### THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 201 SA3

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

### **Long Form**

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are at the end of this form [pages i-viii].

		Return to:
FOR COPYRIGHT	Library of Congress  Copyright Office	
DATE RECEIVED	AMOUNT	Licensing Division
		101 Independence Ave. SE
8/27/2019	\$	Washington, DC 20557-6400 (202) 707-8150
	ALLOCATION NUMBER	For courier deliveries, see
		page ii of the general instructions

A	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:						
Accounting Period		January 1 - June 30, 2019					
<b>B</b> Owner	rate	ructions: Your file has been established under the information given below received information and print or type the correct information beside it.  Give the full legal name of the owner of the cable system. If the owner is title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the busin If there were different owners during the accounting period, only the owner legille statement of account and royalty fee payment covering the entire account of the conduction of the conduction of the covering the entire account of the covering the entire account of the covering the system's list filing. If not, enter the system's list filing.	a subsidiary of and ess of the cable sys er on the last day of counting period.	other corporation, give the stem f the accounting period s	e full corpo- hould submii		
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM					
		CSC HOLDINGS, LLC					
				*0	0758720191*		
					007587 2019/1		
		1 Court Square, 45th Floor					
		Long Island City, NY 11101					
_	INS	TRUCTIONS: In line 1, give any business or trade names used to	identify the husin	ess and operation of t	he system unless thes		
С		nes already appear in space B. In line 2, give the mailing address of					
System	_	IDENTIFICATION OF CABLE SYSTEM:					
	ı	Altice USA, Inc.					
		MAILING ADDRESS OF CABLE SYSTEM:					
	2	(Number, street, rural route, apartment, or suite number)					
	_	(Maniper, edece, Mara reace, aparation, or calle nation)					
		(City, town, state, zip code)					
D	Ins	tructions: For complete space D instructions, see page 1b. Identif	y only the frst con	nmunity served below	and relist on page 1b		
Area	with	n all communities.					
Served		CITY OR TOWN	STATE				
First		Amityville	NY				
Community	В	elow is a sample for reporting communities if you report multiple ch	nannel line-ups in	Space G.			
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#		
Sample	Ald		MD	A	1		
	Allia	ance ing	MD MD	B B	3		
	001	····s	1110		•		

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 effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

Form SA3c Rev: 04/2011

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name		
CSC HOLDINGS, LLC			007587	Hallic		
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.						
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or modelow the identified city or town.	bbile home parks should	be reported in pare	ntheses			
If all communities receive the same complement of television broadcast stations	s (i.e., one channel line i	in for all) then eith	er associate			
all communities with the channel line-up "A" in the appropriate column below or	<b>'</b>	. ,,				
on a partially distant or partially permitted basis in the DSE Schedule, associate designated by a number (based on your reporting from Part 9).	e each relevant communi	ity with a subscribe	r group,			
when reporting the carriage of television broadcast stations on a community-by	/-community basis, asso	ciate each commun	ity with a			
channel line-up designated by an alpha-letter(s) (based on your Space G repor	ting) and a subscriber gr					
(based on your reporting from Part 9 of the DSE Schedule) in the appropriate c	olumns below.	1				
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#			
Amityville	NY	AA	1	First		
Asharoken	NY	AA	1	Community		
Atlantic Beach	NY	AA	1			
Babylon Town	NY	AA	1			
Babylon Village	NY	AA	1			
Baxter Estates	NY	AA	1			
Bayville	NY	AA 	11			
Belle Terre	NY	AE	4			
Bellerose	NY	AA	1			
Bellport	NY	AC	2			
Brightwaters	NY	AE	4			
Brookhaven	NY	AC	2			
Brookhaven (Hauppauge)	NY	AE	4			
Brookville Codeshared	NY	AA	1			
Cedarhurst Centre Island	NY NY	AA AA	1			
Cove Neck	NY	AA AA	1			
Dering Harbor	NY	AD	3			
East Hampton Town	NY	AD	3			
East Hampton Village	NY	AD	3			
East Hills	NY	AA	1			
East Rockaway	NY	AA	1			
East Williston	NY	AA	1			
Farmingdale	NY	AA	1			
Floral Park	NY	AA	1			
Flower Hill	NY	AA	1			
Freeport	NY	AA	1			
Garden City	NY	AA	1			
Glen Cove	NY	AA	1			
Great Neck Estates	NY	AA	1			
Great Neck Plaza	NY	AA	1			
Great Neck Town	NY	AA	1			
Greenport	NY	AD	3			
Head-of-the-Harbor	NY	AE	4			
Hempstead Town	NY	AA	1			
Hempstead Village	NY	AA	1			
Hewlett Bay Park Hewlett Harbor	NY NY	AA	1			
Hewlett Neck Village	NY NY	AA AA	1			
Huntington Bay	NY	AA	1			
Huntington Town	NY	AA	1			
Island Park	NY	AA	1			
vivia i wiil			=			
Islandia	NY	AE	4			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CSC HOLDINGS, LLC			007587	Name		
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form						
areas and including single, discrete unincorporated areas." 47 C.F.R. §7 of system identifcation hereafter known as the "first community." Please			as a form	Area Served		
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums below the identified city or town.	s, or mobile home parks should	be reported in pare	ntheses			
If all communities receive the same complement of television broadcast	stations (i.e., one channel line-u	ip for all), then eith	er associate			
all communities with the channel line-up "A" in the appropriate column bon a partially distant or partially permitted basis in the DSE Schedule, as designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a commichannel line-up designated by an alpha-letter(s) (based on your Space (	ssociate each relevant communi unity-by-community basis, assoc G reporting) and a subscriber gr	ty with a subscriber	r group, ity with a			
(based on your reporting from Part 9 of the DSE Schedule) in the appropriate CITY OR TOWN	priate columns below.	CH LINE UP	SUB GRP#			
Islip (Amityville)	NY	AA	1	First		
Islip (Hauppauge)	NY	AE	4	Community		
Kensington	NY	AA	1	Community		
Kings Point	NY	AA	1			
Lake Grove	NY	AC	2			
Lake Success	NY	AA	1			
Lattingtown	NY	AA	1			
Laurel Hollow	NY	AA	1			
Lawrence	NY	AA	1			
Lindenhurst	NY	AA	1			
Lloyd Harbor	NY	AA	1			
Long Beach	NY	AA	1			
Lynbrook	NY	AB	1			
Malverne	NY	AA	1			
Manorhaven	NY	AA	1			
Massapequa Park	NY	AA	1			
Mastic Beach	NY	AC	2			
Matinecock	NY	AA	1			
Mill Neck	NY	AA	1			
Mineola	NY	AA	1			
Munsey Park	NY	AA	1			
Muttontown	NY	AA	1			
New Hyde Park	NY	AA	1			
Nissequogue	NY	AE	4			
North Haven	NY	AD	3			
North Hempstead	NY	AA	1			
North Hills	NY	AA	1			
Northport	NY	AA	1			
Old Brookville	NY	AA	11			
Old Field	NY	AE	4			
Old Westbury	NY	AA	1			
Oyster Bay	NY	AA	1			
Oyster Bay Cove	NY	AA	1			
Patchogue	NY	AC	2			
Plandome Heights	NY	AA	1			
Plandome Manor Plandome Village	NY NY	AA AA	1			
Plandome Village Poquott	NY	AA AC	2			
Port Washington	NY	AA	1			
Port Washington Quogue	NY NY	AD	3			
Riverhead	NY	AD AD	3			
	IN I	ΛU	J			
***************************************	NV	ΛΛ	1			
Rockville Centre Roslyn	NY NY	AA AA	1			

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name		
CSC HOLDINGS, LLC			007587			
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.						
Note: Entities and properties such as hotels, apartments, condominiums, or a pelow the identified city or town.	•	ŭ	ntheses			
f all communities receive the same complement of television broadcast static	one (i.e., one channel line :	in for all) than aith	or accopiate			
all communities receive the same complement of television broadcast stated all communities with the channel line-up "A" in the appropriate column below on a partially distant or partially permitted basis in the DSE Schedule, associates designated by a number (based on your reporting from Part 9).  When reporting the carriage of television broadcast stations on a community-channel line-up designated by an alpha-letter(s) (based on your Space G rep (based on your reporting from Part 9 of the DSE Schedule) in the appropriate	or leave the column blank ate each relevant commun by-community basis, asso orting) and a subscriber gr	If you report any s ity with a subscribe ciate each commun	tations r group, nity with a			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#			
Roslyn Estates	NY	AA	1	First		
Roslyn Harbor	NY	AA	1	Community		
Russell Gardens	NY	AA	1	- ·		
Saddle Rock	NY	AA	1			
Sag Harbor	NY	AD	3			
Sagaponack	NY	AD	3			
Sands Point	NY	AA	1			
Sea Cliff	NY	AA	1			
Shelter Island	NY	AD	3			
Shinnecock Reservation	NY	AD	3			
Shoreham	NY	AE	4			
Smithtown	NY	AE AE	4			
South Floral Park	NY NY	AA	1			
Southampton Town	NY	AD	3			
Southampton Village	NY	AD	3			
Southold	NY	AD	3			
Stewart Manor	NY	AA	1			
Thomaston	NY	AA	1			
Upper Brookville	NY	AA	1			
Valley Stream	NY	AA . –	1			
Village of Port Jefferson	NY	AE	4			
Village of The Branch	NY	AE	4			
West Hampton Dunes	NY	AD	3			
Westbury	NY	AA	1			
Westhampton Beach	NY	AD	3			
Williston Park	NY	AA	1			
Woodsburgh	NY	AA	1			
			***************************************			

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CSC HOLDINGS, LLC

SYSTEM ID#

007587

### E

### Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

**In General:** The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

**Number of Subscribers:** Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

**Rate:** Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

**Block 1:** In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

**Block 2:** If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLO	OCK 1			BLOCK 2
	NO. OF			NO. OF
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE SUBSCRIBERS RATE
Residential:				
<ul> <li>Service to first set</li> </ul>	636,863	\$	24.99	
<ul> <li>Service to additional set(s)</li> </ul>				
<ul> <li>FM radio (if separate rate)</li> </ul>				
Motel, hotel				
Commercial	40,126	\$	23.95	
Converter				
<ul> <li>Residential</li> </ul>				
Non-residential				
	ļ	<b>†</b>		

### F

Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

**Block 1:** Give the standard rate charged by the cable system for each of the applicable services listed.

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

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
<ul> <li>Pay cable</li> </ul>	1.50/house	Motel, hotel		VALUE	\$ 64.95
<ul> <li>Pay cable—add'l channel</li> </ul>	1.95-39.95	Commercial		CORE	\$59.95
<ul> <li>Fire protection</li> </ul>		Pay cable		PREFERRED	\$ 74.95
<ul> <li>Burglar protection</li> </ul>		Pay cable-add'l channel		SILVER	\$ 89.95
Installation: Residential		Fire protection		GOLD	\$ 109.95
First set		Burglar protection		PREMIER	\$ 104.95
<ul> <li>Additional set(s)</li> </ul>	\$ 25.00	Other services:		CableCARD	\$ 2.50
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect		CONVERTER	\$10/\$11
<ul> <li>Converter</li> </ul>		Disconnect			
		Outlet relocation			
		Move to new address			

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CSC HOLDINGS, LLC

PRIMARY TRANSMITTERS: TELEVISION

SYSTEM ID#
Name

Name

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

**Substitute Basis Stations:** With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report 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.

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.

**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.

**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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP				AA	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WABC	7	N	No		NEW YORK, NY
WABC-2	7.2	N-M	No		NEW YORK, NY
WABC-3	7.3	I-M	No		NEW YORK, NY
WCBS	2	N	No		NEW YORK, NY
WCBS-2	2.2	N-M	No		NEW YORK, NY
WFTY	67	I	No		SMITHTOWN, NY
WFTY-4	67.4	I-M	No		SMITHTOWN, NY
WJLP	33	I	No		MIDDLETOWN, NJ
WLIW	21	E	No		GARDEN CITY, NY
WLIW-2	21.2	E-M	No		GARDEN CITY, NY
WLIW-3	21.3	E-M	No		GARDEN CITY, NY
WLNY	55	I	No		RIVERHEAD, NY
WMBC	63	I	No		NEWTON, NJ
WNBC	4	N	No		NEW YORK, NY
WNBC-2	4.2	N-M	No		NEW YORK, NY
WNET	13	E	No		NEWARK, NJ
WNET-2	13.2	E-M	No		NEWARK, NJ
WNJU	47	I	No		LINDEN, NJ

Primary Transmitters: Television

G

**Primary** 

Transmitters:

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CSC HOLDINGS, LLC

Name

Name

### PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

**Substitute Basis Stations:** With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

**Column 1:** List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report 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.

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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.

**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.

**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 identified. **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AA (cont.)	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WNJU-2	47.2	I-M	No		LINDEN, NJ
WNYE	25	E	No		NEW YORK, NY
WNYW	5	I	No		NEW YORK, NY
WNYW-2	5.2	I-M	No		NEW YORK, NY
WPIX	11	I	No		NEW YORK, NY
WPIX-2	11.2	I-M	No		NEW YORK, NY
WPIX-3	11.3	I-M	No		NEW YORK, NY
WPXN	31	I	No		NEW YORK, NY
WRNN	48	I	No		KINGSTON, NY
WTBY	54	I	No		POUGHKEEPSIE, NY
WWOR	9	I	No		SECAUCUS, NJ
WWOR-3	9.3	I-M	No		SECAUCUS, NJ
WWOR-4	9.4	I-M	No		SECAUCUS, NJ
WXTV	41	I	No		PATERSON, NJ
WASA	24	I	No		PORT JERVIS, NY
WFUT	68	I	No		NEWARK, NJ
WLIW-4	21.4	E-M	No		GARDEN CITY, NY
WWOR-4 WXTV WASA WFUT	9.4 41 24 68	I-M I I	No No No		SECAUCUS, NJ PATERSON, NJ PORT JERVIS, NY NEWARK, NJ

FORM SA3. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS, LLC** 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. 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. 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. 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. 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 AB 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) WABC 7 Ν No **NEW YORK, NY** WABC-2 7.2 N-M No **NEW YORK, NY** WABC-3 7.3 I-M No **NEW YORK, NY WCBS** 2 Ν No **NEW YORK, NY** 2.2 N-M No **NEW YORK, NY** WCBS-2 WFTY 67 ı No SMITHTOWN, NY WFTY-4 67.4 I-M No SMITHTOWN, NY **WJLP** 33 I No MIDDLETOWN, NJ WLIW 21 Ε No **GARDEN CITY, NY** WLIW-2 21.2 E-M No **GARDEN CITY, NY** WLIW-3 21.3 E-M No **GARDEN CITY, NY** WLNY 55 No RIVERHEAD, NY ı **WMBC** 63 I No **NEWTON, NJ WNBC** 4 N No **NEW YORK, NY** WNBC-2 4.2 N-M No **NEW YORK, NY** 13 Ε No WNET NEWARK, NJ

WNET-2

**WNJN** 

13.2

50

E-M

Ε

No

No

**NEWARK, NJ** 

MONTCLAIR, NJ

G

**Primary** 

Transmitters:

Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS, LLC** 

### PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify, each multicast stream associated with a station according to its over-the-air designation. For example, report 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 ir 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 noncommercia 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

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable systen 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 subjec 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 designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AB (cont.)	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WNJN-2	50.2	E-M	No		MONTCLAIR, NJ
WNJU	47	I	No		LINDEN, NJ
WNJU-2	47.2	I-M	No		LINDEN, NJ
WNYE	25	Е	No		NEW YORK, NY
WNYW	5	I	No		NEW YORK, NY
WNYW-2	5.2	I-M	No		NEW YORK, NY
WPIX	11	I	No		NEW YORK, NY
WPIX-2	11.2	I-M	No		NEW YORK, NY
WPIX-3	11.3	I-M	No		NEW YORK, NY
WPXN	31	I	No		NEW YORK, NY
WRNN	48	I	No		KINGSTON, NY
WTBY	54	I	No		POUGHKEEPSIE, NY
WWOR	9	I	No		SECAUCUS, NJ
WWOR-3	9.3	I-M	No		SECAUCUS, NJ
WWOR-4	9.4	I-M	No		SECAUCUS, NJ
WXTV	41	I	No		PATERSON, NJ
WASA	24	I	No		PORT JERVIS, NY
WFUT	68	I	No		NEWARK, NJ
WLIW-4	21.4	E-M	No		GARDEN CITY, NY

FORM SA3. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS, LLC** 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. 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. 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. 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. 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 AC 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) WABC 7 Ν No **NEW YORK, NY** WABC-2 7.2 N-M No **NEW YORK, NY** WABC-3 7.3 I-M No **NEW YORK, NY WCBS** 2 Ν No **NEW YORK, NY** 2.2 N-M No **NEW YORK, NY** WCBS-2 WFTY 67 ı No SMITHTOWN, NY WFTY-4 67.4 I-M No SMITHTOWN, NY **WJLP** 33 I No MIDDLETOWN, NJ WLIW 21 Ε No **GARDEN CITY, NY** WLIW-2 21.2 E-M No **GARDEN CITY, NY** WLIW-3 21.3 E-M No **GARDEN CITY, NY** 55 **WLNY** No RIVERHEAD, NY ı WNBC 4 Ν No **NEW YORK, NY** WNBC-2 4.2 N-M No **NEW YORK, NY WNET** 13 Ε No **NEWARK, NJ** WNET-2 13.2 E-M No NEWARK, NJ **WNJU** 47 No LINDEN, NJ ı

LINDEN, NJ

WNJU-2

47.2

I-M

No

**Primary** 

Transmitters:

Television

FORM SA3. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS, LLC** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G

carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

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- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

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.

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.

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.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AC (cont.)	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WNYE	25	E	No		NEW YORK, NY
WNYW	5	I	No		NEW YORK, NY
WNYW-2	5.2	I-M	No		NEW YORK, NY
WPIX	11	I	No		NEW YORK, NY
WPIX-2	11.2	I-M	No		NEW YORK, NY
WPIX-3	11.3	I-M	No		NEW YORK, NY
WPXN	31	I	No		NEW YORK, NY
WTBY	54	I	No		POUGHKEEPSIE, NY
WWOR	9	I	No		SECAUCUS, NJ
WWOR-3	9.3	I-M	No		SECAUCUS, NJ
WWOR-4	9.4	I-M	No		SECAUCUS, NJ
WXTV	41	I	No		PATERSON, NJ
WASA	24	I	No		PORT JERVIS, NY
WFUT	68	I	No		NEWARK, NJ
WLIW-4	21.4	E-M	No		GARDEN CITY, NY
WVVH	50	I	No		SOUTHAMPTON, NY

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS, LLC** 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. 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. 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. 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. 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 AD 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 2. B'CAST 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) **WABC** No **NEW YORK, NY** 7 Ν WABC-2 7.2 N-M No **NEW YORK, NY** WABC-3 7.3 I-M No **NEW YORK, NY WCBS** 2 No **NEW YORK, NY** Ν WCBS-2 2.2 N-M No **NEW YORK, NY** WFTY 67 ı No SMITHTOWN, NY WFTY-4 67.4 I-M No SMITHTOWN, NY **WJLP** No ı MIDDLETOWN, NJ 33 WLIW 21 Ε Yes 0 **GARDEN CITY, NY** WLIW-2 21.2 E-M Yes Ε **GARDEN CITY, NY** Ε WLIW-3 21.3 E-M Yes **GARDEN CITY, NY** WLIW-4 21.4 E-M Yes Ε **GARDEN CITY, NY WLNY** 55 No RIVERHEAD, NY ı **WNBC** 4 N No **NEW YORK, NY** WNBC-2 4.2 N-M **NEW YORK, NY** No **WNET** 13 0 Ε Yes **NEWARK, NJ** WNET-2 13.2 E-M Ε Yes **NEWARK, NJ** WNJU 47 ı No LINDEN, NJ WNJU-2 LINDEN, NJ 47.2 I-M No

**ACCOUNTING PERIOD: 2019/1** FORM SA3. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS, LLC** 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. 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. 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. 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. 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-LIP AD (cont.)

1. CALL SIGN  2. B'CAST CHANNEL NUMBER  2. B'CAST CHANNEL NUMBER  3. TYPE OF CYES OF NO)  5. BASIS OF CARRIAGE (If Distant)  NEW YORK, NY  NEW			CHANN	EL LINE-UP	AD (cont.)	
WNYW-2         5.2         I-M         No         NEW YORK, NY           WPIX         11         I         No         NEW YORK, NY           WPIX-2         11.2         I-M         No         NEW YORK, NY           WPIX-3         11.3         I-M         No         NEW YORK, NY           WPXN         31         I         No         NEW YORK, NY           WTBY         54         I         No         POUGHKEEPSIE, NY           WVVH         50         I         No         SOUTHAMPTON, NY           WWOR         9         I         No         SECAUCUS, NJ           WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY		CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
WPIX         11         I         No         NEW YORK, NY           WPIX-2         11.2         I-M         No         NEW YORK, NY           WPIX-3         11.3         I-M         No         NEW YORK, NY           WPXN         31         I         No         NEW YORK, NY           WTBY         54         I         No         POUGHKEEPSIE, NY           WVVH         50         I         No         SOUTHAMPTON, NY           WWOR         9         I         No         SECAUCUS, NJ           WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WNYW	5	I	No		NEW YORK, NY
WPIX-2         11.2         I-M         No         NEW YORK, NY           WPIX-3         11.3         I-M         No         NEW YORK, NY           WPXN         31         I         No         NEW YORK, NY           WTBY         54         I         No         POUGHKEEPSIE, NY           WVVH         50         I         No         SOUTHAMPTON, NY           WWOR         9         I         No         SECAUCUS, NJ           WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WNYW-2	5.2	I-M	No		NEW YORK, NY
WPIX-3         11.3         I-M         No         NEW YORK, NY           WPXN         31         I         No         NEW YORK, NY           WTBY         54         I         No         POUGHKEEPSIE, NY           WVVH         50         I         No         SOUTHAMPTON, NY           WWOR         9         I         No         SECAUCUS, NJ           WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WPIX	11	I	No		NEW YORK, NY
WPXN         31         I         No         NEW YORK, NY           WTBY         54         I         No         POUGHKEEPSIE, NY           WVVH         50         I         No         SOUTHAMPTON, NY           WWOR         9         I         No         SECAUCUS, NJ           WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WPIX-2	11.2	I-M	No		NEW YORK, NY
WTBY         54         I         No         POUGHKEEPSIE, NY           WVVH         50         I         No         SOUTHAMPTON, NY           WWOR         9         I         No         SECAUCUS, NJ           WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WPIX-3	11.3	I-M	No		NEW YORK, NY
WVVH         50         I         No         SOUTHAMPTON, NY           WWOR         9         I         No         SECAUCUS, NJ           WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WPXN	31	l	No		NEW YORK, NY
WWOR         9         I         No         SECAUCUS, NJ           WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WTBY	54	l	No		POUGHKEEPSIE, NY
WWOR-3         9.3         I-M         No         SECAUCUS, NJ           WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WVVH	50	l	No		SOUTHAMPTON, NY
WWOR-4         9.4         I-M         No         SECAUCUS, NJ           WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WWOR	9	I	No		SECAUCUS, NJ
WXTV         41         I         No         PATERSON, NJ           WASA         24         I         No         PORT JERVIS, NY	WWOR-3	9.3	I-M	No		SECAUCUS, NJ
WASA 24 I No PORT JERVIS, NY	WWOR-4	9.4	I-M	No		SECAUCUS, NJ
	WXTV	41	l	No		PATERSON, NJ
WFUT 68 I NO NEWARK, NJ	WASA	24	l	No		PORT JERVIS, NY
	WFUT	68	I	No		NEWARK, NJ

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM Name 007587 **CSC HOLDINGS, LLC** 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. 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. 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. 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. 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 AE 3. TYPE 5. BASIS OF 1. CALL 2. B'CAST 4. DISTANT? 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) WABC No **NEW YORK, NY** 7 Ν WABC-2 7.2 N-M No **NEW YORK, NY** WABC-3 7.3 I-M No **NEW YORK, NY** 2 WCBS No **NEW YORK, NY** Ν WCBS-2 2.2 N-M No **NEW YORK, NY** WFTY 67 ı No SMITHTOWN, NY I-M WFTY-4 67.4 No SMITHTOWN, NY **WJLP** 33 ı No MIDDLETOWN, NJ WLIW 21 Ε No **GARDEN CITY, NY** WLIW-2 21.2 E-M No **GARDEN CITY, NY** WLIW-3 21.3 E-M No **GARDEN CITY, NY** WLIW-4 21.4 E-M No **GARDEN CITY, NY WLNY** 55 No RIVERHEAD, NY ı **WMBC** 63 I No **NEWTON, NJ WNBC** 4 Ν No **NEW YORK, NY** WNBC-2 N-M **NEW YORK, NY** 4.2 No **WNET** 13 Ε No **NEWARK, NJ** WNET-2 13.2 E-M No **NEWARK, NJ WNJU** 47 LINDEN, NJ ı No

FORM SA3. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS, LLC** 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. 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. 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. 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. 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 AE (cont.) 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) WNJU-2 47.2 I-M No LINDEN, NJ WNYE 25 Ε No **NEW YORK, NY** WNYW 5 No **NEW YORK, NY** ı WNYW-2 No 5.2 I-M **NEW YORK, NY WPIX** 11 No **NEW YORK, NY** WPIX-2 11.2 I-M No **NEW YORK, NY** WPIX-3 11.3 I-M No **NEW YORK, NY WPXN** 31 I No **NEW YORK, NY WTBY** 54 No POUGHKEEPSIE, NY ı **WWOR** 9 No SECAUCUS, NJ WWOR-3 9.3 I-M No SECAUCUS, NJ WWOR-4 9.4 I-M No SECAUCUS, NJ **WXTV** 41 I No PATERSON, NJ **WASA** 24 I No PORT JERVIS, NY **WFUT** 68 ı No **NEWARK. NJ** 

**ACCOUNTING PERIOD: 2019/1** FORM SA3. PAGE 4. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS, LLC** 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. 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 S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SA3. PAGE 5.						ACCOUNTING	5 PERIOD: 2019/1
LEGAL NAME OF OWNER OF	CABLE SYST	ГЕМ:			(	SYSTEM ID#	N.
CSC HOLDINGS, LLC						007587	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEME	NT AND PROGRAM LO	3			•
In General: In space I, identi substitute basis during the ac explanation of the programm	counting pe	riod, under spe	cific present and former FC	C rules, regula	ations, or authorizations. I		Substitute
1. SPECIAL STATEMENT	CONCER	NING SUBST	TITUTE CARRIAGE				Carriage:
During the accounting peri broadcast by a distant star		r cable system	carry, on a substitute basi	s, any nonne		No ⊠No	Special Statement and Program Log
<b>Note:</b> If your answer is "No' log in block 2.	, leave the	rest of this pag	e blank. If your answer is '	Yes," you mu	ust complete the progran	n	
period, was broadcast by a under certain FCC rules, reponent use general categori "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call column 4: Give the broathe case of Mexican or Can Column 5: Give the monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. Stated as "6:00–6:30 p.m."	ce, please a of every nor distant statis gulations, on es like "mor Bulls." In was broad sign of the siddeast static adian statio th and day the "5/7." The swhen the Example: a per "R" if the nd regulation of the regulation of the sample of	attach additional network televition and that your authorizations vies" or "baske deast live, enter station broadca on's location (thins, if any, the content of the your system of the program carried listed program ons in effect du	al pages. sion program (substitute pur cable system substitute s. See page (vi) of the gentball." List specific program "Yes." Otherwise enter "Nating the substitute prograe community to which the community with which the sem carried the substitute program was carried by your ed by a system from 6:01: was substituted for prograring the accounting period	rogram) that, d for the progeral instruction titles, for exitor.  o."  m. station is lice station is iderorogram. Use cable system. 5 p.m. to 6:2 mming that y enter the let	during the accounting tramming of another state on sor further information ample, "I Love Lucy" or ensed by the FCC or, in natified).  I have List the times accurated as:30 p.m. should be cour system was required ter "P" if the listed pro	ion n. th	
enection October 19, 1970.				WHE	EN SUBSTITUTE	7. REASON	
S		E PROGRAM			IAGE OCCURRED	FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION	
					<u> </u>		
					_		
						"	
						"	
					<u> </u>		
		·					
					_		

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ACCOUNTING PERIOD: 2019/1 FORM SA3. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **CSC HOLDINGS, LLC** 007587 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates an hours your system carried that station. If you need more space, please attach additional pages Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." · State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviatio "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m. 12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

LEGAL	A3. PAGE 7.  NAME OF OWNER OF CABLE SYSTEM:  CHOLDINGS, LLC		SYSTEM ID# 007587	Name
GRO Instr all an	OSS RECEIPTS uctions: The figure you give in this space determines the form you fle and the amount young (gross receipts) paid to your cable system by subscribers for the system's second entifed in space E) during the accounting period. For a further explanation of how to condition (vii) of the general instructions.	dary trans	nter the total of mission service	K Gross Receipt
(	Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  DRTANT: You must complete a statement in space P concerning gross receipts.	\$ (Ar	70,032,779.92 mount of gross receipts)	
recomplete Complete C	RIGHT ROYALTY FEE  Itions: Use the blocks in this space L to determine the royalty fee you owe:  plete block 1, showing your minimum fee.  plete block 2, showing whether your system carried any distant television stations.  ur system did not carry any distant television stations, leave block 3 blank. Enter the amount of block 1 on line 1 of block 4, and calculate the total royalty fee.  ur system did carry any distant television stations, you must complete the applicable part mpanying this form and attach the schedule to your statement of account.	s of the D	SE Schedule	L Copyright Royalty Fee
block	t 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be 6 3 below.			
3 bel				
	t 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	be enter	ed on line	
1 !	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee i system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K		ercent of the	
	Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.			
	This is your minimum fee.	\$	745,148.78	
	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and c	4, you m	ust 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	_ \$	\$ 44,283.27	
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00	
I	Line 3. Add lines 1 and 2 and enter here	\$	44,283.27	
lock 4	Line 1. <b>BASE RATE FEE/3.75 FEE or MINIMUM FEE</b> : 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	\$	745,148.78	Cable systen
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> 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 und Section 111(d should conta the Licensin
	TOTAL ROYALTY FEE. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	745,148.78	Division for the appropriate form for
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Segeneral instructions for more information.)	ee page (i)	) of the	submitting the

ACCOUNTING PERIOD: 2019/1

FORM SA3, PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CSC HOLDINGS, LLC  007587
M	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.
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations
	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 to whom we can write or call about this statement of account.)
Be Contacted for Further Information	Name Sarah Bogue Telephone 903-579-3121
	Address 3015 SSE Loop 323 (Number, street, rural route, apartment, or suite number)
	Tyler, TX 75701 (City, town, state, zip)
	Email (optional) Sarah.Bogue@AlticeUSA.com Fax (optional)
0	<b>CERTIFICATION</b> (This statement of account must be certifed and signed in accordance with Copyright Offce regulations, as explained in the general instructions.)
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or
	(Agent of owner other than corporation or partnership) I 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 identified 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)]
	Handwritten signature: /s/ Alan Dannenbaum
	Typed or printed name: Alan Dannenbaum
	Title: Senior Vice President, Programming (Title of official position held in corporation or partnership)
	Date: 8/25/2019

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 effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CSC HOLDINGS, LLC	007587	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 addin lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for th service of providing secondary transmissions of primary broadcast transmitters, the system shall not i scribers and amounts collected from subscribers receiving secondary transmissions pursuant to secti	e basic nclude sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instruction.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners?  X NO  YES. Enter the total here and list the satellite carrier(s) below		Concerning Gross Receipts Exclusion
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 under For an explanation of interest assessment, see page (viii) of the general instructions.	erpayment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest
x		Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	<b>-</b> days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	- st charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assista contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	nce please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Office please list below the owner, address, frst community served, accounting period, and ID number as given in the filing.		
Owner Address		
First community served		
Accounting period		
ID number		

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

### 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 numbe of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions.

### 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 SA3 (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 SA3, 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 SA3 (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 FeeBase Rate Fee/3.75 Percent Fee. All cable systems fling SA3 (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 DSF 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

4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

- 5. Calculate a separate base rate fee for each subscriber group, using (1) 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).

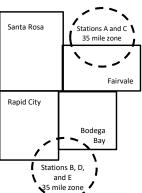
The example below is intended to supplement the instructions for calculating only the base rate fee for partially distant stations. The cable system would also be subject to the Syndicated Exclusivity Surcharge for partially distant stations, if any portion is located within a major television market.

### **EXAMPLE:**

### COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS

In most cases unde rules, all of Fairvale the local service area A and C and all of Ra dega Bay would be service areas of stati

er current FCC
would be within
of both stations
pid City and Bo-
within the local
ons B, D, and E.



Distant Stations Carrie	d	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
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)

#### LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 1 **CSC HOLDINGS, LLC** 007587 Instructions: 2 In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-Computation of DSEs for mercial educational station, give the DSE as ".25." Category "O" CATEGORY "O" STATIONS: DSEs Stations **CALL SIGN** DSE **CALL SIGN** DSE CALL SIGN DSE WLIW 0.25 WNET 0.25

### SUM OF DSEs OF CATEGORY "O" STATIONS:

Add the DSEs of each station.

Enter the sum here and in line 1 of part 5 of this schedule.

0.50

	LEGAL NAME O	F OWNER OF CABLE SYS	STEM:					S	YSTEM ID#
Name	CSC HOLD	INGS, LLC							007587
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	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. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions.)								
Capacity			CATEGOR	RY LAC STATION	JS: COMPLI	ΤΔΤΙΩΝ Ω	F DSFs		
	1. CALL SIGN	2. NUN OF I CAR	MBER HOURS RIED BY TEM	3. NUMBER OF HOURS STATION ON AIR	4. BASIS C CARRIA VALUE	)F .GE	5. TYPE VALUE		E
			÷					=	
			_					=	
						x			
			÷			X		=	
			-		=			=	
			÷		=	х		=	
	Add the DSE	Es OF CATEGORY is of each station. sum here and in line					0.00		
Computation of DSEs for Substitute-Basis Stations	Was carritions in e     Broadcas     space I).     Column 2 at your option     Column 3 Column 4	Sive the call sign of e ed by your system in ffect on October 19, t one or more live, no call for each station gin. This figure should call the call for the figure in this is the station's	substitution 1976 (as sho nnetwork prove the number correspond of days in the column 2 by	for a program that yo wan by the letter "P" i ograms during that op er of live, nonnetwork with the information calendar year: 365, the figure in column	our system was n column 7 of spational carriage (and programs carring space I. except in a least 3, and give the	permitted to pace I); and as shown by the ied in substitute by year.	delete under ne word "Yes" ution for prog nmn 4. Round	FCC rules and reg in column 2 of rams that were de I to no less than th	leted
		SI	JBSTITUT	E-BASIS STATI	ONS: COMF	PUTATION	OF DSEs		
	1. CALL	2. NUMBER	3. NUME		1. CALL	2. NUM	1BER	3. NUMBER	4. DSE
	SIGN	OF PROGRAMS	OF DA		SIGN	OF PRC	GRAMS	OF DAYS IN YEAR	
		- intoortaino					_	114 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	=
		4		=			÷		=
		-							
				=			_		_
		-		=			÷		=
	Add the DSE	Es OF SUBSTITUTE is of each station. sum here and in line					0.00		
Total Number	number of DS 1. Number	BER OF DSEs: Give SEs applicable to your of DSEs from part 2	system.			<b>&gt;</b>		to provide the total  0.50  0.00	
of DSEs		r of DSEs from part 3 r of DSEs from part 4						0.00	
	S. INUITIDE	or Does from part 4	·				-	0.00	
	TOTAL NUME	BER OF DSEs					<b>•</b>		0.50

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/1

CSC HOLDING		SYSTEM:					S	YSTEM ID# 007587	Name
schedule.	·	mainder of pa	·	7 of the DSE sched	lule blank and	complete part	8, (page 16) of th	e	6
			BLOCK A:	TELEVISION MA	ARKETS				Computation of 3.75 Fee
effect on June 24, Yes—Com	1981?	schedule—D	•	ler markets as defii			CC rules and regul	lations in	0.70100
		BI OC	CK B: CARE	RIAGE OF PERM	MITTED DS	SFs			
Column 1: CALL SIGN	under FCC rules	of distant sta and regulatio e DSE Scheo	ntions listed in ns prior to Jun dule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re	this schedule ther explanati	that your syste	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station previous	les and reguled pursuant to as defined al educational station (76.6 r DSE scheduant to individuationally carried HF station wide and to individually carried HF station wi	ations cited be to the FCC mare in 76.5(kk) (70). I station [76.55(5)] (see paragule). Ie). all waiver of FCd on a part-time thin grade-B control of the paragraph of the paragr	e or substitute bas ontour, [76.59(d)(5	e in effect on .57, 76.59(b), )(1), 76.63(a) 3(a) referring stitution of gra	June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered state	6.63(a) referring to		
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 o			orksheet on page 1	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	
WLIW WNET	C C	0.25 0.25							
									-
								0.50	
		Е	BLOCK C: CC	MPUTATION OF	3.75 FEE				-
Line 1: Enter the	total number of	DSEs from բ	part 5 of this	schedule					
Line 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve					
				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	nge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply li	ne 4 by 0.0375 a	and enter su	m here				х		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply li	ine 6 by line 5 an	d enter here	and on line	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **CSC HOLDINGS, LLC** 007587 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B. part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). 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 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). Carriage 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. 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 DSE **PERIOD** CARRIAGE DSE 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? X Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer 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 X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CSC HOLDINGS, LLC	SYSTEM ID# 007587	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7)	70,032,779.92	7
1 Section	Little the amount of gloss receipts from space it (page 1)	10,032,119.92	•
2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	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 defined by the FCC?  Yes—Complete section 3 below.	ow.	
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below	)	
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	e DSE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
Section 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 fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the 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)	e 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: SY CSC HOLDINGS, LLC	STEM ID# 007587			
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  C. Multiply line B by 3.000 and enter here.  D. Enter 0.00089 of gross receipts (the amount in section 1).  E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.  F. Multiply line D by line E and enter here.  G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)  Syndicated Exclusivity Surcharge.				
Computation of Base Rate Fee	You me 6 was 6 In blo If you If you blank What i	ctions:  The 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.  The cock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  The cock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  The cock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried part 9 blank.  The cock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.				
	• Did y	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS  your cable system retransmit the signals of any partially distant television stations during the accounting period?				
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.				
	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE  Section 1 Enter the amount of gross receipts from space K (page 7)					
	2 Section	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶	-			
	3	If the figure in section 2 is <b>4.000 or less</b> , 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				
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee	0.00			

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/1

	IAME OF OWNER OF CABLE SYSTEM:  HOLDINGS, LLC  SYSTEM ID#  007587	Name				
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)	8				
	B. Enter 0.00701 of gross receipts (the amount in section 1)  * **Tender of the image is a content of the image is a conte	Computation of Base Rate Fee				
	C. Multiply line B by 3.000 and enter here <b>&gt;</b>	Dase Nate i ee				
	D. Enter 0.00330 of gross receipts  (the amount in section 1)					
	E. Subtract 4.000 from total DSEs  (the figure in section 2) and enter here					
	F. Multiply line D by line E and enter here   \$					
	G. Add lines A, C, and F. This is your base rate fee Enter here and in block 3, line 1, space L (page 7) Base Rate Fee  \$ 0.00					
shall in	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals istead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-Space G.	9				
	<b>teral:</b> If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude a from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	Computation				
this ex	clusion, you must:	of Base Rate Fee				
station DSEs	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number or and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.  1: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	and Syndicated Exclusivity Surcharge for				
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 e the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by me token, the station is distant to the subscriber.)					
subscr	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.					
subscr	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.					
• Give	ify the communities/areas represented by each subscriber group. 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 ibers in the group.					
, -	r system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,					
, ,	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, t 6 of this schedule.					
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.					
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions.					
	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding 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.

# SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007587 **CSC HOLDINGS. LLC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNER OF CABLE SYSTEM:  CSC HOLDINGS, LLC  SYSTEM ID#  007587							Name	
В				TE FEES FOR EACH				
001111111111111111111111111111111111111		SUBSCRIBER GROU	JP	001111111111111111111111111111111111111		SUBSCRIBER GROUI	Ρ	9
COMMUNITY/ AREA 1 Amityville			COMMUNITY/ AREA	∠ BLOOK	naven		Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0,122 0.011	202	07.LL 0.0.1		0,122 0.011	202	07.22 0.011	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
		-						Stations
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	s 37,664	,191.70	Gross Receipts Second	d Group	\$ 8,02	23,171.68	
·	•			·	·			
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROUI	Р	
COMMUNITY/ AREA	3 River	head		COMMUNITY/ AREA	4 Islip (I	Hauppauge)		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WLIW	0.25							
WLIW-2	-	=						
WLIW-3	-					  -		
WNET-2	0.25							
WNE I -2	-	-						
						+		
						'		
Total DSEs	<u>.                                      </u>		0.50	Total DSEs	1		0.00	
Gross Receipts Third Group \$ 8,323,922.01		Gross Receipts Fourth	Group	\$ 16,02	21,494.53			
Base Rate Fee Third Group \$ 44,283.27		Base Rate Fee Fourth Group \$ 0.00						
				II				
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes ab	oove.	\$ 4	14,283.27	
						<u> </u>		

LEGAL NAME OF OWNER CSC HOLDINGS, L		E SYSTEM:				SY	STEM ID# 007587	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		·
		SUBSCRIBER GROU	P			SUBSCRIBER GROUP	)	9
COMMUNITY/ AREA	1 Amity	ville		COMMUNITY/ AREA	2 Brook	haven		Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
OF ILLE STORY	DOL	CALLE GIGIT	DOL	O'NEE O'O'N	DOL	OF ILL STOTA	562	Base Rate Fee
		-			•			and
		+						Syndicated
								Exclusivity
		_						Surcharge
		-						for
		<u> </u>						Partially
								Distant
								Stations
					<b></b>			
		•			<b></b>			
Total DSEs		11	0.00	Total DSEs			0.00	ı
Gross Receipts First Gr	oup	\$ 37,664		Gross Receipts Second	d Group	\$ 8,02	3,171.68	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	ſ
	THIRD	SUBSCRIBER GROU	Р			SUBSCRIBER GROUP	)	i
COMMUNITY/ AREA	3 River	head		COMMUNITY/ AREA	4 Islip (I	lauppauge)		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	•
		+						
					<b></b>			
		H						
		=						
		-						
		<b>-</b>						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$ 8,323.	922.01	Gross Receipts Fourth	Group	s 16,02	1,494.53	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	l
								ı
Base Rate Fee: Add th Enter here and in block			iber group a	as shown in the boxes at	oove.	\$	0.00	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3. PAGE 20.							
Name	CSC HOLDINGS, LLC	SYSTEM ID# 007587							
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP								
<b>9</b> Computation	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:								
of	☐ First 50 major television market	Second 50 major television market							
Base Rate Fee	INSTRUCTIONS:	,							
and	Step 1: In line 1, give the total DSEs by subscriber group for commerc	ial VHF Grade B contour stations listed in block A, part 9 o							
Syndicated	this schedule.								
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as								
for	Exempt DSEs in block C, part 7 of this schedule. If none enter zero.  Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge								
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.								
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs							
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1							
	and enter here. This is the	and enter here. This is the							
	total number of DSEs for	total number of DSEs for							
	this subscriber group	this subscriber group							
	subject to the surcharge  computation	subject to the surcharge  computation							
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY							
	SURCHARGE First Group	SURCHARGE Second Group							
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs							
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1							
	and enter here. This is the	and enter here. This is the							
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group							
	subject to the surcharge	subject to the surcharge							
	computation	computation							
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY							
	SURCHARGE	SURCHARGE							
	Third Group	Fourth Group							
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7	ch subscriber group as shown )							

ACCOUNTING PERIOD: 2019/1

L NAME OF OWNER OF CABLE SYSTEM: C Holdings, LLC		SYSTEM ID# 007587	Nam
CITY OR TOWN	STATE		First
AMITYVILLE	NY		Commu
Line 1. ROYALTY FEE FROM SPACE L		\$ 745,148.78	
Line 2. FILING FEE		725.00	Tota Fee
Line 3. TOTAL ROYALTY AND FILING FEES Add lines 1 and 2 and enter here	PAYABLE FOR ACCOUNTING PERIOD	\$ 745,873.78	
Effective January 1, 2014, pursuant to the Sate authority to the Copyright Office to establish fe 122 statutory licenses, the Office now assessed details, see the Federal Register, November 2 the royalty payment is credited; thus the omiss Please remit the royalty fee and filing fee in one Education.	ees for the filing of statements of account (SC es filing fees for ALL SOAs for current, past a 9, 2013 (78 FR 71498). Please be advised th sion of the appropriate filing fee will result in a	OAs) under the section 111, 119, and and future accounting periods. For that the filing fee is deducted before	

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