



**UNITED STATES
POSTAL SERVICE®**

**Statement of Ownership, Management, and Circulation
(All Periodicals Publications Except Requester Publications)**

1. Publication Title New York State Register		2. Publication Number 0 1 9 7 - 2 4 7 2				3. Filing Date September 7, 2016	
4. Issue Frequency Weekly		5. Number of Issues Published Annually 52				6. Annual Subscription Price \$80 – 1 st Class \$40 – 2 nd Class	
7. Complete Mailing Address of Known Office of Publication (Not printer) (Street, city, county, state, and ZIP+4®) New York State Department of State, Division of Administrative Rules, One Commerce Plaza, 99 Washington Avenue, Suite 650, Albany, NY 12231-0001					Contact Person Maribeth St. Germain		
					Telephone (Include area code) (518) 474-6957		
8. Complete Mailing Address of Headquarters or General Business Office of Publisher (Not printer)							

9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Managing Editor (Do not leave blank)

Publisher (Name and complete mailing address)

New York State Department of State, One Commerce Plaza, 99 Washington Avenue, Suite 650, Albany, NY 12231-0001

Editor (Name and complete mailing address)

Maribeth St. Germain – Same as Above

Managing Editor (Name and complete mailing address)

10. Owner (Do not leave blank. If the publication is owned by a corporation, give the name and address of the corporation immediately followed by the names and addresses of all stockholders owning or holding 1 percent or more of the total amount of stock. If not owned by a corporation, give the names and addresses of the individual owners. If owned by a partnership or other unincorporated firm, give its name and address as well as those of each individual owner. If the publication is published by a nonprofit organization, give its name and address.)

Full Name	Complete Mailing Address
New York State Department of State	Division of Administrative Rules
	One Commerce Plaza
	99 Washington Avenue, Suite 650
	Albany, NY 12231-0001

11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box None

Full Name	Complete Mailing Address

12. Tax Status (For completion by nonprofit organizations authorized to mail at nonprofit rates) (Check one)
The purpose, function, and nonprofit status of this organization and the exempt status for federal income tax purposes:

Has Not Changed During Preceding 12 Months
 Has Changed During Preceding 12 Months (Publisher must submit explanation of change with this statement)

13. Publication Title New York State Register		14. Issue Date for Circulation Data Below September 7, 2016		
15 Extent and Nature of Circulation		Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date	
a. Total Number of Copies (<i>Net press run</i>)		300	300	
Paid Circulation (By Mail and Outside the Mail)	(1)	Mailed Outside-County Paid Subscriptions Stated on PS Form 3541 (Include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	153	144
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	(3)	Paid Distribution Outside the Mails Including Sales Through Dealers and Carriers, Street Vendors, Counter Sales, and Other Paid Distribution Outside USPS®	0	0
	(4)	Paid Distribution by Other Classes of Mail Through the USPS (e.g., First-Class Mail®)	22	21
c. Total Paid Distribution [Sum of 15b (1), (2), (3), and (4)]		213	183	
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e. Total Free or Nominal Rate Distribution (Sum of 15d (1), (2), (3) and (4))		53	53	
f. Total Distribution (Sum of 15c and 15e)		266	236	
g. Copies not Distributed (<i>See Instructions to Publishers #4 (page #3)</i>)		52	64	
Total (Sum of 15f and g)		318	300	
Percent Paid (15c divided by 15f times 100)		80%	77%	

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b. Total Paid Print Copies (Line 15c) + Paid Electronic Copies (Line 16a)		
c. Total Print Distribution (Line 15f) + Paid Electronic Copies (Line 16a)		
d. Percent Paid (Both Print & Electronic Copies) (16b divided by 16c \times 100)		

I certify that 50% of all my distributed copies (electronic and print) are paid above a nominal price.

17. Publication of Statement of Ownership

If the publication is a general publication, publication of this statement is required. Will be printed

Publication not required.

in the October 5, 2016 issue of this publication.

18. Signature and Title of Editor, Publisher, Business Manager, or Owner

Maribeth St. Germain, Publications Manager

Date

September 9, 2016

I certify that all information furnished on this form is true and complete. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties).

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5. If the publication had Periodicals authorization as a general publication, this Statement of Ownership, Management, and Circulation must be published, i.e., it must be printed in an issue that's primary mailed distribution is produced not later than October 10 for publications issued more frequently than weekly; or not later than October 31 for publications issued weekly or less frequently but more frequently than monthly; or in the first issue that's primary mailed distribution is produced after October 1 for all other publications.
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