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

SA3E Long Form

Return completed workbook by email to:

coplicsoa@copyright.gov

For additional information,

contact the U.S. Copyright

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

Α

Accounting Period

Β

Owner

FOR COPYRIGHT	OFFICE USE ONLY
DATE RECEIVED	AMOUNT
2-24-22	\$
	ALLOCATION NUMBER
	•

				Office Licensing Di (202) 707-8150	vision at: Tel:
AC	ACCOUNTING PERIOD COVERED BY THIS STATE	EMENT:			
	2021/2				
rate	Instructions: Give the full legal name of the owner of the cable system. If the rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts If there were different owners during the accounting period, on a single statement of account and royalty fee payment covering the	s the business of the cable s <i>ly the owner on the last day</i>	system.	·	
a si	Check here if this is the system's first filing. If not, enter the s	• /	ed by the Licensing Division	n	007641
LE	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYS COX COMMUNICATIONS KANSAS, LLC	ΤΕΜ			
				00764	120212
				007641	2021/2
	6205 PEACHTREE DUNWOODY ROAD - 12 I ATLANTA, GEORIGA 30328	FLOOR			
	INSTRUCTIONS: In line 1, give any business or trade names names already appear in space B. In line 2, give the mailing	•	•		
1	1 IDENTIFICATION OF CABLE SYSTEM:				
	MAILING ADDRESS OF CABLE SYSTEM				

С		TRUCTIONS: In line 1, give any business or trade names used to ic nes already appear in space B. In line 2, give the mailing address of	,	1 2	
System	1	IDENTIFICATION OF CABLE SYSTEM:			
	_	MAILING ADDRESS OF CABLE SYSTEM:			
	2	(Number, street, rural route, apartment, or suite number)			
		(City, town, state, zip code)			
D Area		tructions: For complete space D instructions, see page 1b. Identify all communities.	-	unity served below and reli	st on page 1b
Served		CITY OR TOWN	STATE		
First		ТОРЕКА	KS		
Community	В	elow is a sample for reporting communities if you report multiple cha	nnel line-ups in Sp	bace G.	
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Ald	a	MD	Α	1
oumpio	Allia	ance	MD	В	2
	Ger	ing	MD	В	3
form in order to proc numbers. By providi	ess y ng Pl	tion 111 of title 17 of the United States Code authorizes the Copyright Offce to collect our statement of account. PII is any personal information that can be used to identify o I, you are agreeing to the routine use of it to establish and maintain a public record, wh	or trace an individual, so nich includes appearing	uch as name, address and telepho in the Offce's public indexes and i	ne in
		or the public. The effect of not providing the PII requested is that it may delay process ments of account, and it may affect the legal suffciency of the fling, a determination th	0,	•	

FORM SA3E. PAGE 1b.				
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
COX COMMUNICATIONS KANSAS, LLC			007641	
Instructions: List each separate community served by the cable system. A "communi in FCC rules: "a separate and distinct community or municipal entity (including unincor areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The f of system identification hereafter known as the "first community." Please use it as the fi	rporated communitie	es within unincorpo you list will serve as	rated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile hot below the identified city or town.	ome parks should be	e reported in parent	theses	
If all communities receive the same complement of television broadcast stations (i.e., all communities with the channel line-up "A" in the appropriate column below or leave to on a partially distant or partially permitted basis in the DSE Schedule, associate each telesignated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-comm	the column blank. If relevant community nunity basis, associa	you report any stat with a subscriber o ate each communit	tions jroup, y with a	
channel line-up designated by an alpha-letter(s) (based on your Space G reporting) an (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns		p designated by a	number	
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
ТОРЕКА	KS	AA		First
AUBURN	KS	AA		Community
JEFFERSON COUNTY	KS	AA		
	KS	AB		
MERIDEN PERRY	KS KS	AA AA		
		~		See instructions for additional information
				on alphabetization.
	••••••			
				Add rows as necessary.
	••••••			
	••••••			

Namo	LEGAL NAME OF OWNER OF CABLE	E SYSTEM:						S	YSTEM II
Name	COX COMMUNICATION	S KANSAS,	LLC						00764
F	SECONDARY TRANSMISSION	SERVICE: SU	BSCRI	BERS AND RA	TES				
E	In General: The information in s			-	-	-			
C oosendom:	system, that is, the retransmissio								
Secondary Transmission	about other services (including p last day of the accounting period		-				iose existi	ng on the	
Service: Sub-	Number of Subscribers: Both						le system	broken	
scribers and	down by categories of secondary								
Rates	each category by counting the nu separately for the particular servi Rate: Give the standard rate cl	ice at the rate i	ndicate	d-not the num	ber of set	s receiving servi	ce).	-	
	unit in which it is generally billed. category, but do not include disc Block 1: In the left-hand block	ounts allowed t	or adva	ance payment.					
	systems most commonly provide that applies to your system. Note	to their subscr	ibers. (Give the numbe	r of subsc	ribers and rate f	or each lis	ted category	
	categories, that person or entity			-		-			
	subscriber who pays extra for ca					in the count un	der "Servio	e to the	
	first set" and would be counted o	0			()	convice that are	different	om those	
	Block 2: If your cable system h printed in block 1 (for example, ti	-		-					
	with the number of subscribers a sufficient.								
	BLOCK 1						BLOC		1
	CATEGORY OF SERVICE	NO. OF SUBSCRIBI		RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential:	CODOCIAD		TOTE	0/th		(TOE	CODCORDERCO	TUTE
	Service to first set	1:	3,526	\$25-\$50.00					
	 Service to additional set(s) 		1	No Cost					
	• FM radio (if separate rate)								
	Motel, hotel		25	\$25-\$50.00					
	Commercial		812	\$25-\$50.00					
	Converter		1 2 4 4						
	Residential		4,314	\$ 4.00 \$ 4.00					
	Non-residential		5,689	\$ 4.00					
	SERVICES OTHER THAN SEC	ONDARY TRA		SIONS: RATES	;				
Б	In General: Space F calls for rat					l your cable syst	em's servi	ces that were	
F	not covered in space E, that is, the					,	,		
	service for a single fee. There ar	•		do not need to	anvo roto i	nformation cond		services	
Sorviços	furnished at cost or (2) services	or facilitiae furn			•				
Services Other Than	furnished at cost or (2) services of amount of the charge and the un			o nonsubscribe	rs. Rate in	formation shoul	d include l	ooth the	
Services Other Than Secondary	furnished at cost or (2) services of amount of the charge and the un enter only the letters "PP" in the	it in which it is		o nonsubscribe	rs. Rate in	formation shoul	d include l	ooth the	
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard rate	it in which it is rate column. e charged by th	usually ne cable	o nonsubscribe billed. If any ra e system for ea	rs. Rate in tes are ch ch of the a	formation shoul arged on a varia applicable servic	d include i ble per-pr es listed.	ooth the ogram basis,	
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Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the I Block 1: Give the standard rate Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	it in which it is rate column. e charged by th your cable sys separate charg tion and includ BLO0 RATE \$ 15.99	usually ne cable tem fur e was r e the ra <u>CK 1</u> <u>CATEC</u> Install • Mc • Co	o nonsubscribe billed. If any ra e system for ea nished or offere made or establi ate for each. GORY OF SER ation: Non-res otel, hotel	rs. Rate in tes are ch ch of the a ed during t shed. List	formation shoul arged on a varia applicable servic he accounting p these other serv	d include i ble per-pr es listed. eriod that ices in the	both the ogram basis, were not form of a BLOCK 2	RATE
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Name

G

Primary

Transmitters:

Television

SYSTEM ID#

007641

COX	COMMUNICATIONS	KANSAS	

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 other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

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

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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

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

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. **Column 6:** Give the location of each station. For U.S. stations, list the community to which the station is licensed by the

CHANNEL LINE-UP AA 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION 1. CALL SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER STATION (If Distant) KCPT-1 19.1 Е No KANSAS CITY, MO KSNG-2 Yes GARDEN CITY, KS 11.2 I-M Ο See instructions for KSNT-1 27.1 TOPEKA, KS additional information Ν No on alphabetization. KSNT-4 27.4 I-M No TOPEKA, KS KSQA-1 12.1 No **TOPEKA, KS** L KTKA-1 49.1 Ν No TOPEKA, KS KTKA-2 49.2 I-M No **TOPEKA, KS** KTKA-3 49.3 I-M No TOPEKA, KS KTMJ-2 43.2 No TOPEKA, KS I-M KTMJ-3 43.3 I-M No TOPEKA, KS KTMJ-4 43.4 I-M No **TOPEKA, KS** KTMJ-CD I TOPEKA, KS 43.1 No KTWU-1 11.1 Е TOPEKA, KS No TOPEKA, KS **KTWU-2** 11.2 E-M No KTWU-3 11.3 E-M No **TOPEKA, KS** WIBW-1 **TOPEKA, KS** 13.1 Ν No WIBW-2 13.2 No **TOPEKA, KS** I-M WIBW-3 13.3 I-M TOPEKA, KS No

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

007641

-				
COX CC	MMUNI	CATIONS	KANSAS, LLC	

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 specific FCC rules, regulations, or authorizations:

 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

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

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

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

		CHANN	EL LINE-UP	AA (2)		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
WIBW-4	13.4	I-M	No		TOPEKA, KS	
WIBW-5	13.5	I-M	No		TOPEKA, KS	See instructions for
						additional information
						on alphabetization.
					<u> </u>	

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

007641

COX COM	MUNICATION	S KANSAS. LLC

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 specific FCC rules, regulations, or authorizations:

 Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.

 List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

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

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

		СНАММ	EL LINE-UP	٨R	
		CHANN	EL LINE-UP	AD	
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
KCPT-1	19.1	Е	No		KANSAS CITY, MO
KCPT-4	19.4	E-M	No		KANSAS CITY, MO
KCTV-1	5.1	N	No		KANSAS CITY, MO
KCWE-1	29.1	I	No		KANSAS CITY, MO
KCWE-2	29.2	I-M	No		KANSAS CITY, MO
KMBC-1	9.1	N	No		KANSAS CITY, MO
KMBC-2	9.2	I-M	No		KANSAS CITY, MO
KMCI-1	38.1	I	No		LAWRENCE, KS
KMCI-2	38.2	I-M	No		LAWRENCE, KS
KPXE-1	50.1	I	No		KANSAS CITY, MO
KSHB-1	41.1	N	No		KANSAS CITY, MO
KSHB-2	41.2	I-M	No		KANSAS CITY, MO
KSMO-1	62.1	I	No		KANSAS CITY, MO
KTWU-1	11.1	E	No		TOPEKA, KS
KTWU-2	11.2	E-M	No		TOPEKA, KS
KTWU-3	11.3	E-M	No		TOPEKA, KS
WDAF-1	4.1	I	No		KANSAS CITY, MO
WDAF-2	4.2	I-M	No		KANSAS CITY, MO

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

	WNER OF CABLE SY UNICATIONS K		LC		SYSTEM ID# 007641	Name
	TTERS: TELEVISIO	•	-			
n General: In space	ce G, identify every	/ television sta	ation (including 1	translator stations	and low power television stations)	•
arried by your cab	le system during th	ne accounting	period, except	(1) stations carried	l only on a part-time basis under	G
•				•	in network programs [sections nd (2) certain stations carried on a	Primary
()()	basis, as explaine		Ũ	r(c)(z) and (+))], a		Transmitters:
				s carried by your ca	able system on a substitute program	Television
	: FCC rules, regula tion here in space			e Special Stateme	nt and Program Log)—if the	
	ied only on a subs					
					ute basis and also on some other	
in the paper SA		erning substit	lute dasis station	ns, see page (v) of	the general instructions located	
Column 1: List	each station's call	-			s such as HBO, ESPN, etc. Identify	
			•	•	ion. For example, report multi-	
VETA-simulcast).	- TA-2 . Simulcast	streams must	t be reported in t	column 1 (list each	stream separately; for example	
Column 2: Give			-		on for broadcasting over-the-air in	
,	ense. For example e system carried th	,	annel 4 in Wash	ington, D.C. This	may be different from the channel	
•	•		ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
educational station	, by entering the le	tter "N" (for ne	etwork), "N-M" (f	for network multica	ist), "I" (for independent), "I-M"	
	ulticast), "E" (for no these terms, see p		,,		mmercial educational multicast). e paper SA3 form	
Column 4: If the	e station is outside	the local serv	vice area, (i.e. "c	distant"), enter "Ye	s". If not, enter "No". For an ex-	
	ervice area, see pa					
				•	tating the basis on which your ering "LAC" if your cable system	
•	station on a part-tir	-		-		
					payment because it is the subject	
•					tem or an association representing y transmitter, enter the designa-	
			•	•	her basis, enter "O." For a further	
					d in the paper SA3 form. to which the station is licensed by the	
			or U.S. stations,	list the community		
		ns if any div	e the name of th			
	izing multiple char			e community with	which the station is identifed.	
		nnel line-ups,		ne community with space G for each o	which the station is identifed.	
1. CALL	izing multiple char	CHANN	use a separate : IEL LINE-UP	ne community with space G for each o	which the station is identifed. channel line-up.	
1. CALL SIGN		nnel line-ups,	use a separate	ne community with space G for each o AB (2)	which the station is identifed.	
	izing multiple char 2. B'CAST	CHANN 3. TYPE	use a separate : EL LINE-UP 4. DISTANT? (Yes or No)	ne community with space G for each o AB (2) 5. BASIS OF	which the station is identifed. channel line-up.	
SIGN	izing multiple char 2. B'CAST CHANNEL	CHANN 3. TYPE OF	use a separate : EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up.	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
1. CALL SIGN WDAF-3	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	use a separate a EL LINE-UP 4. DISTANT? (Yes or No)	e community with space G for each of AB (2) 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION	

Name	LEGAL NAME OF C								SYSTEM ID# 007641				
H Primary Transmitters: Radio	 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 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). 												
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION				
					-								
	1	L			⊢⊢			ļ					

ACCOUNTING PERIOD: 2021/	ACCO	UNTING	PERIOD:	2021/2
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FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2021
LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#	N
COX COMMUNICATIO	NS KANS	AS, LLC				007641	Name
SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LOC	3			
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	CC rules, regu	ations, or authorizations	ations. For a further	Substitute
				ie general insi	ructions located in		Carriage:
 SPECIAL STATEMENT During the accounting per broadcast by a distant state 	riod, did you			is, any nonne		rogram íes XNo	Special Statement ar Program Lo
Note: If your answer is "No log in block 2.	", leave the	rest of this pag	ge blank. If your answer is	"Yes," you mi			
2. LOG OF SUBSTITUTE							
In General: List each subs clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informa	ice, please of every no distant stat gulations, c	attach addition nnetwork telev ion and that yo or authorization	al pages. ision program (substitute p ur cable system substitute is. See page (vi) of the ger	program) that, d for the prog neral instruction	during the accou gramming of anoth ons located in the	nting ner station paper	
Column 3: Give the call	n was broad sign of the s	dcast live, ente station broadca	76ers vs. Bulls." r "Yes." Otherwise enter "N asting the substitute progra ne community to which the	am.	nsed by the FCC	or, in	
the case of Mexican or Car	nadian statio	ons, if any, the	community with which the	station is ider	ntified).		
Column 5: Give the mor first. Example: for May 7 given the second seco		when your sys	tem carried the substitute	program. Use	numerals, with th	e month	
, , ,		e substitute pro	gram was carried by your	cable system	List the times ac	curately	
to the nearest five minutes.							
stated as "6:00–6:30 p.m." Column 7: Enter the lett	er "R" if the	listed program	was substituted for progra	amming that v	our system was re	equired	
to delete under FCC rules a	and regulati	ons in effect du	uring the accounting period	d; enter the le	tter "P" if the listed	d pro	
gram was substituted for pr effect on October 19, 1976		that your syste	em was permitted to delete	e under FCC i	ules and regulation	ons in	
	•			\\/LJF	EN SUBSTITUTE	:	
S		E PROGRAM		CARR	IAGE OCCURRE	T. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM —	DELETION TO	
					1		
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Name	LEGAL NAME OF C		SYSTEM: SKANSAS, LLC						SY	STEM ID# 007641			
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 oc- curred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the 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.m 12:00 p.m." 												
	DATES AND HOURS OF PART-TIME CARRIAGE												
		WHEN	I CARRIAGE OCCUI	RRED			WHEN	I CARRIAGE O	CCUR	RED			
	CALL SIGN	DATE	HOUR FROM	S TO		CALL SIGN	DATE	H FROM	OURS	то			
		DATE		10			DATE	FROM	_	10			
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FORM	SA3E. PAGE 7.							
LEGA	IL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name					
CO	X COMMUNICATIONS KANSAS, LLC	007641	Nume					
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.								
		· · ·						
Instrue • Corr • Corr • If yo fee f • If yo accc ▶ If pa bloc	 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. If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below. If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 							
	low. rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	be entered on line						
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more at least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064							
	Enter the result here. This is your minimum fee.	\$ 64,155.35						
Block 2	 DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the inf space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule. No—Leave block 3 below blank and co 	4, you must check						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ 64,155.35						
0	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	\$ 64,155.35						
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	\$ 64,155.35	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. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) 0.00							
	Line 4. FILING FEE							
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 64,880.35	appropriate form for submitting the additional fees.					
	EFT Trace # or TRANSACTION ID #							
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions located in the paper SA3 form and the Excel instructions tab							

ACCOUNTING PERIOD: 2021/2

ACCOUNTING FERM	JU. 2021/2	FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS KANSAS, LLC	SYSTEM ID# 007641
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	stations
	1. Enter the total number of channels on which the cable system carried television broadcast stations	20
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	667
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED : (Identify an individual we can contact about this statement of account.)	
for Further Information	Name Kristin Von Schuch Telephone	(404) 269-0827
	Address 6205B PEACHTREE DUNWOODY ROAD - 21 FLOOR (Number, street, rural route, apartment, or suite number) ATLANTA, GEORIGA 30328 (City, town, state, zip)	
	Email kristin.vonschuch@cox.com Fax (optional) N/A	
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regu I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) 	lations.)
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B;	or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or	
	 (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owned in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all statements of fact contained hereby declare under penalty of law that all state	
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)]	
	X /s/ Sanford Mencher	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compa	
	Typed or printed name: Sanford Mencher	
	Title: SVP, Finance and Accounting (Title of official position held in corporation or partnership)	
	Date: February 16, 2022	
Privacy Act Notice	Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this

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

FORM	SA3F	PAGE9.

GAL NAME OF OWNER OF CABLE SYSTEM: DX COMMUNICATIONS KANSAS, LLC	SYSTEM ID# 007641	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by add lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall not scribers and amounts collected from subscribers receiving secondary transmissions pursuant to sec	the basic t include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form.	ons in the	Concerning Gross Receipt Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary tra made by satellite carriers to satellite dish owners?	nsmissions	
X NO YES. Enter the total here and list the satellite carrier(s) below. \$		
Name Name Mailing Address Mailing Address		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un	iderpayment.	Q
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.		Q
		Interest Assessment
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.		Interest
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	- days	Interest
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment		Interest
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	days days 	Interest
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	days days < 0.00274 	Interest
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	days days < 0.00274 	Interest
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	days days c 0.00274 erest charge) tance please	Interest
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	days days c 0.00274 erest charge) tance please	Interest
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	days days c 0.00274 erest charge) tance please	Interest

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

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 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.

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

 If none of the stations were partially distant, calculate your base rate fee according to the following rates-for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSE 1.064% of gross receipts Each of the second, third, and fourth DSEs 0.701% of gross receipts

The fifth and each additional DSE 0.330% of gross receipts PARTIALLY DISTANT STATIONS-PART 9 OF THE DSE SCHEDULE

· If any of the stations were partially distant:

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

2. Identify the communities/areas represented by each subscriber group.

3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

Distant Stations Carried

DSE

STATION

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:

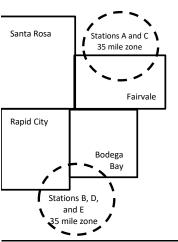
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

CITY

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



A (independent)	1.0		SERVICE AR	REA OF	FROMS	SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B,	, C, D ,E		\$310,000.00
C (part-time)	0.083	Rapid City	Stations A an	d C		100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and	d C		70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D,	, and E		120,000.00
TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
Minimum Fee Total Gross F	Receipts		\$600,000.00			
			x .01064			
			\$6,384.00			
First Subscriber Group		Second Subsci	riber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and	Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs		1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee		\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .0106	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .0070)1 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	-	\$1,907.71	Base rate fee	\$1,604.03

Identification of Subscriber Groups

OUTSIDE LOCAL

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

GROSS RECEIPTS

-

4	LEGAL NAME OF OWNER OF CABLE	SYSTEM:		SYSTEM									
1	COX COMMUNICATIONS KANSAS, LLC												
	SUM OF DSEs OF CATEGORY "O" STATIONS: • Add the DSEs of each station. Enter the sum here and in line 1 of part 5 of this schedule. 1.00												
2 Computation of DSEs for	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- mercial educational station, give the DSE as ".25."												
Category "O"	CATEGORY "O" STATIONS: DSEs												
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
	KSNG-2	1.000											
Add rows as													
necessary.													
Remember to copy													
all formula into new													
rows.													

E.

Name		OWNER OF CABLE SYSTEM:						SYSTEM ID#				
Name	сох сомм	UNICATIONS KANSAS	S, LLC					007641				
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all distan 2: For each station, give th correspond with the inform 3: For each station, give th 4: Divide the figure in colur 4 at least to the third decim 5: For each independent st value as ".25." 3: Multiply the figure in colu point. This is the station's	e number of hou nation given in sp e total number o nn 2 by the figur al point. This is t ation, give the "t umn 4 by the figu	rs your cable system pace J. Calculate only f hours that the statio e in column 3, and giv he "basis of carriage ype-value" as "1.0." F are in column 5, and g	carried the static one DSE for ea n broadcast over ve the result in d value" for the sta or each network	on during the accounting ich station. r the air during the accou ecimals in column 4. Thi ation. or noncommercial educ column 6. Round to no l	unting period. Is figure must ational station, ess than the					
Capacity	CATEGORY LAC STATIONS: COMPUTATION OF DSEs											
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R 3 IRS D BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	= 5. TYPE	-	βE				
			÷			x	=					
			÷ ÷			x x	=					
			÷			x	=					
			÷			x	=					
			÷ ÷			x x						
			÷			x	=					
	Add the DSEs	of each station. Im here and in line 2 of pa		ule,		0.0	0					
4 Computation of DSEs for Substitute- Basis Stations	 Was carried tions in effe Broadcast of space I). Column 2: at your option. Column 3: Column 4: 	re the call sign of each star d by your system in substit ect on October 19, 1976 (a one or more live, nonnetwo For each station give the r This figure should corresp Enter the number of days Divide the figure in column This is the station's DSE (ution for a progra s shown by the li rk programs durin number of live, ni bond with the info in the calendar y n 2 by the figure i For more informa	am that your system v etter "P" in column 7 (g that optional carriag onnetwork programs o ormation in space I. ear: 365, except in a in column 3, and give ation on rounding, see	vas permitted to of space I); and (a shown by th carried in substit leap year. the result in colu page (viii) of the	delete under FCC rules he word "Yes" in column 2 aution for programs that w umn 4. Round to no less e general instructions in	of vere deleted than the third).				
				BASIS STATION	1			<u> </u>				
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBEF OF DAYS IN YEAR		1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE				
		÷		=			÷	=				
		÷		=			÷ ÷	=				
				=			÷	=				
		÷		=			÷	=				
	Add the DSEs	÷ s OF SUBSTITUTE-BASIS of each station. um here and in line 3 of pa	S STATIONS:	=		0.0	0	=				
5		ER OF DSEs: Give the among sapplicable to your system		xes in parts 2, 3, and 4	of this schedule	and add them to provide	the total					
Total Number	1. Number	of DSEs from part 2●				<u> </u>	1.00					
of DSEs	2. Number	of DSEs from part 3●				<u>ا</u>	0.00					
	3. Number	of DSEs from part 4 ●				►	0.00					
	TOTAL NUMBE	R OF DSEs						1.00				

LEGAL NAME OF O	WNER OF CABLE S	YSTEM:					S	YSTEM ID#	Maria			
COX COMMUN	NICATIONS KA	NSAS, LLC	;					007641	Name			
In block A:	ck A must be comp "Yes," leave the rea		rt 6 and part 7	of the DSE schedu	ule blank and o	complete part 6	3, (page 16) of the		6			
schedule.	"No," complete blo	cks B and C h	elow									
	into, complete blot			FELEVISION M	ARKETS				Computation of			
effect on June 24,	1981?	itside of all m	ajor and smalle	ETE THE REMAIN	ed under sect		C rules and regula	tions in	3.75 Fee			
X No—Comp	lete blocks B and (C below.										
		BLOG	JK B: CARH	RIAGE OF PERM	MITTED DSI	ES						
Column 1: CALL SIGN	List the dail signs of distant stations listed in part 2, 0, and 4 of this schedule that your system was permitted to daily under											
Column 2: BASIS OF PERMITTED CARRIAGE	 (Note the FCC rul A Stations carrier 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions for E Carried pursua *F A station previous G Commercial U 	 Inter the appropriate letter indicating the basis on which you carried a permitted station. Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)] Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). Carried pursuant to individual waiver of FCC rules (76.7) A station previously carried on a part-time or substitute basis prior to June 25, 1981 Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)] 										
Column 3:	*(Note: For those this schedule to d	e stations iden letermine the	tified by the le DSE.)	parts 2, 3, and 4 of tter "F" in column 2	, you must cor	nplete the wor		I				
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE				
KSNG-2	м	1.00										
								1.00				
		F		MPUTATION OF	= 3 75 FFF							
		L			5.101 LL							
	total number of [1.00				
Line 2: Enter the	sum of permitted	DSEs from	DIOCK B abov	/e				1.00				
				of DSEs subject t ' of this schedule)		te.		0.00				
Line 4: Enter gro	ss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent			
Line 5: Multiply li	ne 4 by 0.0375 a	nd enter sun	n here						partially permited/ partially nonpermitted			
Line 6: Enter tota	al number of DSE	s from line 3	3				X	-	carriage? If yes, see part 9 instructions.			
Line 7: Multiply li	ne 6 by line 5 and	d enter here	and on line 2	, block 3, space L	_ (page 7)			0.00				

DSE SCHEDULE. PAGE 13.

	WNER OF CABLE		с				S	YSTEM ID# 007641	Name
		BLOC	A: TELEVI	SION MARKET	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
 						••••••			
 						••••••			
 						·····			
					<u> </u>				

ACCOUNTING PERIOD: 2021/2

	-							DS	SE SCHEDI	JLE. PAGE 14.
Name	LEGAL NAME OF OWN								SYS	STEM ID#
Name	COX COMMUN	ICATIONS KANS	AS, LLC							007641
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	utating 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. DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Iule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: 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									
					ED O	N A PART-TIME ANI			0 5	
	1. CALL	2. PRIOR				4. BASIS OF	-	RESENT		
	SIGN	DSE	P	ERIOD		CARRIAGE	l	DSE	L	SE
7	Instructions: Block A	a must be completed								
•	In block A:									
Computation	,	"Yes," complete bloc	,							
of the	If your answer is	"No," leave blocks B	and C blank	and complete p	art 8	of the DSE schedule				
Syndicated			BLOC	K A: MAJOR	TEL	EVISION MARKE	ΞT			
Exclusivity										
Surcharge	 Is any portion of the of 	able system within a	top 100 majo	r television mark	et as	defned by section 76.	.5 of FCC ru	les in effect June	24, 1981	?
	Yes—Complete	blocks B and C .				X No—Proceed to	part 8			
						<u></u>				
			D.O. I	01-1-			(0.0		DOF	
	BLOCK B: C	arriage of VHF/Grad	e B Contour	Stations	$\dashv \vdash$	BLOCK	CC: Compu	Itation of Exempt	DSES	
	Is any station listed in					as any station listed				
	commercial VHF station	1 0	e B contour,	in whole		ity served by the cable		ior to March 31,	1972? (re	efer
	or in part, over the cal	ble system?			to	o former FCC rule 76.	159)			
	Yes—List each st	tation below with its ap	propriate perm	nitted DSE		Yes—List each sta	ation below w	vith its appropriate	permitted	DSE
	X No—Enter zero a	ind proceed to part 8.				X No—Enter zero an	id proceed to	part 8.		
		, <u>, , , , , , , , , , , , , , , , , , </u>		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		1	1	т
	CALL SIGN	DSE (CALL SIGN	DSE		CALL SIGN	DSE	CALL SIGN		DSE
				<mark>.</mark>						
				<mark></mark>						
		<mark></mark>		<mark>.</mark>						
				<u> </u>]			[]			
				 						
				 						
			OTAL DSEs	0.00		,I		TOTAL DSE		0.00
				0.00	11				I	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: SYSTEM ID# COX COMMUNICATIONS KANSAS, LLC 007641	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7) 6,029,638.62	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	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	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) • • \$	
	C. Subtract 1.000 from total permitted DSEs (the figure on	
	line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.	
	A. Enter 0.00599 of gross receipts (the amount in section 1)	
	B. Enter 0.00377 of gross receipts (the amount in section 1)	
	C. Multiply line B by 3.000 and enter here	
	D. Enter 0.00178 of gross receipts (the amount in section 1)	
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
	SECTION 4: SECOND 50 TELEVISION MARKET	-
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?	1
Section 4a	Yes—Complete part 9 of this schedule.	
	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	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	

Name		IE OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
		COX COMMUNICATIONS KANSAS, LLC	007641
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)	
of the Syndicated 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) Syndicated Exclusivity Surcharge.	
8 Computation	6 was o • In blo	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	art
of Bass Bats Ess	-	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo	w
Base Rate Fee	blank. What i	s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		boated within that station's local service area and others were located outside that area. For the definition of a station's "loca	al
	service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did yo	our 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 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)	.62
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	1.00
	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)	.35
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	<u> </u>
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7) Base Rate Fee.	64,155.35
			<u></u>

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Mana
сох	COMMUNICATIONS KANSAS, LLC 007641	Name
0 "	If the figure is postion 2 is more than 4 000, compute your back and for bars and large as then 0 block	
Section 4	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.	•
-	A. Enter 0.01064 of gross receipts	8
	(the amount in section 1)►	
	B. Enter 0.00701 of gross receipts	Computation
	(the amount in section 1) ► \$	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) • \$	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here	
	F. Multiply line D by line E and enter here §	
	G. Add lines A, C, and F. This is your base rate fee.	
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.00	
	Base Rate Fee 5 0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	•
Space		9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this	of
exclusi	on, you must:	Base Rate Fee
	livide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
-	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must	for Partially
	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However,	Distant
if your	cable system is wholly located outside all major television markets, complete block A only.	Stations, and
How to	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	Stations
	to that community.	
	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.)	
Step 3	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	
system	will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
	ting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber	
groups		
	section:	
	y the communities/areas represented by each subscriber group. he 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:		
1) your	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and	
	s 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.	
	ne 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 paper SA3 form.	
	ute 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 your calculations on the form.	

Namo	LEGAL NAME OF OWNER OF CABLE SYSTEM:	STEM
Name	COX COMMUNICATIONS KANSAS, LLC	0076
	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	е
	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 OWNE						S	3YSTEM ID# 007641	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU				D SUBSCRIBER GROU		٩
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								Base Rate Fee
								and
								-
						•		
	•••					***		
	<mark></mark>							
	<mark></mark>		<mark></mark>					
	<mark></mark>							
						••••		
Total DSEs		1	0.00	Total DSEs	ļ	11	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	_
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	•••••••••••••••••••••••••••••••••••••••							
	<mark></mark>		<mark></mark>					
	<mark></mark>		<mark></mark>					
	•••		···			•		
	<mark></mark>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			iber group a	s shown in the boxes a	above.	\$	0.00	

0						COMPUTATION C		
	UP	SUBSCRIBER GROU	SECOND			SUBSCRIBER GRO	FIRST	
0	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
<u></u>	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
)	0.00	+		Total DSEs	0.00	<u></u>		al DSEs
_			and Crown	Gross Receipts Seco	0.00	¢		oss Receipts First (
	0.00	\$	na Group	Gloss Receipts Sect	0.00	<u>\$</u>	Broup	ss receipis riisi (
)	0.00	\$	ond Group	Base Rate Fee Seco	0.00	\$	Group	e Rate Fee First (
	UP	SUBSCRIBER GROU	FOURTH		UP	SUBSCRIBER GRO	THIRD	
0				COMMUNITY/ AREA	0			/MUNITY/ AREA
	DSF	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	ALL SIGN
ı								
·····								
		•			•••• •••••			
)	0.00			Total DSEs	0.00			tal DSEs
0.00		\$	th Group	Gross Receipts Four	0.00	\$	Group	oss Receipts Third
0.00		\$	th Group	Base Rate Fee Four	0.00	\$	Group	se Rate Fee Third

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS KANSAS, LLC	SYSTEM ID# 007641			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSI	VITY SURCHARGE FOR EACH SUBSCRIBER GROUP			
9 Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:				
	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 computation	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			
	THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs			
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for eac in the boxes above. Enter here and in block 4, line 2 of space L (page 7)				

C	Cak Wor	ole ksheet	Total amount of remittance	Number of SAs rec'd	l Initials	
			Date of remittance	Check	FILING FEES	
Cable ID #					Amount Initials	
Examined by	I	Reviewed by	Date examination completed	Allocation number		
Space A Accounting Period						
	January 1 - June 30, 2017 July 1 - December 31, 2017					
	Letter s	sent		□Information received		
		ed		Phone call/Date/Contact		
Space B Owner						
	Letter s	sent		□Information received		
		ed		Phone call/Date/Contact		
Space D Area Served						
	Letter sent		C	Information received		
		ed		Phone call/Date/Contact		
Space E Secondary Transission						
Service Subscribers:	Letter sent					
and Rates				Phone call/Date/Contact		
Space G Primary Transmitters:						
Television	Letter s	sent	Ľ	Information received		
		ed		Phone call/Date/Contact		
Space H Primary Transmitters:						
Radio		ed		Phone call/Date/Contact		

		Space I Substitute Carriage
Letter sent	□Information received	
Accepted	Phone call/Date/Contact	
		Space J Part-time Carriage Log (SA3 only)
☑ Letter sent	□Information received	
Accepted	Phone call/Date/Contact	
		Space K Gross Receipts
Letter sent	□Information received	
Letter sent	Phone call/Date/Contact	
		Space L Copyright Filing and Royalty Fee
Royalty Fee should be	Refund request to fiscal	
Letter sent	Information received	
Accepted	Phoe call/Date/Contact	
		Space M Channels
Letter sent	Information received	
Accepted	Phone call/Date/Contact	
		Space O Certification
Letter sent	□Information received	
Accepted	Phone call/Date/Contact	
		Space P Statement of Gross Receipts
Letter sent	□Information received	
Accepted	Phone call/Date/Contact	
		Space Q Interest Assessment
Letter sent	□Info/add'l fee received	
Accepted	Phone call/Date/Contact	