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

STATEMENT OF ACCOUNT

for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α		~~~									
	AC		OUNTING PERIOD	COVERED B	Y THIS STATEMEN						
Accounting Period		2	019/1								
В	Ins		ctions:								
Owner	rate	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.									
		List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit									
	a si	a single statement of account and royalty fee payment covering the entire accounting period.									
	_		Check here if this is the s	system's first filing	g. If not, enter the system	's ID number assigned by	the Licensing Division.		007629		
	LE	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM									
		COX COMMUNICATIONS KANSAS, LLC									
					007629	920191					
								007629	2019/1		
		6	205 PEACHTREE			P					
			TLANTA, GEORIO		I ROAD - 12 FLO	JK					
			•						4		
С	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.										
System	1	1 IDENTIFICATION OF CABLE SYSTEM:									
		MAILING ADDRESS OF CABLE SYSTEM:									
	2	2 (Number, street, rural route, apartment, or suite number)									
	1										
		(City, town, state, zip code)									
D	Ins	stru	ctions: For complete	space D instruc	tions, see page 1b. Id	entify only the frst com	munity served below and r	elist on pa	ge 1b		
Area	wit	th a	ll communities.								
Served			TY OR TOWN			STATE					
First Community	_		ALINA			KS					
Community	E			-	ies if you report multip	le channel line-ups in S			000		
	Ald		TY OR TOWN (SAMPLE	.)		STATE MD	CH LINE UP	SUB	GRP#		
Sample	-		<u>``</u>			MD	A B		2		
	Alliance MD Gering MD						В		3		
			<u> </u>						-		
Privacy Act Notic	e: Sec	ection	111 of title 17 of the United	States Code autho	rizes the Copyright Offce to	collect the personally identif	ying information (PII) requested o	n this			
-							, such as name, address and telep				
• •	-						ng in the Offce's public indexes a				
				-		processing of your statemen ation that would be made by	t of account and its placement in t a court of law.	ne			
,			, . , -	5	, ,, ,,						

FOR COPYRIGHT OFFICE USE ONLY

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

8/16/2019

FORM SA3E. PAGE 1b.									
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
COX COMMUNICATIONS KANSAS, LLC 007629									
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as define 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 forn 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 mobile home parks should be reported in parenthese: below the identified city or town If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any station on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group designated by a number (based on your reporting from Part 9) When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a									
channel line-up designated by an alpha-letter(s) (based on your Space G reporting) ar (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	nd a subscriber gr								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
SALINA	KS			First					
				Community					
				See instructions for					
				additional information					
				on alphabetization.					
				Add rows as necessary.					

	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	STEM ID		
Name	COX COMMUNICATIONS KANSAS, LLC										
-	SECONDARY TRANSMISSION	I SERVICE: S	UBSCF	RIBERS AND R	ATES						
E	In General: The information in s	•		-		•					
0	system, that is, the retransmissi										
Secondary Transmission	about other services (including particular about other services (including particular about the second particular						those exis	sting on the			
Service: Sub-	Number of Subscribers: Bot						able syster	n, broken			
scribers and	down by categories of secondar										
Rates	each category by counting the n		•	0,(•	0	s charged			
	separately for the particular server Rate: Give the standard rate of							rge and the			
	unit in which it is generally billed	-						-			
	category, but do not include dise										
	Block 1: In the left-hand block			-							
	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 ca	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	DCK 1				BLOC					
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RATE		
	Residential:	CODOCIVID	LINO		U/II		(VIOL	ODDOCITIDEITO			
	Service to first set		8,396	\$0-\$25.00							
	 Service to additional set(s) 		2	No Cost							
	• FM radio (if separate rate)										
	Motel, hotel		28	\$0-\$25.00							
	Commercial		283	\$0-\$25.00							
	Converter										
	Residential		8,377	\$ 2.99							
	Non-residential		3,205	\$ 2.99							
	SERVICES OTHER THAN SEC										
_	In General: Space F calls for ra					all your cable sy	stem's ser	vices that were			
F	not covered in space E, that is,		'		•	• •					
- ·	service for a single fee. There a	•			0		0 (,			
Services Other Than	furnished at cost or (2) services amount of the charge and the u										
Secondary	enter only the letters "PP" in the		s usuali	y billed. If any i	ales ale c	naigeu on a vai	lable per-	biografii basis,			
ransmissions:	Block 1: Give the standard ra		the cab	ole system for e	ach of the	applicable serv	ices listed				
Rates	Block 2: List any services that										
	listed in block 1 and for which a brief (two- or three-word) descri				lished. Lis	t these other se	rvices in th	ie form of a			
	brief (two- or three-word) descri	plion and inclu	de the	rate for each.			1				
		BLO				DATE	0.475.00	BLOCK 2	DATE		
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SER ation: Non-res		RATE	CATEGO	ORY OF SERVICE	RATE		
	• Pay cable	\$ 15.99		otel, hotel	sidential						
	• Pay cable—add'l channel	10.00-32.00		ommercial							
	• Fire protection		-	y cable							
	•Burglar protection			y cable-add'l cl	nannel						
	Installation: Residential			e protection							
	• First set	20-100.00		rglar protection	I						
	Additional set(s)	\$ 25.00		services:							
	• FM radio (if separate rate)			econnect							
	Converter			sconnect		¢0, ¢50, 00					
				Itlet relocation		\$0-\$50.00					
			• Mo	ove to new add	ess	20.00-50.00					

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

007629

cox	COMMUNICATIONS KANSAS, LLC	
UU		

PRIMARY TRANSMITTERS: TELEVISION

LEGAL NAME OF OWNER OF CABLE SYSTEM:

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 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 located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifier 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 channe 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 located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you 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 representin 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 located in the paper SA3 form **Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the

FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifec

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

	o .	•		•	•	
		CHANN	EL 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	
KAAS-1	17.1	I	No		GARDEN CITY, KS	
KAAS-2	17.2	I-M	No		GARDEN CITY, KS	See instructions for
KAKE-1	10.1	N	No		WICHITA, KS	additional information
KAKE-2	10.2	I-M	No		WICHITA, KS	on alphabetization.
KDCU-1	31.1	I	No		DERBY, KS	
KMTW-1	36.1	I	No		HUTCHINSON, KS	
KMTW-2	36.2	I-M	No		HUTCHINSON, KS	
KOOD-1	9.1	E	No		HAYS, KS	
KOOD-2	9.2	E-M	No		HAYS, KS	
KOOD-3	9.3	E-M	No		HAYS, KS	
KPTS-1	8.1	E	No		HUTCHINSON, KS	
KPTS-2	8.2	E-M	No		HUTCHINSON, KS	
KPTS-3	8.3	E-M	No		HUTCHINSON, KS	
KSAS-3	24.3	I-M	No		WICHITA, KS	
KSCW-1	33.1	I	No		WICHITA, KS	
KSCW-2	33.2	I-M	No		WICHITA, KS	
KSCW-3	33.3	I-M	No		WICHITA, KS	
KSNG-2	11.2	I-M	No		GARDEN CITY, KS	

U.S. Copyright Office

PRIMARY TRANSMITTERS: TELEVISION In General: In space G. (dentify every television station (including translator stations and low power television stations) carried by your cable system drug the accounting period except (1) stations carried on you and the stations and except the stations of the stations and the stations and the station is an effect on June 24, 1081, permitting the carriage of cartian network program locations of the station have any period accept (1) stations carried by your cable system on a substitute program basi, as explained in the next paragraph carried by your cable system on a substitute program basis. In explained in the next paragraph carried by your cable system on a substitute program basis. The transmit transmit transmit transmit the station here, and also in space I. If the station was carried both on a substitute basis and also consome othe basis. For division transmit to the station was carried both on a substitute basis and also consome othe basis. For division transmit transmitter and transmitters and transmitters and trans	LEGAL NAME OF OW			LC		SYSTEM ID# 007629	Name			
carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and equalitons in effect on June 24. 1981, permitting the carriage of certain network programs [section: 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 specife FCC rules, regulations, or authorizations: - Do not list the station here, and also in space (1, if the station scarried 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 locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, teo. Identify each multicast tream associated with a station according to its over-the-air designation. For example, report multi cast stream as WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 3: ridicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter." If (ro network, Numiticast). "T (for independent), "I-M (for independent), "LM (for inde			-							
basis under specife FCC rules, regulations, or autionizations: • 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 and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multi acta stream associated with a station according to its over-the-air designation. For example, report multi acta stream associated are the station. To the station for broadcasting over-the-air ir its community of license. For example, WER is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station is a network station, an independent station, or a noncommercia educational on. Jor "E.M" (for noncommercial educational multicast). Text (for independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "T (for independent), "H.M (for independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "T (for independent), "H.M (for independent station, or a noncommercia educational station with the station is olicited the local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4: you must complete column 5, stating the basis on which you cable system carried the distant station on a part-time basis because of lack of activated channel capacity T for an explanation of local service area, see page (v) of the general instructions located in t	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									
 List te 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 locater in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi, each multicast stream as WETA-2". Simulcast streams must be reported in column 1 (list each stream services such as HBO, ESPN, etc. Identifi, each 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 channe on which your cable system carried 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), N-M"	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									
Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifieach multicast stream associated with a station according to its over-the-air designation. For example, report multi cast 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 channe 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 multicast), "T (for independent)."-HM (for independent multicast): "E" (for inoncommercial educational), or "L=M" (for noncommercial educational multicast) for the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered 'Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the station or on before June 30, 2009, between a cable system or an association representing the primary transmitter, enter the designation "E" (For noncounting period. Indicate by entering "LAC" if your cable system can a station, is identified. for "Exercise three categories, see page (v) of the general instructions located in the paper SA3 form Column 6; Give the locatio	• List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe									
its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe 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 located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin 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 community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community to which the station is identifier Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL INE VERANNEL NUMBER STATION No SALINA, KS KSNL-LD 6.1 N No KINA, KS KSNL-LD 6.1 N No HUTCHINSON, KS KWCH-1 12.1 N No HUTCHINSON, KS	Column 1: List ea each multicast strean cast stream as "WET	ich station's call n associated wit	th a station ad	cording to its o	ver-the-air desigr	nation. For example, report multi				
educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster 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 representin 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 located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is dentified. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.	its community of licer	nse. For exampl	e, WRC is Cl	•		0				
NUMBERSTATION(If Distant)KSNL-LD6.1NNoSALINA, KSKSNW-13.1NNoWICHITA, KSKWCH-112.1NNoHUTCHINSON, KSKWCH-212.2I-MNoHUTCHINSON, KSKWCH-312.3I-MNoHUTCHINSON, KS	(for independent mult For the meaning of th Column 4: If the s planation of local sem Column 5: If you cable system carried carried the distant sta For the retransmis of a written agreemen the cable system and tion "E" (exempt). Fon explanation of these t Column 6: Give th FCC. For Mexican or Note: If you are utiliz	ticast), "E" (for r nese terms, see station is outside vice area, see p have entered "Y the distant stati ation on a part-ti sion of a distan nt entered into c l a primary trans r simulcasts, als three categories ne location of ea Canadian static ing multiple cha	an oncommercial page (v) of the the local serving the image (v) of the cession of the local serving in column on during the ime basis been the multicast stron on or before J smitter or an a so enter "E". If a see page (v) ach station. F pons, if any, gir innel line-ups CHANN 3. TYPE	al educational), ne general instru- rvice area, (i.e. 4 general instruc- n 4, you must co- accounting per cause of lack of ream that is not une 30, 2009, b association repr f you carried the y) of the general or U.S. stations we the name of i , use a separate EL LINE-UP 4. DISTANT?	or "E-M" (for non- uctions located in "distant"), enter "Y stions located in the omplete column 5 iod. Indicate by e activated channel subject to a royal setween a cable s esenting the prime e channel on any l instructions loca , list the community will e space G for eace AA (2) 5. BASIS OF	commercial educational multicast) the paper SA3 form Yes". If not, enter "No". For an ex he paper SA3 form 5, stating the basis on which you intering "LAC" if your cable syster al capacity Ity payment because it is the subjec system or an association representin eary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifec the channel line-up.				
KSNW-13.1NNoWICHITA, KSKWCH-112.1NNoHUTCHINSON, KSKWCH-212.2I-MNoHUTCHINSON, KSKWCH-312.3I-MNoHUTCHINSON, KS			-	,						
KWCH-112.1NNoHUTCHINSON, KSKWCH-212.2I-MNoHUTCHINSON, KSKWCH-312.3I-MNoHUTCHINSON, KS	KSNL-LD	6.1	N	No		SALINA, KS				
KWCH-2 12.2 I-M No HUTCHINSON, KS KWCH-3 12.3 I-M No HUTCHINSON, KS	KSNW-1	3.1	N	No		WICHITA, KS				
KWCH-3 12.3 I-M No HUTCHINSON, KS	KWCH-1	12.1	N	No		HUTCHINSON, KS				
	KWCH-2	12.2	I-M	No		HUTCHINSON, KS				
KSNW-4 3.4 I-M No WICHITA, KS I <td>KWCH-3</td> <td>12.3</td> <td>I-M</td> <td>No</td> <td></td> <td>HUTCHINSON, KS</td> <td></td>	KWCH-3	12.3	I-M	No		HUTCHINSON, KS				
	KSNW-4	3.4	I-M	No						

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#COX COMMUNICATIONS KANSAS, LLC007629									
H Primary Transmitters: Radio	 PRIMARY TRANSMITTERS: RADIO 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 receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 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		
			·							
	1	1	ı		1		ı	1		

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2019/								
					SYSTEM ID# 007629	Name		
y every nor counting pe	nnetwork televis eriod, under spe	sion program broadcast by ecific present and former F0	a distant static CC rules, regu	lations, or authorizatior	is. For a further	Substitute		
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE C • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Yes Xino Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. Yes Xino 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: Give the broadcast station broadcasting the substitute program. Column 5: Give the broadcast station is location (the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."								
			WHEN SUBSTITUTE CARRIAGE OCCURRED FOR					
Yes or No		4. STATION'S LOCATION	AND DAY	FROM				
	S KANS SPECIA y every nois counting per- ing that must CONCER od, did you on? leave the PROGRA ute progra- e, please f every no listant stati ulations, c on. Do no: was broad gin of the si dicast static dian static h and day e "5/7." s when the Example: a r "R" if the nd regulati gramming <u>BSTITUT</u> 2. LIVE?	y every nonnetwork televis counting period, under spe- ing that must be included in CONCERNING SUBST od, did your cable system on? leave the rest of this page PROGRAMS ute program on a separate, please attach addition f every nonnetwork telev listant station and that you ulations, or authorization on. Do not use general of cy" or "NBA Basketball: was broadcast live, enter gn of the station broadca licast station's location (the dian stations, if any, the h and day when your system of regulations in effect du gramming that your system of regulations in effect du gramming that your system 2. LIVE? 3. STATION'S	S KANSAS, LLC SPECIAL STATEMENT AND PROGRAM LOO y every nonnetwork television program broadcast by counting period, under specific present and former FC ing that must be included in this log, see page (v) of th CONCERNING SUBSTITUTE CARRIAGE add, did your cable system carry, on a substitute bas on? leave the rest of this page blank. If your answer is PROGRAMS ute program on a separate line. Use abbreviations e, please attach additional pages. f every nonnetwork television program (substitute pl listant station and that your cable system substitute ulations, or authorizations. See page (vi) of the gel on. Do not use general categories like "movies", o ucy" or "NBA Basketball: 76ers vs. Bulls." was broadcast live, enter "Yes." Otherwise enter "I gin of the station broadcasting the substitute progra cleast station's location (the community to which the h and day when your system carried the substitute s = 5/7." s when the substitute program was carried by your Example: a program carried by a system from 6:01: r "R" if the listed program was substituted for progra d regulations in effect during the accounting period gramming that your system was permitted to delete BSTITUTE PROGRAM 2. LIVE?	S KANSAS, LLC S SPECIAL STATEMENT AND PROGRAM LOG y every nonnetwork television program broadcast by a distant static counting period, under specific present and former FCC rules, regund that must be included in this log, see page (v) of the general instruction of the general instruction of the general instruction cONCERNING SUBSTITUTE CARRIAGE od, did your cable system carry, on a substitute basis, any nonneron? leave the rest of this page blank. If your answer is "Yes," you ment PROGRAMS ute program on a separate line. Use abbreviations wherever po- e, please attach additional pages. f every nonnetwork television program (substitute program) that listant station and that your cable system substituted for the pro- ulations, or authorizations. See page (vi) of the general instruction. Do not use general categories like "movies", or "basketball" icy" or "NBA Basketball: 76ers vs. Bulls." was broadcast live, enter "Yes." Otherwise enter "No." ign of the station broadcasting the substitute program. Iccast station's location (the community to which the station is licd idian stations, if any, the community with which the station is licd idian stations, if any, the community with which the station is licd idian stations iden your system carried the substitute program. Use e '5/7." when the substitute program was carried by your cable system Example: a program carried by a system from 6:01:15 p.m. to 6: r "R" if the listed program was substituted for programming that y dregulations in effect during the accounting period; enter the le gramming that your system was permitted to delete under FCC IBSTITUTE PROGRAM VHE CARR 2. LIVE? 3. STATION'S	S KANSAS, LLC SPECIAL STATEMENT AND PROGRAM LOG y every nonnetwork television program broadcast by a distant station that your cable system counting period, under specific present and former FCC rules, regulations, or authorization g that must be included in this log, see page (v) of the general instructions located in the CONCERNING SUBSTITUTE CARRIAGE d, did your cable system carry, on a substitute basis, any nonnetwork television progr on? Yes leave the rest of this page blank. If your answer is "Yes," you must complete the prog PROGRAMS ute program on a separate line. Use abbreviations wherever possible, if their meaning e, please attach additional pages. f every nonnetwork television program (substitute program) that, during the accounting listant station and that your cable system substituted for the programming of another s ulations, or authorizations. See page (vi) of the general instructions located in the pap on. Do not use general categories like "movies", or "basketball". List specific program locy" or "NBA Basketball: 76ers vs. Bulls." was broadcast live, enter "Yes." Otherwise enter "No." gn of the station broadcasting the substitute program. Least station's location (the community to which the station is licensed by the FCC or, i dian stations, if any, the community with which the station is licensed by the FCC or, i dian stations, if any, the community to which the station is licensed by the FCC or, i dian stations, in flex, the orgam was carried by your cable system. List the times accure a "of7." when the substitute program was substituted for programming that your system was requi d regulations in effect during the accounting period; enter the letter "P" if the listed pro gramming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gramming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed p	ABLE SYSTEM: SYSTEM ID# S KANSAS, LLC 007629 If SPECIAL STATEMENT AND PROGRAM LOG If SPECIAL STATEMENT AND PROGRAM LOG If y every nonnetwork television program broadcast by a distant station that your cable system carried on a sounting period, under specific present and former FCC rules, regulations, or authorizations. For a further ing that must be included in this log, see page (v) of the general instructions located in the paper SA3 CONCERNING SUBSTITUTE CARRIAGE ad, did your cable system carry, on a substitute basis, any nonnetwork television program on? Isave the rest of this page blank. If your answer is "Yes," you must complete the program prOGRAMS Ute program on a separate line. Use abbreviations wherever possible, if their meaning is e, please attach additional pages. f every nonnetwork television program (substitute program) that, during the accounting listant station and that your cable system substituted for the programming of another station ulations, or authorizations. See page (vi) of the general instructions located in the paper on. Do not use general categories like "movies", or "basketball". List specific program (cy" or "NBA Basketball". Tofers vs. Bulls." was broadcast live, enter "Yes." Otherwise enter "No." gn of the station broadcasting the substitute program. Use numerals, with the month e'7." was horadcast live, enter "Yes." Otherwise enter "No." gn of the station broadcasting the substitute program. Use numerals, with the month e'7." <t< td=""></t<>		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#COX COMMUNICATIONS KANSAS, LLC007629										
J Part-Time Carriage Log	 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-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and 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 column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred 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 abbreviation "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.m12:00 p.m." 										
			DATES	AND HOURS	OF P	PART-TIME CAR	RIAGE				
			I CARRIAGE OCCL					I CARRIAGE OCO			
	CALL SIGN		HOUF		CALL SIGN			JRS			
		DATE	FROM	TO			DATE	FROM	TO		
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FORM	SA3E. PAGE 7.								
_	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name						
CO	X COMMUNICATIONS KANSAS, LLC	007629							
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.									
 COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. 									
bloc	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.								
If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be er low.	ntered on line 2 in block							
-	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	d be entered on line							
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K								
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	_,,							
	This is your minimum fee.	\$ 21,977.99							
Block 2	 DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the is 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 Yes_Complete the DSE schedule. No—Leave block 3 below blank and other television stations of the statement o	n 4, you must check d?							
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	\$ -							
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00							
	Line 3. Add lines 1 and 2 and enter here	\$ -							
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	<u>\$ 21,977.99</u>	Cable systems						
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.	0.00	submitting additional deposits under						
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing						
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the appropriate						
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 22,702.99	form for submitting the additional fees.						
	EFT Trace # or TRANSACTION ID #		auunonai tees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form and the Excel instructions ta								

ACCOUNTING PERI	OD: 2019/1				FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF C		10		SYSTEM ID# 007629
М	CHANNELS	at give (1) the numb	or of channels on which the c	able system carried tologician broadcast	atationa
IAI				able system carried television broadcast nannels, during the accounting period.	Sidions
Channels		_,,			
	1. Enter the total number				24
	system carried televis	ion broadcast statio	ons		
	2. Enter the total number	er of activated char	nnels		
	on which the cable sy	stem carried televis	sion broadcast stations		685
	and nonbroadcast ser	rvices			
N	INDIVIDUAL TO BE CO	ONTACTED IF FUI	RTHER INFORMATION IS N	EDED: (Identify an individual	
Individual to	we can contact about th	his statement of acc	count.)		
Be Contacted					
for Further	Name BRYAN G	Joss		Telephone	404-269-4444
Information					
		ACHTREE DUN et, rural route, apartmen	WOODY ROAD - 12 F	LOOR	
	ATLANTA	A, GEORIGA 3	0328		
	(City, town, sta	ite, zip)			
	Email E	BRYAN.GOSS@	@COX.COM	Fax (optional) 404-269	-1607
	CERTIFICATION (This s	statement of accour	nt must be certifed and signed	in accordance with Copyright Office reg	ulations.)
0					
Certifcation	• I, the undersigned, here	eby certify that (Cheo	ck one, <i>but only one</i> , of the box	es.)	
	(Owner other than c	corporation or partr	nership) I am the owner of the o	able system as identifed in line 1 of space	B: or
			······		_,
				authorized agent of the owner of the cable	system as identified
	in line 1 of space	B and that the owne	er is not a corporation or partne	ship; or	
	(Officer or partner) in line 1 of space		corporation) or a partner (if a pa	rtnership) of the legal entity identifed as ow	vner of the cable system
	I have examined the sta	atement of account a	and hereby declare under penal	y of law that all statements of fact containe	ed herein
	are true, complete, and c [18 U.S.C., Section 1001		f my knowledge, information, an	d belief, and are made in good faith.	
		(1000)]			
		X ^{/s/ Mary}	Vickers		
	E	Enter an electronic sic	anature on the line above using a	n "/s/" signature to certify this statement.	
	(6	e.g., /s/ John Smith).	Before entering the first forward	slash of the /s/ signature, place your cursor button will avoid enabling Excel's Lotus com	
	5	utton, then type /s/ a	nu you name. Pressing the r		ipaubinty setungs.
	т	Typed or printed na	ame: MARY VICKERS		
	Т		ESIDENT		
		(Title of officia	al position held in corporation or par	nership)	
		Date: August 15	2010		
		Date: August 15,	2013 		
Privacy Act Notice	: Section 111 of title 17 of th	ne United States Code	e authorizes the Copyright Office	to collect the personally identifying informati	on (PII) requested on th
-				b identify or trace an individual, such as nam	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
COX COMMUNICATIONS KANSAS, LLC	007629	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIF The Satellite Home Viewer Act of 1988 amended Title 17, section 111 lowing sentence: "In determining the total number of subscribers and the gross service of providing secondary transmissions of primary broad scribers and amounts collected from subscribers receiving sec	1(d)(1)(A), of the Copyright Act by adding the fol- amounts paid to the cable system for the basic dcast transmitters, the system shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the not paper SA3 form. During the accounting period did the cable system exclude any amou made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	nts of gross receipts for secondary transmissions	Concerning Gross Receipts Exclusion
	Name Mailing Address	
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submit For an explanation of interest assessment, see page (viii) of the gene		Q
Line 1 Enter the amount of late payment or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
Line 3 Multiply line 2 by the number of days late and enter the sum h	nere x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	•	
* To view the interest rate chart click on <i>www.copyright.gov/licens</i> contact the Licensing Division at (202) 707-8150 or licensing@c	<i>sing/interest-rate.pdf.</i> For further assistance please copyright.gov.	
** This is the decimal equivalent of 1/365, which is the interest as NOTE: If you are filing this worksheet covering a statement of account please list below the owner, address, first community served, account filing.	at already submitted to the Copyright Offce,	
Owner Address		
First community served Accounting period ID number		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyr	ight 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 effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the filing, 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 number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3E (LONG FORM)

Step 1: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of account (page 3), a distant station is:

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25

Note that local stations are not counted at all in computing DSEs.

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3E (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particular station's DSE for the accounting period.

TOTAL OF DSEs

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee and the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment.

The 3.75 Fee. If a cable system located in whole or in part within a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable systems fling SA3E (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable.

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.

2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial 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.

DSE SCHEDULE. PAGE 11.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distant that is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSE
 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE
If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

 Identify the communities/areas represented by each subscriber group.
 For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule; or

If any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule.

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

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

		Distant Stations Carried		Identification	of Subscriber	Groups		
In most cases	under current FCC	STATION	DSE	CITY	OUTSIDE LC	CAL	GRO	SS RECEIPTS
rules, all of F	airvale would be within	A (independent)	1.0		SERVICE AF	REA OF	FROM S	UBSCRIBERS
the local servic	e area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B	, C, D ,E		\$310,000.00
A and C and al	I of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A an	d C		100,000.00
dega Bay wou	ld be within the local	D (part-time)	0.139	Bodega Bay	Stations A an	d C		70,000.00
service areas o	of stations B, D, and E.	E (network)	0.25	Fairvale	Stations B, D	, and E		120,000.00
		TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
	1	Minimum Fee Total Gross	Receipts		\$600,000.00			
Santa Rosa	Stations A and C		•		x .01064			
	35 mile zone				\$6,384.00			
		First Subscriber Group		Second Subso	criber Group		Third Subscriber Group	
	· · ·	(Santa Rosa)		(Rapid City and	l Bodega Bay)		(Fairvale)	
	Fairvale							
		Gross receipts	\$310,000.00	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
Rapid City		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
	Bodega	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
/ +	Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	′01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
/ F		Base rate fee	\$6,497.20	Base rate fee		\$1,907.71	Base rate fee	\$1,604.03
Station and 35 mile		Total Base Rate Fee: \$6,4 In this example, the cable s				3, line 1 (page	7)	

1	LEGAL NAME OF OWNER OF CABL				S	YSTEM ID#						
	COX COMMUNICATION	S KANSAS, L	LC			007629						
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line			н	0.00							
2	Instructions: In the column headed "Call S	ign": list the ca	Il signs of all distant station	s identified by th	e letter "O" in column 5							
Computation of DSEs for	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- mercial educational station, give the DSE as ".25."											
Category "O"	CATEGORY "O" STATIONS: DSEs											
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Add rows as												
necessary.												
Remember to copy												
all formula into new												
rows.												
				<u> </u>		B						

Name		OWNER OF CABLE SYSTEM: UNICATIONS KANSA	AS, LLC					ULE. PAGE 12. SYSTEM ID# 007629
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 4 be carried ou Column 4 give the type Column 6	CAPACITY ist the call sign of all dista 2: For each station, give t correspond with the infor 3: For each station, give t 4: Divide the figure in colu- t at least to the third deci- 5: For each independent -value as ".25." 6: Multiply the figure in co- point. This is the station's	he number of hou mation given in sp he total number o umn 2 by the figure mal point. This is t station, give the "t olumn 4 by the figu	rs your cable system pace J. Calculate on f hours that the stati e in column 3, and g he "basis of carriag ype-value" as "1.0." rre in column 5, and	n carried the stat ly one DSE for e on broadcast ov jive the result in e value" for the s For each networ give the result in	tion during the account each station. er the air during the ac decimals in column 4. tation. k or noncommercial ec n column 6. Round to r	counting period. This figure must ducational station, to less than the	
Capacity	1. CALL SIGN	2. NUMBE OF HOU CARRIE	R 3. JRS ED BY	AC STATIONS: NUMBER OF HOURS STATION	COMPUTATI 4. BASIS OF CARRIAG VALUE	5. TYP		SE
		SYSTE	M	ON AIR				
			÷	=		x	=	
			÷			x	=	
			<u>+</u>			×		••••••
			÷ ÷			x		•••••••
						x x		
			÷				Ē	
			÷	=		x x	=	
4 Computation of DSEs for Substitute- Basis Stations	Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule,							rm).
						TION OF DSEs		1 5 6 5
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS		4. DSE
			-				* -	=
				2			÷	=
			<u>-</u>	=			÷	=
		4	-	=			÷	=
		+	÷	=			÷	=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of p		ule,		0.0	00	
5		ER OF DSEs: Give the arr is applicable to your syster		es in parts 2, 3, and	4 of this schedule	and add them to provid	le the total	
Total Number	1. Number o	of DSEs from part 2 ●			I	•	0.00	
of DSEs	2. Number o	of DSEs from part 3 ●			I	•	0.00	
	3. Number o	of DSEs from part 4 ●			,	•	0.00	
		,			· ,			
	TOTAL NUMBE	ER OF DSEs						0.00

DSE SCHEDULE. P	PAGE 13.							ACCOUNTIN	G PERIOD: 2019/
	WNER OF CABLE S		_				S	YSTEM ID#	Name
	NICATIONS KA	NSAS, LL	C					007629	Name
nstructions: Blo	ck A must be comp	oleted.							
n block A: If your answer if	"Yes " leave the re	mainder of na	art 6 and part 3	7 of the DSE sched	ule blank and	complete par	8 (nage 16) of th	٩	6
chedule.	,		·			complete par		0	Ŭ
If your answer if	"No," complete blo			TELEVISION M					Computation of
s the cable system	m located wholly o			ler markets as defi		tion 76 5 of E		lations in	3.75 Fee
effect on June 24,			iajoi and sinai				SC fules and legul		
Yes—Com	plete part 8 of the	schedule—D	O NOT COMF	LETE THE REMAI	NDER OF PA	RT 6 AND 7.			
X No-Comp	olete blocks B and	C below.							
		BL OC				Fe			
Column 1:									
CALL SIGN	under FCC rules	and regulatio e DSE Scheo	ns prior to Jun Iule. (Note: Th	part 2, 3, and 4 of t le 25, 1981. For fur le letter M below re Act of 2010.)	ther explanati	on of permitte	d stations, see the	-	
Column 2:	Enter the approp	riate letter ind	icating the ba	sis on which you ca	arried a permit	ted station.			
BASIS OF PERMITTED		0		elow pertain to thos ket quota rules [76		,	,		
CARRIAGE	76.61(b)(c)]	eu pursuant it		ket quota rules [70	.57, 70.59(b),	70.01(b)(c), 7		J	
				6.59(d)(1), 76.61(e 9(c), 76.61(d), 76.6		-	.61(e)(1)		
	D Grandfathered	d station (76.6	5) (see paragi	raph regarding sub	.,	· /-	ations in the		
	instructions fo E Carried pursua		,	CC rules (76 7)					
	*F A station pre	viously carried	d on a part-tim	e or substitute bas	•				
	G Commercial U M Retransmissio		•	ontour, [76.59(d)(5 am), 76.61(e)(5),	, 76.63(a) refe	rring to 76.61(e)(5)]	
	this schedule to c	determine the	DSE.)	etter "F" in column 2				1	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
		•							
								0.00	
		B	LOCK C: CC	OMPUTATION OF	- 3.75 FEE				
ine 1: Enter the	e total number of	DSEs from p	part 5 of this	schedule				-	
ine 2: Enter the	e sum of permitte	d DSEs from	n block B abo	ve			m	-	
				of DSEs subject 7 of this schedule		ate.		0.00	
ine 4: Enter gro	oss receipts from	space K (pa	ige 7)						Do any of the
							x 0.03	375	DSEs represe partially
ine 5: Multinly I	ine 4 by 0.0375 a	and enter su	m here						permited/ partially
		and ontor ou					x		nonpermittee
		_ ,	-				~		carriage? If yes, see pa
ine 6: Enter tota	al number of DSE	s trom line	3					-	9 instructions
								_	
ing 7: Multiply I	ine 6 by line 5 an	nd enter here	and on line	2 block 3 space	l (nage 7)		1	0.00	

	OWNER OF CABLE		LC				3	YSTEM ID# 007629	
				ISION MARKET		11			6
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
									Computation 3.75 Fee
			· · ·						

						DSE SCHEDULE. PAGE 14.			
Name	LEGAL NAME OF OWN	VER OF CABLE SYSTE				SYSTEM ID# 007629			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., thos 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. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections								
l									
	1. CALL	2. PRIOR	FOR STATIONS CARRI 3. ACCOUNTING	ED ON A PART-TIME AN 4. BASIS OF	5. PRESENT	6. PERMITTED			
	SIGN	2. PRIOR DSE	3. ACCOUNTING PERIOD	4. BASIS OF CARRIAGE	5. PRESENT DSE	6. PERMITTED			
		DOL		C, IIIIIIIOL	DOL	DOL			
7 Computation of the		"Yes," complete bloc		part 8 of the DSE sched	ule.				
Syndicated			BLOCK A: MAJOR	TELEVISION MARK	ET				
Exclusivity									
Surcharge	 Is any portion of the or 	cable system within a t	op 100 major television mai	rket as defned by section 7	6.5 of FCC rules in effect	June 24, 1981?			
	Yes—Complete	blocks B and C .		X No—Proceed to	part 8				
	BLOCK B: Ca	arriage of VHF/Grade	B Contour Stations	BLOCK	C: Computation of Exer	npt DSEs			
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places a grad	primary stream of a e B contour, in whole	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)					
	Yes—List each s	tation below with its app	propriate permitted DSE	Yes—List each st	ation below with its appropr	iate permitted DSE			
	No-Enter zero a	and proceed to part 8.		X No—Enter zero a	nd proceed to part 8.				
	CALL SIGN	DSE CA	LL SIGN DSE	CALL SIGN	DSE CALL S	GN DSE			
		TO.	TAL DSES 0.00		TOTAL D	OSEs 0.00			
					L	4			

LEGAL NA	AME OF OWNER OF CABLE SYSTEM: SOUTHING ATIONS KANSAS, LLC	693107629	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	,065,600.87	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC?		
	Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	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	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE 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)		
	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		
I	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		

ACCOUNTING PERIOD: 2019/1

ACCOUNTING PERIOD	. 2019/1	DSE SCHEDULE. PAGE	16.
Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM: SYSTEM:	
Hamo		COX COMMUNICATIONS KANSAS, LLC 0076	29
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)	
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	1
		Syndicated Exclusivity Surcharge	<u>.</u>
8	You m 6 was	c tions: ust 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. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation of	-	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ır answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	
Base Rate Fee	blank		
	were lo	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	C	Yes—Complete part 9 of this schedule. X 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)	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes,"	
		use the total number of DSEs from part 5.)	
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	
		B. Enter 0.00701 of gross receipts (the amount in section 1)▶ \$ 14,479.86	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	ך
		Base Rate Fee	.

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	
сох	COMMUNICATIONS KANSAS, LLC 007629	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		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) ▶\$	Ŭ
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$	Computation of
		Base Rate Fee
	C. Multiply line B by 3.000 and enter here \$	
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) 5	
	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 S 0.00	
IMPOF	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9
•	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Commutation
receipt	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	Computation of
this ex	clusion, you must:	Base Rate Fee
	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 o	and Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity Surcharge
Finally	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	for
	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 loo compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Partially Distant
	er, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and
	Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
	: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Stations
	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located	
	the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by	
	ne token, the station is distant to the subscriber.) : Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
subscr	ber 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.	
•	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.	
In each	section:	
	fy 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 bers in the group.	
• lf:		
, .	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,	
, ,	6 of this schedule.	
	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions a paper SA3 form.	
	bute 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 or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show	
	stual calculations on the form.	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	STEM IC
Haine	COX COMMUNICATIONS KANSAS, LLC	00762
	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						SI	STEM ID# 007629	Name
BI				TE FEES FOR EACH				
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP				9
COMMUNITY/ AREA 0			U	COMMUNITY/ AREA 0				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						-		Syndicated Exclusivity
								Surcharge
						=		for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROUP	כ		FOURTH	SUBSCRIBER GROUP	þ	
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
						-		
				· · · · · · · · · · · · · · · · · · ·				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth Group \$		\$	0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth Group \$		0.00			
								
Base Rate Fee: Add the Enter here and in block 3	e rees for each subscri pace L (page 7)	is snown in the boxes ab	ove.	\$	0.00			

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LEGAL NAME OF OWNE COX COMMUNICA			•			S	6YSTEM ID# 007629	Name
В	LOCK A:		BASE RA	ATE FEES FOR EACH	SUBSCR	BER GROUP		
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP				9
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
	DOL		DOL	O/LEE OIGIN	DOL	ONEE OIGH	DOL	Base Rate Fee
		=						and
						_		Syndicated
								Exclusivity
								Surcharge
						-		for Partially
								Distant
								Stations
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Secor	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
						-		
						-		
						-		
						-		
Total DSEs 0.00		0.00	Total DSEs 0.00			0.00		
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth Group \$		0.00			
Base Rate Fee Third G	Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth Group \$ 0.0			0.00	
	Base Rate Fee: Add the base rate fees for each subscriber group Enter here and in block 3, line 1, space L (page 7)				above.	\$	0.00	

ACCOUNTING PERIOD: 2019/1

		FORM SA3E. PAGE 20.						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS KANSAS, LLC	SYSTEM ID# 007629						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP							
9 Computation	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma 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 and Syndicated Exclusivity Surcharge for Partially	 INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. 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 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. 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 							
Distant Stations	gures applicable to the particular group. You do not need to show							
	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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge						
	computation	computation						
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group						
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP						
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs						
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge						
	computation	computation						
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page							