



October 27, 2011

Ms. Jaclyn A. Brillling
New York State
Public Service Commission
Three Empire State Plaza
Albany, NY 12223

RE: 2011 (Revised), 2012 FCC Form 1240 & 1205

Dear Ms. Brillling:

The Federal Communications Commission's regulations concerning cable rates and our Social Contract permit us to adjust rates annually for inflation and changes in external costs such as programming fees and copyright fees.

Accordingly, please find FCC Forms 1205 and 1240 which we used for calculating our BST rates, equipment and installation charges. We reserve the right to update the enclosed forms should better information become available to us.

The following items are included:

- Revised 2011 FCC Form 1240
- Community Unit ID Numbers included in each filing
- 2011 Rate Card and Channel Line-Up
- 2012 FCC Form 1240
- 2012 Proposed Channel Line-Ups
- FCC Form 1205

Our customer's will receive notification of the rate adjustment in their bill preceding this change in rates.

Please do not hesitate to contact me at (315) 634-6255 if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Karen Conaty', written over the word 'Sincerely,'.

Karen Conaty
Director, Budgets & Analysis

Enclosure

FCC FORM 1240
 UPDATING MAXIMUM PERMITTED RATES FOR REGULATED CABLE SERVICES

Cable Operator:

Name of Cable Operator Time Warner Cable - Oneida - Town of Sullivan		
Mailing Address of Cable Operator P.O. Box 4733		
City Syracuse	State NY	ZIP Code 13221-4733

1. Does this filing involve a single franchise authority and a single community unit?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">YES</td> <td style="width: 50%; text-align: center;">NO</td> </tr> <tr> <td style="width: 50%; text-align: center;"><input type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	YES	NO	<input type="checkbox"/>	<input checked="" type="checkbox"/>
YES	NO				
<input type="checkbox"/>	<input checked="" type="checkbox"/>				

If yes, complete the franchise authority information below and enter the associated CUID number here:

2. Does this filing involve a single franchise authority but multiple community units?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">YES</td> <td style="width: 50%; text-align: center;">NO</td> </tr> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input type="checkbox"/></td> </tr> </table>	YES	NO	<input checked="" type="checkbox"/>	<input type="checkbox"/>
YES	NO				
<input checked="" type="checkbox"/>	<input type="checkbox"/>				

If yes, enter the associated CUIDs below and complete the franchise authority information at the bottom of this page:

NY0603

3. Does this filing involve multiple franchise authorities?

If yes, attach a separate sheet for each franchise authority and include the following franchise authority information with its associated CUID(s):

Franchise Authority Information:

Name of Local Franchising Authority NYS Public Service Commission		
Mailing Address of Local Franchising Authority Agency Bldg Three, Empire State Plaza		
City Albany	State NY	ZIP Code 12223
Telephone number (518) 474-4992	Fax Number (518) 486-5727	

4. For what purpose is this Form 1240 being filed? Please put an "X" in the appropriate box.

- a. Original Form 1240 for Basic Tier
- b. Amended Form 1240 for Basic Tier
- c. Original Form 1240 for CPS Tier
- d. Amended Form 1240 for CPS Tier

X

5. Indicate the one year time period for which you are setting rates (the Projected Period).

TO		
02/11	01/12	(mm/yy)

6. Indicate the time period for which you are performing a true-up.

TO		
01/10	12/10	(mm/yy)

7. Status of Previous Filing of FCC Form 1240 (enter an "x" in the appropriate box)

a. Is this the first FCC Form 1240 filed in any jurisdiction?

YES	NO
	X

b. Has an FCC Form 1240 been filed previously with the FCC?

If yes, enter the date of the most recent filing:

X	
---	--

10/31/10	(mm/dd/yy)
----------	------------

YES	NO
X	

c. Has an FCC Form 1240 been filed previously with the Franchising Authority?

If yes, enter the date of the most recent filing:

10/31/10	(mm/dd/yy)
----------	------------

8. Status of Previous Filing of FCC Form 1210 (enter an "x" in the appropriate box)

a. Has an FCC Form 1210 been previously filed with the FCC?

YES	NO
X	

If yes, enter the date of the most recent filing:

05/31/98	(mm/dd/yy)
----------	------------

b. Has an FCC Form 1210 been previously filed with the Franchising Authority?

If yes, enter the date of the most recent filing:

YES	NO
X	

05/31/98	(mm/dd/yy)
----------	------------

9. Status of FCC Form 1200 Filing (enter an "x" in the appropriate box)

a. Has an FCC Form 1200 been previously filed with the FCC?

YES	NO
X	

If yes, enter the date filed:

07/29/94	(mm/dd/yy)
----------	------------

b. Has an FCC Form 1200 been previously filed with the Franchising Authority?

If yes, enter the date filed:

YES	NO
X	

07/29/94	(mm/dd/yy)
----------	------------

10. Cable Programming Services Complaint Status (enter an "x" in the appropriate box)

a. Is this form being filed in response to an FCC Form 329 complaint?

YES	NO
	X

If yes, enter the date of the complaint:

	(mm/dd/yy)
--	------------

YES	NO
X	

11. Is FCC Form 1205 Being Included With This Filing**12. Selection of "Going Forward" Channel Addition Methodology (enter an "x" in the appropriate box)**☐ Check here if you are using the original rules [MARKUP METHOD].☐ Check here if you are using the new, alternative rules [CAPS METHOD].

If using the CAPS METHOD, have you elected to revise recovery for channels added during the period May 15, 1994 to Dec. 31, 1994?

YES	NO

13. Headend Upgrade Methodology**NOTE: Operators must certify to the Commission their eligibility to use this upgrade methodology and attach an equipment list and depreciation schedule.*☐ Check here if you are a qualifying small system using the streamlined headend upgrade methodology.

Part I: Preliminary Information
Module A: Maximum Permitted Rate From Previous Filing

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
A1	Current Maximum Permitted Rate	\$19,1472	\$0.0000	\$0.0000		

Module B: Subscribership

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
B1	Average Subscribership For True-Up Period 1	3,132	0	0		
B2	Average Subscribership For True-Up Period 2					
B3	Estimated Average Subscribership For Projected Period	3,068	0	0		

Module C: Inflation Information

Line	Line Description	
C1	Unclaimed Inflation: Operator Switching From 1210 To 1240	1.0000
C2	Unclaimed Inflation: Unregulated Operator Responding to Rate Complaint	1.0000
C3	Inflation Factor For True-Up Period 1 [Wks 1]	1.0137
C4	Inflation Factor For True-Up Period 2 [Wks 1]	
C5	Current FCC Inflation Factor	1.0254

Module D: Calculating the Base Rate

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
D1	Current Headend Upgrade Segment					
D2	Current External Costs Segment	\$3.4009	\$0.0000	\$0.0000		
D3	Current Caps Method Segment					
D4	Current Markup Method Segment					
D5	Current Channel Movement and Deletion Segment					
D6	Current True-Up Segment	\$8.1306	\$0.0000	\$0.0000		
D7	Current Inflation Segment	\$0.1427	\$0.0000	\$0.0000		
D8	Base Rate [A1-D1-D2-D3-D4-D5-D6-D7]	\$7.4730	\$0.0000	\$0.0000	\$0.0000	\$0.0000

Part II: True-Up Period
Module E: Timing Information

Line	Line Description	
E1	What Type of True-Up Is Being Performed? (Answer "1", "2", or "3". See Instructions for a description of these types.) If "1", go to Module I. If "2", answer E2 and E3. If "3", answer E2, E3, E4, and E5.	2
E2	Number of Months in the True-Up Period 1	12
E3	Number of Months between the end of True-Up Period 1 and the end of the most recent Projected Period	0
E4	Number of Months in True-Up Period 2 Eligible for Interest	
E5	Number of Months True-Up Period 2 Ineligible for Interest	

Module F: Maximum Permitted Rate For True-Up Period 1

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
F1	Caps Method Segment For True-Up Period 1 [Wks 2]					
F2	Markup Method Segment For True-Up Period 1 [Wks 3]					
F3	Chan Mvmnt Deletn Segment For True-Up Period 1 [Wks' 4/5]					
F4	True-Up Period 1 Rate Eligible For Inflation [D8+F1+F2+F3]	\$7.4730				
F5	Inflation Segment for True-Up Period 1 [(F4*C3)-F4]	\$0.1026				
F6	Headend Upgrade Segment For True-Up Period 1 [Wks 6]					
F7	External Costs Segment For True-Up Period 1 [Wks 7]	\$3.3066				
F8	True-Up Segment For True-Up Period 1	\$8.1306	\$0.0000	\$0.0000		
F9	Max Perm Rate for True-Up Period 1 [F4+F5+F6+F7+F8]	\$19.0127	\$0.0000	\$0.0000	\$0.0000	\$0.0000

Module G: Maximum Permitted Rate For True-Up Period 2

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
G1	Caps Method Segment For True-Up Period 2 [Wks 2]					
G2	Markup Method Segment For True-Up Period 2 [Wks 3]					
G3	Chan Mvmnt Deletn Segment For True-Up Period 2 [Wks' 4/5]					
G4	TU Period 2 Rate Eligible For Inflation [D8+F5+G1+G2+G3]					
G5	Inflation Segment for True-Up Period 2 [(G4*C4)-G4]					
G6	Headend Upgrade Segment For True-Up Period 2 [Wks 6]					
G7	External Costs Segment For True-Up Period 2 [Wks 7]					
G8	True-Up Segment For True-Up Period 2					
G9	Max Perm Rate for True-Up Period 2 [G4+G5+G6+G7+G8]	\$0.0000	\$0.0000	\$0.0000	\$0.0000	\$0.0000

Module H: True-Up Adjustment Calculation

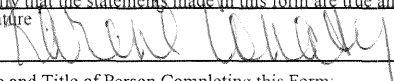
Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
Adjustment For True-Up Period 1						
H1	Revenue From Period 1	\$331,616.1600	\$0.0000	\$0.0000	\$0.0000	\$0.0000
H2	Revenue From Max Permitted Rate for Period 1	\$714,574.9439	\$0.0000	\$0.0000	\$0.0000	\$0.0000
H3	True-Up Period 1 Adjustment [H2-H1]	\$382,958.7839	\$0.0000	\$0.0000	\$0.0000	\$0.0000
H4	Interest on Period 1 Adjustment	\$21,541.4316	\$0.0000	\$0.0000	\$0.0000	\$0.0000
Adjustment For True-Up Period 2						
H5	Revenue From Period 2 Eligible for Interest					
H6	Revenue From Max Perm Rate for Period 2 Eligible For Interest					
H7	Period 2 Adjustment Eligible For Interest [H6-H5]					
H8	Interest on Period 2 Adjustment (See instructions for formula)					
H9	Revenue From Period 2 Ineligible for Interest					
H10	Revenue From Max Perm Rate for Period 2 Ineligible for Interest					
H11	Period 2 Adjustment Ineligible For Interest [H10-H9]					
Total True-Up Adjustment						
H12	Previous Remaining True-Up Adjustment					
H13	Total True-Up Adjustment [H3+H4+H7+H8+H11+H12]	\$404,500.2155	\$0.0000	\$0.0000	\$0.0000	\$0.0000
H14	Amount of True-Up Claimed For This Projected Period	\$404,500.2155	\$0.0000	\$0.0000	\$0.0000	\$0.0000
H15	Remaining True-Up Adjustment [H13-H14]	\$0.0000	\$0.0000	\$0.0000	\$0.0000	\$0.0000

Part III: Projected Period
Module I: New Maximum Permitted Rate

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
I1	Caps Method Segment For Projected Period [Wks 2]					
I2	Markup Method Segment For Projected Period [Wks 3]					
I3	Chan Mvmnt Deletn Segment For Projected Period [Wks 4/5]					
I4	Proj. Period Rate Eligible For Inflation [D8+F5+G5+I1+I2+I3+W	\$7,5756				
I5	Inflation Segment for Projected Period [(I4*C5)-I4]	\$0.1924				
I6	Headend Upgrade Segment For Projected Period [Wks 6]					
I7	External Costs Segment For Projected Period [Wks 7]	\$3,7110				
I8	True-Up Segment For Projected Period	\$10.9871				
I9	Max Permitted Rate for Projected Period [I4+I5+I6+I7+I8+Wks 1	\$22,4661	\$0.0000			
I10	Operator Selected Rate For Projected Period	\$10.0000	\$0.0000			

Certification Statement

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE TITLE 18, SECTION 1001), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).
 I certify that the statements made in this form are true and correct to the best of my knowledge and belief, and are made in good faith.

Signature 	Date 10/20/11
Name and Title of Person Completing this Form: Karen Conaty Director, Budgets & Analysis	
Telephone number (315) 634-6255	Fax Number (315) 234-0251

Worksheet 1 - True-Up Period Inflation

For instructions, see Appendix A of Instructions For FCC Form 1240

Line	Period	FCC Inflation Factor
101	Month 1	1.08%
102	Month 2	1.08%
103	Month 3	1.08%
104	Month 4	1.91%
105	Month 5	1.91%
106	Month 6	1.91%
107	Month 7	2.09%
108	Month 8	2.09%
109	Month 9	2.09%
110	Month 10	0.41%
111	Month 11	0.41%
112	Month 12	0.41%
113	Average Inflation Factor for True Up Period 1	1.0137
114	Month 13	
115	Month 14	
116	Month 15	
117	Month 16	
118	Month 17	
119	Month 18	
120	Month 19	
121	Month 20	
122	Month 21	
123	Month 22	
124	Month 23	
125	Month 24	
126	Average Inflation Factor for True Up Period 2	

Worksheet 7 - External Costs True-Up Period

For instructions, see Appendix A of Instructions For FCC Form 1240

Question 1. For which time period are you filling out this worksheet? [Put an "X" in the appropriate box.]

Question 2. How long is the first period, in months, for which rates are being set with this worksheet?

Question 3. How long is the second period, in months, for which rates are being set with this worksheet?

True-Up Period	Projected Period
X	
	12

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
Period 1						

External Costs Eligible for Markup						
701	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period	\$107,347.42	\$0.00	\$0.00		
702	Retransmission Consent Fees For Period					
703	Copyright Fees For Period	\$8,257.20	\$0.00			
704	External Costs Eligible For 7.5% Markup	\$115,604.63				
705	Marked Up External Costs	\$124,274.9725				
External Costs Not Eligible for Markup						
706	Cable Specific Taxes For Period					
707	Franchise Related Costs For Period	\$0.00				
708	Commission Regulatory Fees For Period	\$0.00				
708.1	Price Cap Allowance per Section III.F.4.a of Time Warner Social Contract		\$0.00			
709	Total External Costs For Period	\$124,274.9725	\$0.0000	\$0.0000	\$0.0000	\$0.0000
710	Monthly, Per-Subscriber External Costs For Period 1	\$3.3066				

Period 2

External Costs Eligible for Markup						
711	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period					
712	Retransmission Consent Fees For Period					
713	Copyright Fees For Period					
714	External Costs Eligible For 7.5% Markup					
715	Marked Up External Costs					
External Costs Not Eligible for Markup						
716	Cable Specific Taxes For Period					
717	Franchise Related Costs For Period					
718	Commission Regulatory Fees For Period					
718.1	Price Cap Allowance per Section III.F.4.a of Time Warner Social Contract					
719	Total External Costs For Period					
720	Monthly, Per-Subscriber External Costs For Period 2					

Worksheet 7 - External Costs Projected Period

For instructions, see Appendix A of Instructions For FCC Form 1240

Question 1. For which time period are you filling out this worksheet? [Put an "X" in the appropriate box.]

Question 2. How long is the first period, in months, for which rates are being set with this worksheet?

Question 3. How long is the second period, in months, for which rates are being set with this worksheet?

True-Up Period	Projected Period
	X
	12

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
Period 1						
External Costs Eligible for Markup						
701	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period	\$117,719.16	\$0.00	\$0.00		
702	Retransmission Consent Fees For Period					
703	Copyright Fees For Period	\$9,373.35	\$0.00			
704	External Costs Eligible For 7.5% Markup	\$127,092.51				
705	Marked Up External Costs	\$136,624.4521				
External Costs Not Eligible for Markup						
706	Cable Specific Taxes For Period					
707	Franchise Related Costs For Period					
708	Commission Regulatory Fees For Period	\$0.00				
708.1	Price Cap Allowance per Section III.F.4.a of Time Warner Social Contract	\$0.00	\$0.00			
709	Total External Costs For Period	\$136,624.4521	\$0.0000			
710	Monthly, Per-Subscriber External Costs For Period 1	\$3.7110				

Worksheet 8 - True-Up Rate Charged

For instructions, see Appendix A of Instructions For FCC Form 1240

Question 1 How long is the True-Up Period 1, in months?

Question 2 How long is the True-Up Period 2, in months?

12

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
801	Month 1	\$8.0900	\$0.0000	\$0.0000		
802	Month 2	\$8.8900	\$0.0000	\$0.0000		
803	Month 3	\$8.8900	\$0.0000	\$0.0000		
804	Month 4	\$8.8900	\$0.0000	\$0.0000		
805	Month 5	\$8.8900	\$0.0000	\$0.0000		
806	Month 6	\$8.8900	\$0.0000	\$0.0000		
807	Month 7	\$8.8900	\$0.0000	\$0.0000		
808	Month 8	\$8.8900	\$0.0000	\$0.0000		
809	Month 9	\$8.8900	\$0.0000	\$0.0000		
810	Month 10	\$8.8900	\$0.0000	\$0.0000		
811	Month 11	\$8.8900	\$0.0000	\$0.0000		
812	Month 12	\$8.8900	\$0.0000	\$0.0000		
813	Period 1 Average Rate	\$8.8233				
814	Month 13					
815	Month 14					
816	Month 15					
817	Month 16					
818	Month 17					
819	Month 18					
820	Month 19					
821	Month 20					
822	Month 21					
823	Month 22					
824	Month 23					
825	Month 24					
826	Period 2 Average Rate					

Rome/Oneida/Illion/Hamilton
Rates & Services

Rome/Oneida/Illion/Hamilton
RO 1821

A.	Basic Service	\$8.89
	Standard Service:	67.75
	(Consists of Basic Service @ \$8.89/mo. + all Standard channels @ \$58.86/mo.)	
B.	Premium Services [†]	
	HBO, Cinemax, Showtime Unlimited with On Demand Service	
	1st Premium Service	13.95
	2nd Premium Service	10.95
	3rd Premium Service	10.95
	Starz	11.75
	* Digital equipment required to receive these Premium Services.	
C.	Digital Cable Services [†]	
	Digital Navigator	1.00
	Explorer Pak	8.95
	Movie Pak	7.25
	High-Definition Package	5.95
	(An HD television and/or HD terminal is required.)	
	Sports Plus Package	3.95
	Latino Especial Package	9.95
	Digital Video Recorder (DVR) Service (Per Terminal)	10.95
	Family Choice	12.99
	(Basic Cable service and lease of a digital set-top box required. Standard Cable Service, Premium channels, On Demand services and some interactive services are not available with Family Choice. Other restrictions apply.)	
D.	Equipment	
	Home Terminal/Digital Terminal/HD Terminal	7.00
	Remote/Digital Remote	.34
	Non-Addressable Converter	.22
	CableCARD^{†††} (for Digital Cable-ready sets)	2.50
E.	Installation Charges ^{††}	
	Standard Install/Reconnect (pre-wired home)	42.64
	Standard Installation (unwired home)	61.55
	Additional Outlet(s) at time of initial installation	29.39
	Additional Outlet(s) separate trip	43.19
	Equipment Deactivation Fee	5.99
	COD Fee (Fee for payments received at time of install)	5.95
	Payment Processing Fee (by phone: non automated)	5.00

^{††}Sales tax will be added to installation charges.

[†] Digital Terminal is required in order to receive some channels and/or services. Rates and charges apply to standard residential installations and service. The above rates for cable service packages and equipment do not include franchise fees or State and Federal regulatory fees.

^{†††}Not all channels available with a CableCARD[™].

1117 Erie Blvd West, Rome • (315) 337-1120
1930 Fairview Ave, Oneida • (315) 363-4832
56 Otsego St, Illion • (315) 895-7704
www.timewarnercable.com



Channel No.	Call Sign	Name	Classification
2	WKTV	WKTV	Basic
3	WSTM	WSTM	Basic
4	WCNY	WCNY	Basic
5	WTVH	WTVH	Basic
7	WNYS	My 43 WNYS	Basic
8	WSYT	WSYT	Basic
9	WSYR	WSYR-9 (ABC Syracuse)	Basic
10	YNN	YNN	Basic
11	WUTR	WUTR	Basic
12	WFXV	WFXV	Basic
13	WSTQ	CW6	Basic
14	CKWS	CKWS - TV / CH # 11	Basic
15	TBS	TBS	Basic
16	WGN AMER	WGN America	Basic
17	TWCS	Time Warner Cable Sports	Basic
18	WSPX	WSPX Ion	Basic
19	QVC	QVC: Quality Value Convenience Network	Basic
96	HSN	HSN	Basic
97	TVGN	TV Guide Network	Basic
98	CSPA-1	C-SPAN: Cable Satellite Public Affairs Network	Basic
99	PUBLIC	Public Access	Basic

FCC FORM 1240
UPDATING MAXIMUM PERMITTED RATES FOR REGULATED CABLE SERVICES

Cable Operator:

Name of Cable Operator Time Warner Cable - Oneida - Town of Sullivan		
Mailing Address of Cable Operator P.O. Box 4733		
City Syracuse	State NY	ZIP Code 13221-4733

1. Does this filing involve a single franchise authority and a single community unit?	YES	NO
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If yes, complete the franchise authority information below and enter the associated CUID number here:

2. Does this filing involve a single franchise authority but multiple community units?	YES	NO
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If yes, enter the associated CUIDs below and complete the franchise authority information at the bottom of this page:

NY0603

3. Does this filing involve multiple franchise authorities?

If yes, attach a separate sheet for each franchise authority and include the following franchise authority information with its associated CUID(s):

Franchise Authority Information:

Name of Local Franchising Authority NYS Public Service Commission		
Mailing Address of Local Franchising Authority Agency Bldg Three, Empire State Plaza		
City Albany	State NY	ZIP Code 12223
Telephone number (518) 474-4992	Fax Number (518) 486-5727	

4. For what purpose is this Form 1240 being filed? Please put an "X" in the appropriate box.

- a. Original Form 1240 for Basic Tier
- b. Amended Form 1240 for Basic Tier
- c. Or
- d. Amended Form 1240 for CPS Tier

X

5. Indicate the one year time period for which you are setting rates (the Projected Period).

02/12	TO	01/13
-------	----	-------

(mm/yy)

6. Indicate the time period for which you are performing a true-up.

01/11	TO	12/11
-------	----	-------

(mm/yy)

7. Status of Previous Filing of FCC Form 1240 (enter an "x" in the appropriate box)

a. Is this the first FCC Form 1240 filed in any jurisdiction?

b. Has an FCC Form 1240 been filed previously with the FCC?

YES	NO
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

If yes, enter the date of the most recent filing: (mm/dd/yy)

c. Has an FCC Form 1240 been filed previously with the Franchising Authority?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If yes, enter the date of the most recent filing: (mm/dd/yy)

8. Status of Previous Filing of FCC Form 1210 (enter an "x" in the appropriate box)

a. Has an FCC Form 1210 been previously filed with the FCC?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If yes, enter the date of the most recent filing: (mm/dd/yy)

b. Has an FCC Form 1210 been previously filed with the Franchising Authority?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If yes, enter the date of the most recent filing: (mm/dd/yy)

9. Status of FCC Form 1200 Filing (enter an "x" in the appropriate box)

a. Has an FCC Form 1200 been previously filed with the FCC?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If yes, enter the date filed: (mm/dd/yy)

b. Has an FCC Form 1200 been previously filed with the Franchising Authority?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If yes, enter the date filed: (mm/dd/yy)

10. Cable Programming Services Complaint Status (enter an "x" in the appropriate box)

a. Is this form being filed in response to an FCC Form 329 complaint?

YES	NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>

If yes, enter the date of the complaint: (mm/dd/yy)

11. Is FCC Form 1205 Being Included With This Filing

YES	NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. Selection of "Going Forward" Channel Addition Methodology (enter an "x" in the appropriate box)

☐ Check here if you are using the original rules [MARKUP METHOD].

☐ Check here if you are using the new, alternative rules [CAPS METHOD].

If using the CAPS METHOD, have you elected to revise recovery for channels added during the period May 15, 1994 to Dec. 31, 1994?

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

13. Headend Upgrade Methodology

**NOTE: Operators must certify to the Commission their eligibility to use this upgrade methodology and attach an equipment list and depreciation schedule.*

☐ Check here if you are a qualifying small system using the streamlined headend upgrade methodology.

Part I: Preliminary Information
Module A: Maximum Permitted Rate From Previous Filing

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
A1	Current Maximum Permitted Rate	\$22.4661	\$0.0000	\$0.0000		

Module B: Subscribership

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
B1	Average Subscribership For True-Up Period 1	3,068	0	0		
B2	Average Subscribership For True-Up Period 2					
B3	Estimated Average Subscribership For Projected Period	2,922	0	0		

Module C: Inflation Information

Line	Line Description		
C1	Unclaimed Inflation: Operator Switching From 1210 To 1240		1.0000
C2	Unclaimed Inflation: Unregulated Operator Responding to Rate Complaint		1.0000
C3	Inflation Factor For True-Up Period 1 [Wks 1]		1.0242
C4	Inflation Factor For True-Up Period 2 [Wks 1]		
C5	Current FCC Inflation Factor		1.0254

Module D: Calculating the Base Rate

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
D1	Current Headend Upgrade Segment					
D2	Current External Costs Segment	\$3.7110				
D3	Current Caps Method Segment					
D4	Current Markup Method Segment					
D5	Current Channel Movement and Deletion Segment					
D6	Current True-Up Segment	\$10.9871				
D7	Current Inflation Segment	\$0.1924				
D8	Base Rate [A1-D1-D2-D3-D4-D5-D6-D7]	\$7.5756	\$0.0000	\$0.0000	\$0.0000	\$0.0000

Part II: True-Up Period
Module E: Timing Information

Line	Line Description		
E1	What Type of True-Up Is Being Performed? (Answer "1", "2", or "3". See Instructions for a description of these types.) If "1", go to Module I. If "2", answer E2 and E3. If "3", answer E2, E3, E4, and E5.		2
E2	Number of Months in the True-Up Period 1		12
E3	Number of Months between the end of True-Up Period 1 and the end of the most recent Projected Period		0
E4	Number of Months in True-Up Period 2 Eligible for Interest		
E5	Number of Months True-Up Period 2 Ineligible for Interest		

Module F: Maximum Permitted Rate For True-Up Period 1

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
F1	Caps Method Segment For True-Up Period 1 [Wks 2]					
F2	Markup Method Segment For True-Up Period 1 [Wks 3]					
F3	Chan Mvmt Deletn Segment For True-Up Period 1 [Wks' 4/5]					
F4	True-Up Period 1 Rate Eligible For Inflation [D8+F1+F2+F3]	\$7.5756				
F5	Inflation Segment for True-Up Period 1 [(F4*C3)-F4]	\$0.1833				
F6	Headend Upgrade Segment For True-Up Period 1 [Wks 6]					
F7	External Costs Segment For True-Up Period 1 [Wks 7]	\$3.7110				
F8	True-Up Segment For True-Up Period 1	\$10.9871				
F9	Max Perm Rate for True-Up Period 1 [F4+F5+F6+F7+F8]	\$22.4570				

Module G: Maximum Permitted Rate For True-Up Period 2

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
G1	Caps Method Segment For True-Up Period 2 [Wks 2]					
G2	Markup Method Segment For True-Up Period 2 [Wks 3]					
G3	Chan Mvmt Deletn Segment For True-Up Period 2 [Wks' 4/5]					
G4	TU Period 2 Rate Eligible For Inflation [D8+F5+G1+G2+G3]					
G5	Inflation Segment for True-Up Period 2 [(G4*C4)-G4]					
G6	Headend Upgrade Segment For True-Up Period 2 [Wks 6]					
G7	External Costs Segment For True-Up Period 2 [Wks 7]					
G8	True-Up Segment For True-Up Period 2					
G9	Max Perm Rate for True-Up Period 2 [G4+G5+G6+G7+G8]	\$0.0000	\$0.0000	\$0.0000	\$0.0000	\$0.0000

Module H: True-Up Adjustment Calculation

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
Adjustment For True-Up Period 1						
H1	Revenue From Period 1	\$364,754.52				
H2	Revenue From Max Permitted Rate for Period 1	\$826,776.17				
H3	True-Up Period 1 Adjustment [H2-H1]	\$462,021.65				
H4	Interest on Period 1 Adjustment	\$25,988.72				
Adjustment For True-Up Period 2						
H5	Revenue From Period 2 Eligible for Interest	\$0.00				
H6	Revenue From Max Perm Rate for Period 2 Eligible For Interest	\$0.00				
H7	Period 2 Adjustment Eligible For Interest [H6-H5]	\$0.00				
H8	Interest on Period 2 Adjustment (See instructions for formula)	\$0.00				
H9	Revenue From Period 2 Ineligible for Interest	\$0.00				
H10	Revenue From Max Perm Rate for Period 2 Ineligible for Interest	\$0.00				
H11	Period 2 Adjustment Ineligible For Interest [H10-H9]	\$0.00				
Total True-Up Adjustment						
H12	Previous Remaining True-Up Adjustment					
H13	Total True-Up Adjustment [H3+H4+H7+H8+H11+H12]	\$488,010.37				
H14	Amount of True-Up Claimed For This Projected Period	\$488,010.37				
H15	Remaining True-Up Adjustment [H13-H14]	\$0.00				

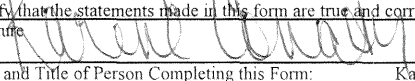
Part III: Projected Period
Module I: New Maximum Permitted Rate

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
I1	Caps Method Segment For Projected Period [Wks 2]					
I2	Markup Method Segment For Projected Period [Wks 3]					
I3	Chan Mvmt Deletn Segment For Projected Period [Wks 4/5]					
I4	Proj. Period Rate Eligible For Inflation [D8+F5+G5+I1+I2+I3+W	\$7.7589				
I5	Inflation Segment for Projected Period [(I4*C5)-I4]	\$0.1971				
I6	Headend Upgrade Segment For Projected Period [Wks 6]					
I7	External Costs Segment For Projected Period [Wks 7]	\$4.0558				
I8	True-Up Segment For Projected Period	\$13.9177				
I9	Max Permitted Rate for Projected Period [I4+I5+I6+I7+I8+Wks 1	\$25.9294				
I10	Operator Selected Rate For Projected Period	\$25.93				

Certification Statement

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT
(U.S. CODE TITLE 18, SECTION 1001), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

I certify that the statements made in this form are true and correct to the best of my knowledge and belief, and are made in good faith.

Signature 	Date 10/20/2011
Name and Title of Person Completing this Form: Karen Conaty Director, Budgets & Analysis	
Telephone number (315) 634-6255	Fax Number (315) 234-0251

Worksheet 1 - True-Up Period Inflation

For instructions, see Appendix A of Instructions For FCC Form 1240

Line	Period	FCC Inflation Factor
101	Month 1	2.06%
102	Month 2	2.06%
103	Month 3	2.06%
104	Month 4	2.54%
105	Month 5	2.54%
106	Month 6	2.54%
107	Month 7	2.54%
108	Month 8	2.54%
109	Month 9	2.54%
110	Month 10	2.54%
111	Month 11	2.54%
112	Month 12	2.54%
113	Average Inflation Factor for True-Up Period 1	1.0242

114	Month 13	
115	Month 14	
116	Month 15	
117	Month 16	
118	Month 17	
119	Month 18	
120	Month 19	
121	Month 20	
122	Month 21	
123	Month 22	
124	Month 23	
125	Month 24	
126	Average Inflation Factor for True-Up Period 2	

Worksheet 7 - External Costs True-Up Period

For instructions, see Appendix A of Instructions For FCC Form 1240

Question 1. For which time period are you filling out this worksheet? [Put an "X" in the appropriate box.]

True-Up Period	Projected Period
X	

Question 2. How long is the first period, in months, for which rates are being set with this worksheet?

12

Question 3. How long is the second period, in months, for which rates are being set with this worksheet?

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
Period 1						
External Costs Eligible for Markup						
701	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period	\$117,719.16				
702	Retransmission Consent Fees For Period					
703	Copyright Fees For Period	\$9,373.35				
704	External Costs Eligible For 7.5% Markup	\$127,092.51				
705	Marked Up External Costs	\$136,624.4521				
External Costs Not Eligible for Markup						
706	Cable Specific Taxes For Period					
707	Franchise Related Costs For Period	\$0.00				
708	Commission Regulatory Fees For Period	\$0.00				
708.1	Price Cap Allowance per Section III F.4 a of Time Warner Social Contract					
709	Total External Costs For Period	\$136,624.4521				
710	Monthly, Per-Subscriber External Costs For Period 1	\$3.7110				
Period 2						
External Costs Eligible for Markup						
711	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period					
712	Retransmission Consent Fees For Period					
713	Copyright Fees For Period					
714	External Costs Eligible For 7.5% Markup					
715	Marked Up External Costs					
External Costs Not Eligible for Markup						
716	Cable Specific Taxes For Period					
717	Franchise Related Costs For Period					
718	Commission Regulatory Fees For Period					
718.1	Price Cap Allowance per Section III F.4 a of Time Warner Social Contract					
719	Total External Costs For Period					
720	Monthly, Per-Subscriber External Costs For Period 2					

Worksheet 7 - External Costs Projected Period

For instructions, see Appendix A of Instructions For FCC Form 1240

Question 1 For which time period are you filling out this worksheet? [Put an "X" in the appropriate box.]

True-Up Period	Projected Period
	X

Question 2 How long is the first period, in months, for which rates are being set with this worksheet?

12

Question 3 How long is the second period, in months, for which rates are being set with this worksheet?

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
Period 1						
External Costs Eligible for Markup						
701	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period	\$123,278.01				
702	Retransmission Consent Fees For Period					
703	Copyright Fees For Period	\$9,011.45				
704	External Costs Eligible For 7.5% Markup	\$132,289.46				
705	Marked Up External Costs	\$142,211.1686				
External Costs Not Eligible for Markup						
706	Cable Specific Taxes For Period					
707	Franchise Related Costs For Period					
708	Commission Regulatory Fees For Period	\$0.00				
708.1	Price Cap Allowance per Section III.F.4.a of Time Warner Social Contract	\$0.00				
709	Total External Costs For Period	\$142,211.1686				
710	Monthly, Per-Subscriber External Costs For Period 1	\$4.0558				

Worksheet 8 - True-Up Rate Charged

For instructions, see Appendix A of Instructions For FCC Form 1240

Question 1. How long is the True-Up Period 1, in months?

12

Question 2. How long is the True-Up Period 2, in months?

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
801	Month 1	\$8.8900				
802	Month 2	\$10.0000				
803	Month 3	\$10.0000				
804	Month 4	\$10.0000				
805	Month 5	\$10.0000				
806	Month 6	\$10.0000				
807	Month 7	\$10.0000				
808	Month 8	\$10.0000				
809	Month 9	\$10.0000				
810	Month 10	\$10.0000				
811	Month 11	\$10.0000				
812	Month 12	\$10.0000				
813	Period 1 Average Rate	\$9.9075				

814	Month 13					
815	Month 14					
816	Month 15					
817	Month 16					
818	Month 17					
819	Month 18					
820	Month 19					
821	Month 20					
822	Month 21					
823	Month 22					
824	Month 23					
825	Month 24					
826	Period 2 Average Rate					



BASIC CABLE SERVICE

Basic Service	\$10.00
Standard Service	72.95
(Consists of Basic Service @ \$10.00/mo. + all Standard channels @ \$62.95/mo.)	

PREMIUM SERVICES

HBO, Cinemax, Showtime Unlimited with On Demand Service	
1st Premium Service	13.95
2nd Premium Service	10.95
3rd Premium Service	10.95
Starz (includes On Demand service)	11.75

* Digital equipment required to receive these Premium Services.

DIGITAL CABLE SERVICE

Navigator	1.00
Explorer Pak	8.95
Time Warner Cable Movie Pass	7.25
High-Definition Package	5.95
(An HD television and an HD terminal is required.)	
Time Warner Cable Sports Pass	5.95
Time Warner Cable 3D Pass	10.00
(3D TV and HD terminal is required.)	
Latino Especial Package	9.95
Digital Video Recorder (DVR) Service (first DVR box)	12.95
Additional DVR boxes (per box)	11.95
Family Choice	12.99

(Basic Cable service and lease of a digital set-top box required. Standard Cable Service, Premium channels, On Demand services and some interactive services are not available with Family Choice. Other restrictions apply.)

EQUIPMENT**

Home Terminal/Digital Terminal/HD Terminal	up to 7.99
Remote/Digital Remote	up to .50
Non-Addressable Converter22
CableCARD™ ⁵ (for Digital Cable-ready sets)	2.50

** Digital/HD home terminal and remote prices vary by market.

INSTALLATION CHARGES

Standard Install/Reconnect (pre-wired home)	47.91
Standard Installation (unwired home)	75.54
Additional Outlet(s) at time of initial installation	30.97
Additional Outlet(s) separate trip	44.88
Equipment Deactivation Fee	5.99
COD Fee (Fee for payments received at time of install)	5.95



† Digital Terminal is required in order to receive some channels and/or services. Rates and charges apply to standard residential installations and service. The rates shown are for cable service packages and equipment do not include franchise fees or State and Federal regulatory fees.
§ Certain channels may not be available in all areas. Not all services available to CableCARD™ customers.

All prices subject to applicable tax and fees. All rates subject to change. Effective 2/1/11. All Premium and Pay-Per-View channels require a converter box. Call Time Warner Cable for complete information.

UPDATED CHANNEL LINE UPS

Get the latest lineups online.

We continually update our channel line up to provide you with a robust variety of services.

To view the current line up visit our website at:

www.timewarnercable.com/northeast

Ch. No.	Call Sign	Name	Classification
2	WKTV	WKTV	Basic
3	WSTM	WSTM	Basic
4	WCNY	WCNY	Basic
5	WTVH	WTVH	Basic
7	WNYS	My 43 WNYS	Basic
8	WSYT	WSYT	Basic
9	WSYR	WSYR-9 (ABC Syracuse)	Basic
10	YNN	YNN	Basic
11	WUTR	WUTR (Not avail in Oswego Cty or Town of Vienna)	Basic
12	WFXV	WFXV	Basic
13	WSTQ	CW6	Basic
14	CKWS	CKWS - TV / CH # 11	Basic
15	TBS	TBS	Basic
16	WGN AMER	WGN America	Basic
17	TWCS	Time Warner Cable Sports	Basic
18	WSPX	WSPX Ion	Basic
19	QVC	QVC: Quality Value Convenience Network	Basic
83	LEGIS	New York State Legislative Channel	Not Available On CableCARDS, Basic; Free On Demand
96	HSN	HSN	Basic
97	TVGN	TV Guide Network	Basic
98	CSPA-1	C-SPAN: Cable Satellite Public Affairs Network	Basic
99	PUBLIC	Public Access	Basic