here	·
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)	
* 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@loc.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 Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2023/2

DSE SCHEDULE. PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical value given by the Copyright Act to each distant television station carried 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 account (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 G 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 of 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 particular 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 a 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, in 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 been 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 station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or 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 in 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; (2) the total number of DSEs for that group's complement of stations; and (3) 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:

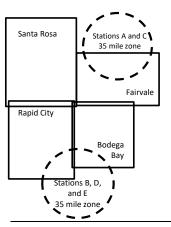
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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.



	Distant Stations Carried		Identification of Subscriber Groups				
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS		
n	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS		
	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 DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00		

Minimum Fee Total Gross Receipts \$600,000.00

x .01064

\$6,384.00

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)

DSE SCHEDULE. PAGE 11. (CONTINUED)

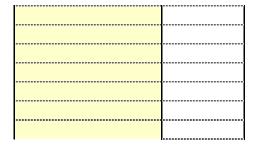
1	EGAL NAME OF OWNER OF CAB	LE SYSTEM:								
' \	Verizon New York Inc.									
	SUM OF DSEs OF CATEGOR		:							
•	Add the DSEs of each statio	n.								
E	Enter the sum here and in line 1 of part 5 of this schedule.									
	nstructions:									
	n the column headed "Call Si	gn": list the call sig	ns of all distant stations id	entified by th						
	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0": for each									
	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for eac mercial educational station, give the DSE as ".25."									
Category "O"	mercial educational station, give the DSE as ".25." CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE						
"""										
"""										
"""										
Add rows as										
necessary.										
Remember to copy all										
formula into new										
ows.										
unu										
1111										
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ACCOUNTING PERIOD: 2023/2

SY	STEM ID:
0.00	
tter "O" in column 5	
n network or noncom-	

	CALL SIGN	DSE
- Landau and Carlotte and Carlo		



Name	Verizon Nev	V York Inc.						S	YSTEM ID# 063302
Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3) Column 2: For each station, give the number of hours your cable system carried the station during the accounting period 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 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 in column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial education 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 that third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions SA3 form.									
Capacity	SA3 form.	(CATEGORY LA	C STATIONS:	COMPUTATI	ON OF DS	Es		
	1. CALL SIGN	2. NUMB OF HO CARRI SYSTE	ER 3. N URS (ED BY S	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	=	5. TYPE VALUE	6. DS	SE
			÷		=				
			÷ ÷		= =				
			÷						
			÷						
			÷ ÷		=				
	Add the DSEs	OF CATEGORY LAC ST of each station. Im here and in line 2 of pa					0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferage in the Broadcast of space I). Column 2: Fat your option. Column 3: EColumn 4: ECOlumn 4: ECOLUMN 5: ECOLUMN	the call sign of each stat l by your system in substict on October 19, 1976 (a one or more live, nonnetwo for each station give the r This figure should corres inter the number of days Divide the figure in column This is the station's DSE (tution for a program of as shown by the letter of live, nonne pond with the informing the calendar year: 2 by the figure in co	hat your system w r "P" in column 7 c nat optional carriag twork programs ca ation in space I 365, except in a le lumn 3, and give t	vas permitted to de of space I); and e (as shown by the arried in substitution eap year. the result in columnary	elete under FC word "Yes" in c on for program	C rules and re olumn 2 of s that were de	letec	
		SL	JBSTITUTE-BAS	SIS STATION	S: COMPUTA	TION OF I	DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMI OF PROC	BER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			÷	=			+		=
			÷	_					_
			÷ ÷	=		***************************************	÷		=
		OF SUBSTITUTE-BASIS	÷ S STATIONS:	=			÷		=
	Add the DSEs of Enter the su	or each station. im here and in line 3 of pa	art 5 of this schedule,				0.00		
5		ER OF DSEs: Give the ar		es in parts 2, 3, an	d 4 of this schedul	e and add the	m to provide th	ne tota	
Total Number		SEs from part 2				и		0.00	
of DSEs		SEs from part 3				u		0.00	
		SEs from part 4 •				u		0.00	
	TOTAL NUMBI	ER OF DSEs					u		0.00

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DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2023/2

LEGAL NAME OF O		SYSTEM:					S	YSTEM ID# 063302	Name
Instructions: Bloc In block A: • If your answer if " schedule.	'Yes," leave the re	emainder of p	•	7 of the DSE sche	dule blank and	d complete par	t 8, (page 16) of t	the	6
If your answer if "	'No," complete blo			TELEVISION M	ΔΡΚΕΤΟ				Computation of
	1981? plete part 8 of the	utside of all i	major and sma		ïned under se		CC rules and reg	ulations in	3.75 Fee
X No—Comp	lete blocks B and	C below.							
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulati ne DSE Sche	ons prior to Ju edule. (Note: Tl	part 2, 3, and 4 of ne 25, 1981. For fune letter M below ro Act of 2010.)	ırther explana	tion of permitte	ed stations, see th	ne	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrivations for the factor of	ules and regued pursuant on as define all education destation (76. or DSE schedant to individually curiously carried the station of the stati	ulations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag dule). ual waiver of F ed on a part-tir within grade-B	ne or substitute ba contour, [76.59(d)(se in effect on 6.57, 76.59(b) e)(1), 76.63(a) 63(a) referring bstitution of gr	June 24, 198 1, 76.61(b)(c), 1 2) referring to 70 1 to 76.61(d)] 2) randfathered so 2) ne 25, 1981	76.63(a) referring 3.61(e)(1) actions in the		
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			orksheet on page	: 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	
			l	l		l			
			או טכע כי ככ	MPUTATION OF	= 3 75 FFF			0.00	
					0.701 LL				
ine 1: Enter the			•					-	
ine 2: Enter the	•							-	
				r of DSEs subjec 7 of this schedul		rate.		0.00	
_ine 4: Enter gro	ss receipts from	space K (p	age 7)				x 0.00	375	Do any of the DSEs represen partially
Line 5: Multiply lii	ne 4 by 0.0375 a	and enter si	ım here						permited/ partially nonpermitted
_ine 6: Enter tota	al number of DSI	Es from line	3				X		carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 ar	nd enter her	e and on line	2, block 3, space	e L (page 7) _,			0.00	o monucuons.

ACCOUNTING PERIOD: 2023/2

DSE SCHEDULE. PAGE 14. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Verizon New York Inc. 063302 Instructions: You must complete this worksheet for those stations identified 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) Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters 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 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN PERIOD **CARRIAGE** DSF Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the 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? No—Proceed to part 8 X Yes—Complete blocks B and C. 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 commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refe 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. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	AME OF OWNER OF CABLE SYSTEM: Verizon New York Inc.	SYSTEM ID# 063302	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	6,510,610.84	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	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? Yes—Complete section 3 below. X No—Complete section 4 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? The system retransmit the signals of any partially distant television stations during the accounting period? 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	DSE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	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 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	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	Yes—Complete part 9 of this schedule. X 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 is 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)	DSE	
	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		

Name		ME OF OWNER OF CABLE SYSTEM: Verizon New York Inc. 0633	ID#			
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.				
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)				
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)				
Exclusivity Surcharge		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)				
		Syndicated Exclusivity Surchargeu \$	<u></u> . !			
8 Computation of Base Rate Fee	6 was In blo If you If you blank What i	chust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below				
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS					
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?					
	Yes—Complete part 9 of this schedule.					
	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATI					
	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)				
		B. Enter 0.00701 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)	1			
		ase Rate Fee	<u> </u>			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#						
Verizon New York Inc. 063302						
Section 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)u \$		8		
	В.	Enter 0.00701 of gross receipts (the amount in section 1) u \$	_	Computation of		
	C.	Multiply line B by 3.000 and enter hereu \$		Base Rate Fee		
		Enter 0.00330 of gross receipts (the amount in section 1) u\$	_			
	E.	Subtract 4.000 from total DSEs (the figure in section 2) and enter hereu				
	F	Multiply line D by line E and enter hereu				
		Add lines A. C. and F. This is your base rate fee.				
	G.	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee u \$	0.00			
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in Space G.						
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude						
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this exclusion, you must:						
First: [Divid	e all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant	to the same	Base Rate Fee and Syndicated		
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of						
DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.						
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.						
How to Identify a Subscriber Group for Partially Distant Stations						
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.						
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)						
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.						
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.						
In each section:						
 Identify the communities/areas represented by each subscriber group. Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group. 						
• lf:	. 0./24	com is located whelly outside all major and emaller television markets, sive each station's DCF as well as it	in parts 2 2			
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,						
any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.						
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.						
 Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form. 						
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.						