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

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

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

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	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting Period	2021/2								
B Owner	Instructions: 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 single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	COX COMMUNICATIONS HAMPTON ROADS, LLC								
				01403920212					
				014039 2021/2					
	6205 PEACHTREE DUNWOODY ROAD - 12 FLOOR								
	ATLANTA, GEORIGA 30328								
С	INSTRUCTIONS: In line 1, give any business or trade names used to id								
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address giver	in space B.					
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	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and reli	st on page 1b					
Area Served	with all communities.	07475							
	VIRGINIA BEACH	STATE VA							
First Community	-								
,	Below is a sample for reporting communities if you report multiple cha CITY OR TOWN (SAMPLE)	nnel line-ups in Sp STATE	CH LINE UP	SUB GRP#					
	Alda	MD	A A	1					
Sample	Alliance	MD	В	2					
	Gering	MD	В	3					

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The 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 fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#				
COX COMMUNICATIONS HAMPTON ROADS, LLC			014039				
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses							
below the identified city or town.							
If all communities receive the same complement of television broadcast stations (i.e., on all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each releasingnated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-communi	e column blank. If evant community nity basis, associa	you report any stat with a subscriber g ate each community	rions roup, y with a				
(based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	elow.						
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#				
VIRGINIA BEACH	VA	AA	1	First			
CHESAPEAKE	VA	AA	1	Community			
COAST GUARD	VA	AA	1				
CURRITUCK COUNTY	NC	AA	1				
FORT EUSTIS	VA	AC	4				
FORT MONROE	VA	AC	4	See instructions for			
FORT STORY	VA	AA	1	additional information			
GLOUCESTER COUNTY	VA	AB	3	on alphabetization.			
HAMPTON	VA	AC	4				
JAMES CITY COUNTY	VA	AB	2				
LANGLEY AIR FORCE BASE	VA	AC	4	Add rows as necessary.			
NAVAL BASE	VA	AA	1	Add Tows as flecessary.			
NEWPORT NEWS	VA	AC	4				
NORFOLK	VA	AA	1				
POQUOSON	VA	AC	4				
PORTSMOUTH	VA	AA	1				
WILLIAMSBURG	VA	AB	2				
YORK COUNTY	VA	AB	3				
YORKTOWN NEWS	VA	AC	4				
		-					
			·····				
			·····				
			·····				
	I.	1		1			

1

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 014039

Ε

Name

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

COX COMMUNICATIONS HAMPTON ROADS, LLC

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

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

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

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

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

BL	OCK 1		BLOCK 2		
	NO. OF		NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE SUBSCRIBERS RATE		
Residential:					
 Service to first set 	112,165	\$25-\$50.00			
 Service to additional set(s) 	24	No Cost			
 FM radio (if separate rate) 					
Motel, hotel	2,065	\$25-\$50.00			
Commercial	11,610	\$25-\$50.00			
Converter					
Residential	448,327	\$ 4.00			
Non-residential	55,361	\$ 4.00			
		†			

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLO	CK 1		BLOCK 2
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE
Continuing Services:		Installation: Non-residential		
• Pay cable	\$ 15.99	Motel, hotel		
 Pay cable—add'l channel 	10.00-32.00	Commercial		
 Fire protection 		Pay cable		
Burglar protection		Pay cable-add'l channel		
Installation: Residential		Fire protection		
 First set 	20-100.00	Burglar protection		
Additional set(s)	\$ 25.00	Other services:		
 FM radio (if separate rate) 		Reconnect		
Converter		Disconnect		
		Outlet relocation	\$0-\$50.00	
		Move to new address	20.00-50.00	

FORM SA3E. PAGE 3.					CVCTEM ID#	1		
	LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC 01403					Name		
	,							
PRIMARY TRANSMITTI	ERS: TELEVISIC	N						
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program ba Substitute Basis s basis under specific FC • Do not list the station station was carried • List the station here, basis. For further ir in the paper SA3 fc Column 1: List each each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the	system during the consistence of	he accounting In June 24, 19 4), or 76.63 (red in the next prespect to any attons, or auth G—but do listitute basis. ace I, if the stateming substitute sign. Do not red a station ac streams must per the FCC h	period, except 81, permitting the eferring to 76.6° paragraph. distant stations orizations: t it in space I (the ation was carried cute basis station report origination coording to its over t be reported in or as assigned to 1	(1) stations carried e carriage of certal (e)(2) and (4))]; and carried by your context of both on a substitution, see page (v) on program service er-the-air designation of the television statistics.	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the tute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- h stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television		
educational station, by (for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried the distant state For the retransmiss of a written agreementhe cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	rentering the lecast), "E" (for nese terms, see ation is outside ice area, see pave entered "Ye icion on a partition on a partition of a distant tant at entered into o a primary trans simulcasts, also ree categories e location of ea Canadian statio	etter "N" (for no concommercial page (v) of the the local servage (v) of the es" in column on during the eme basis becar multicast streen or before Jumitter or an action enter "E". If , see page (v) ch station. Fowns, if any, giv	etwork), "N-M" (I I educational), o e general instruct vice area, (i.e. "c general instruct 4, you must con accounting peric ause of lack of a eam that is not s one 30, 2009, be association repre you carried the of the general i r U.S. stations, i e the name of the	for network multic r "E-M" (for noncotions located in the listant"), enter "Ye ions located in the nplete column 5, sod. Indicate by entictivated channel oubject to a royalty tween a cable syssenting the prima channel on any of instructions located ist the community with	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your etering "LAC" if your cable system capacity. expaper because it is the subject eterm or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further ed in the paper SA3 form. et to which the station is licensed by the event which the station is identifed.			
		CHANN	EL LINE-UP	ΔΔ				
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			
WAVY-1	10.1	N	No	(PORTSMOUTH, VA	-		
WAVY-2	10.2	I-M	No		PORTSMOUTH, VA	1		
		 			·	See instructions for additional information		
WAVY-3	10.3	I-M	No		PORTSMOUTH, VA	on alphabetization.		
WGNT-1	27.1	<u> </u>	No		PORTSMOUTH, VA	-		
WGNT-2	27.2	I-M	No		PORTSMOUTH, VA	4		
WGNT-3	27.3	I-M	No		PORTSMOUTH, VA			
WHRO-1	15.1	E	No		HAMPTON-NORFOLK, VA			
WHRO-2	15.2	E-M	No		HAMPTON-NORFOLK, VA			
WHRO-3	15.3	E-M	No		HAMPTON-NORFOLK, VA]		
WHRO-4	15.4	E-M	No		HAMPTON-NORFOLK, VA			
WPXV-1	49.1	ı	No		NORFOLK, VA			
WSKY-1								
WSKY-2	4.2	I-M	No		MANTEO, NC	1		
WSKY-3	MANTEO, NC	+						
WSKY-4	4.4	I-M	No		MANTEO, NC			
WTKR-1	3.1	l N	No	I				
					NORFOLK, VA			
WTKR-2	3.2	I-M	No		NORFOLK, VA NORFOLK, VA			

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located 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 WFTA-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 identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA (2) 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) WTPC-1 21.1 No VIRGINIA BEACH, VA Т WTPC-2 No VIRGINIA BEACH, VA 21.2 I-M WTPC-3 21.3 VIRGINIA BEACH, VA I-M No WTPC-4 I-M No VIRGINIA BEACH, VA 21.4 WTPC-5 21.5 I-M No VIRGINIA BEACH, VA WTVZ-1 33.1 ı No NORFOLK, VA WTVZ-2 33.2 I-M No NORFOLK, VA WTVZ-3 33.3 I-M No NORFOLK, VA WUND-1 2.1 Ε No **EDENTON, NC** WUND-2 2.2 E-M No **EDENTON, NC** WUND-3 2.3 E-M No **EDENTON, NC** WUND-4 2.4 E-M No **EDENTON, NC** WVBT-1 43.1 ı No VIRGINIA BEACH, VA WVBT-2 43.2 I-M No VIRGINIA BEACH, VA WVBT-3 43.3 I-M No VIRGINIA BEACH, VA WVEC-1 HAMPTON, VA 13.1 Ν No WVEC-2 13.2 No HAMPTON, VA I-M

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

HAMPTON, VA

WVEC-3

13.3

I-M

No

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYS	TEM ID#	
COX COMMUN	ICATIONS H	AMPTON I	ROADS, LLC		(014039	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s	system during the	ne accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under in network programs [sections		G
substitute program bas	sis, as explaine	d in the next	paragraph.	. , , , , , , , , , , , , , , , , , , ,	nd (2) certain stations carried on a able system on a substitute prograr	n	Primary Transmitters: Television
basis under specifc F(Do not list the station station was carried	here in space	G—but do lis		e Special Stateme	ent and Program Log)—if the		
,	formation conc	,			ute basis and also on some other the general instructions located		
each multicast stream cast stream as "WETA	associated with	n a station ac	cording to its over	er-the-air designa	s such as HBO, ESPN, etc. Identify ion. For example, report multi- n stream separately; for example		
	se. For example	e, WRC is Ch	-		on for broadcasting over-the-air in may be different from the channel		
Column 3: Indicate educational station, by	in each case wase wase was entering the le	vhether the st tter "N" (for n	etwork), "N-M" (f	or network multica	pendent station, or a noncommerci ast), "I" (for independent), "I-M" mmercial educational multicast).	al	
planation of local servi	ation is outside ice area, see pa	the local sen age (v) of the	/ice area, (i.e. "d general instructi	listant"), enter "Ye ons located in the	s". If not, enter "No". For an ex- paper SA3 form.		
cable system carried to carried the distant state	he distant statio ion on a part-tir	on during the me basis beca	accounting peric	od. Indicate by ent ctivated channel o	tating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject		
of a written agreement the cable system and	t entered into or a primary trans	n or before Ju mitter or an a	ine 30, 2009, be ssociation repres	tween a cable sys senting the primar	tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further		
Column 6: Give the FCC. For Mexican or 0	e location of ea Canadian statio	ch station. Fo	r U.S. stations, I e the name of th	ist the community e community with	d in the paper SA3 form. to which the station is licensed by which the station is identifed.	the	
Note: If you are utilizing	ig munipie chai	• •	EL LINE-UP		спаппетше-ир.		
	o BIOAGT			, ,			
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		
WVEC-4	13.4	I-M	No			0	
		•			<u> </u>		
					 		
					+		
					+		
					+		

LEGAL NAME OF OWNER OF CABLE SYSTEM:

COX COMMUNICATIONS HAMPTON ROADS, LLC

PRIMARY TRANSMITTERS: TELEVISION

SYSTEM ID#
Name

Name

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions 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	AB	
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
WAVY-1	10.1	N	No		PORTSMOUTH, VA
WAVY-2	10.2	I-M	No		PORTSMOUTH, VA
WAVY-3	10.3	I-M	No		PORTSMOUTH, VA
WGNT-1	27.1	I	No		PORTSMOUTH, VA
WGNT-2	27.2	I-M	No		PORTSMOUTH, VA
WGNT-3	27.3	I-M	No		PORTSMOUTH, VA
WHRO-1	15.1	Е	No		HAMPTON-NORFOLK, VA
WHRO-2	15.2	E-M	No		HAMPTON-NORFOLK, VA
WHRO-3	15.3	E-M	No		HAMPTON-NORFOLK, VA
WHRO-4	15.4	E-M	No		HAMPTON-NORFOLK, VA
WPXV-1	49.1	I	No		NORFOLK, VA
WSKY-1	4.1	I	No		MANTEO, NC
WSKY-2	4.2	I-M	No		MANTEO, NC
WSKY-3	4.3	I-M	No		MANTEO, NC
WSKY-4	4.4	I-M	No		MANTEO, NC
WTKR-1	3.1	N	No		NORFOLK, VA
WTKR-2	3.2	I-M	No		NORFOLK, VA
WTKR-3	3.3	I-M	No		NORFOLK, VA

G

Primary Transmitters: Television

ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television

- **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.

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	AB (2)	
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
WTPC-1	21.1	I	No		VIRGINIA BEACH, VA
WTPC-2	21.2	I-M	No		VIRGINIA BEACH, VA
WTPC-3	21.3	I-M	No		VIRGINIA BEACH, VA
WTPC-4	21.4	I-M	No		VIRGINIA BEACH, VA
WTPC-5	21.5	I-M	No		VIRGINIA BEACH, VA
WTVZ-1	33.1	ı	No		NORFOLK, VA
WTVZ-2	33.2	I-M	No		NORFOLK, VA
WTVZ-3	33.3	I-M	No		NORFOLK, VA
WVBT-1	43.1	I	No		VIRGINIA BEACH, VA
WVBT-2	43.2	I-M	No		VIRGINIA BEACH, VA
WVBT-3	43.3	I-M	No		VIRGINIA BEACH, VA
WVEC-1	13.1	N	No		HAMPTON, VA
WVEC-2	13.2	I-M	No		HAMPTON, VA
WVEC-3	13.3	I-M	No		HAMPTON, VA
WVEC-4	13.4	I-M	No		

ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located 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 WFTA-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 identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AC 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) WAVY-1 10.1 No PORTSMOUTH, VA Ν WAVY-2 No PORTSMOUTH, VA 10.2 I-M WAVY-3 10.3 I-M PORTSMOUTH, VA No WGNT-1 27.1 No PORTSMOUTH, VA I WGNT-2 27.2 I-M No PORTSMOUTH, VA WGNT-3 27.3 I-M No PORTSMOUTH, VA WHRO-1 15.1 Ε No HAMPTON-NORFOLK, VA WHRO-2 15.2 E-M No HAMPTON-NORFOLK, VA WHRO-3 15.3 E-M No HAMPTON-NORFOLK, VA WHRO-4 HAMPTON-NORFOLK, VA 15.4 E-M No WPXV-1 49.1 ı No NORFOLK, VA WSKY-1 I MANTEO, NC 4.1 No WSKY-2 4.2 I-M MANTEO, NC No

Form SA3E Long Form (Rev. 05-17) U.S. Copyright Office

MANTEO. NC

MANTEO, NC

NORFOLK, VA

NORFOLK, VA

NORFOLK, VA

WSKY-3

WSKY-4

WTKR-1

WTKR-2

WTKR-3

4.3

4.4

3.1

3.2

3.3

I-M

I-M

Ν

I-M

I-M

No

No

No

No

No

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections

76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

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.

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

		CHANN	EL LINE-UP	AC (2)	
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
WTPC-1	21.1	I	No		VIRGINIA BEACH, VA
WTPC-2	21.2	I-M	No		VIRGINIA BEACH, VA
WTPC-3	21.3	I-M	No		VIRGINIA BEACH, VA
WTPC-4	21.4	I-M	No		VIRGINIA BEACH, VA
WTPC-5	21.5	I-M	No		VIRGINIA BEACH, VA
WTVZ-1	33.1	I	No		NORFOLK, VA
WTVZ-2	33.2	I-M	No		NORFOLK, VA
WTVZ-3	33.3	I-M	No		NORFOLK, VA
WVBT-1	43.1	I	No		VIRGINIA BEACH, VA
WVBT-2	43.2	I-M	No		VIRGINIA BEACH, VA
WVBT-3	43.3	I-M	No		VIRGINIA BEACH, VA
WVEC-1	13.1	N	No		HAMPTON, VA
WVEC-2	13.2	I-M	No		HAMPTON, VA
WVEC-3	13.3	I-M	No		HAMPTON, VA
WVEC-4	13.4	I-M	No		

Primary Transmitters: Television

Form SA3E Long Form (Rev. 05-17) U.S. Copyright Office

ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS, LLC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions 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

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 2021/2

COX COMMUNICATION			S, LLC		S	014039	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG)			_
In General: In space I, ident substitute basis during the acepplanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	Substitute
1. SPECIAL STATEMENT	_				•		Carriage:
During the accounting per	_			s, any nonne	twork television progran	า	Special Statement and
broadcast by a distant stat	ion?				☐Yes	XNo	Program Log
Note: If your answer is "No"	", leave the	rest of this pag	ge blank. If your answer is	'Yes," you mi	ust complete the prograr	n	
log in block 2.	BBOCBA	MC					
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: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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). 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 "5/7." 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." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.							
S	UBSTITUT	E PROGRAM			EN SUBSTITUTE IAGE OCCURRED	7. REASON	
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION	
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ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS, LLC **PART-TIME CARRIAGE LOG** In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates 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 Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give 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 CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN** HOURS HOURS DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM: X COMMUNICATIONS HAMPTON ROADS, LLC		SYSTEM ID# 014039	Name
GRO Inst all a (as i	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount you mounts (gross receipts) paid to your cable system by subscribers for the system's second identifed in space E) during the accounting period. For a further explanation of how to core (vii) of the general instructions.	dary transmissi	ne total of on service	K Gross Receipts
	Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ (Amount	57,425,230.38 of gross receipts)	
• Con • Con • If yo fee to	TRIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. It is system did not carry any distant television stations, leave block 3 blank. Enter the amount of the lock 1 on line 1 of block 4, and calculate the total royalty fee. It is system did carry any distant television stations, you must complete the applicable participal property of the lock 1, and attach the schedule to your statement of account. It is or part 9, block A, of the DSE schedule was completed, the base rate fee should be earlied.	s of the DSE So	chedule	Copyright Royalty Fee
	rk 3 below. art 6 of the DSE schedule was completed, the amount from line 7 of block C should be en	tered on line 2	in block	
▶ If pa	elow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	d be entered on	line	
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee i system's gross receipts for the accounting period.			
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$	57,425,230.38	
	Enter the result here. This is your minimum fee.	\$	611,004.45	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Y Yes—Complete the DSE schedule. No—Leave block 3 below blank and control of the co	4, you must ch	eck	
Block	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	\$		
3	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	\$	611,004.45	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		0.00	submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00_	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	\$	725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	611,729.45	appropriate form for submitting the
	EFT Trace # or TRANSACTION ID #			additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (So general instructions located in the paper SA3 form and the Excel instructions tal	,		

ACCOUNTING PERIOD: 2021/2

	T	FURM SA3E, PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC	SYSTEM ID# 014039
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
Channels	Enter the total number of channels on which the cable system carried television broadcast stations	37
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	718
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
Be Contacted 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	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regu	ulations.)
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B	; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s in line 1 of space B and that the owner is not a corporation or partnership; or	ystem as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	er of the cable system
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained 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)]	herein
	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 compared.	
	Typed or printed name: Sanford Mencher	
	Title: SVP, Finance and Accounting (Title of official position held in corporation or partnership)	
1	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. 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.

LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC	SYSTEM ID# 014039	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 adding lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the service of providing secondary transmissions of primary broadcast transmitters, the system shall not in scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section	basic clude sub-	P Special Statement Concerning
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below		Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or under For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	rpayment.	Q
Line 1 Enter the amount of late payment or underpayment	- days	Interest Assessment
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	- 00274 - st charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistant contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filling this worksheet covering a statement of account already submitted to the Copyright Office please list below the owner, address, first community served, accounting period, and ID number as given in the filling. Owner Address	ce please	
First community served Accounting period ID number		

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The 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 fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2021/2

DSE SCHEDULE. PAGE 10.

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, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station that it was authorized to carry or was lawfully carrying prior to March 31, 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate, but is subject to the Base Rate, and where applicable, the Syndicated Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or
 part-time basis only and complete the log to determine the portion of
 the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE—PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100
 major television market as defined by the FCC rules and regulations in
 effect on June 24, 1981. If no portion of the cable system is located in
 a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24, 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

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

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

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.

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

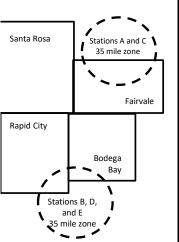
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

In most cases 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.



Distant Stations Carried		Identification	of Subscriber Groups		
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
n	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6,384.00

		φ0,304.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

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

ACCOUNTING PERIOD: 2021/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

DSE SCHEDULE. PAGI	l ·	5 0) (OT514				SYSTEM ID#							
1	LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC												
						014039							
	SUM OF DSEs OF CATEGOR		IS:										
	Add the DSEs of each station				2.00								
	Enter the sum here and in line		0.00										
2	Instructions:												
2	In the column headed "Call S	Sign": list the cal	I signs of all distant stations	identified by the I	etter "O" in column 5								
Computation	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"	iner eran eranemental eranem, gr		CATEGORY "O" STATIO	NS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
				 		····							
						•••••••••••••							
						····							
Add rows as				<mark></mark> -		<u></u>							
necessary.				 									
Remember to copy all				<mark> </mark> .									
formula into new		<u></u>		<mark></mark>									
rows.													
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Nome	LEGAL NAME OF C	OWNER OF CABLE SYSTEM:						302 301.22	SYSTEM ID#
Name	COX COMM	UNICATIONS HAMPT	ON ROADS,	LLC					014039
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	st the call sign of all distar At For each station, give the correspond with the inform At For each station, give the Divide the figure in colur at least to the third decimer For each independent states.	e number of he nation given in e total number nn 2 by the fig al point. This is ation, give the umn 4 by the fig	ours your cable system space J. Calculate only of hours that the static ure in column 3, and g s the "basis of carriage" "type-value" as "1.0." gure in column 5, and	carried the static y one DSE for each on broadcast over tive the result in do a value" for the sta- For each network	on during the act station. If the air during lecimals in column action. To recommend to recommend to the column for the colu	the account umn 4. This ercial educat und to no les	ting period. figure must ional station, s than the	
Capacity		C	ATEGORY	LAC STATIONS:	COMPUTAT	ION OF DS	Es		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	RS D BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	=	5. TYPE VALUE	6. DS	SE
			÷	:	=	x		=	
			÷			x x		=	
			÷		=	x		=	
			÷		=	x		=	
			÷ ÷			x x		=	
			÷			x		=	
	Add the DSEs	s OF CATEGORY LAC ST of each station. Im here and in line 2 of pa		edule,			0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efferations in efferations in efferations are space I). Column 2: at your option. Column 3: Column 4:	the the call sign of each start by your system in substituted on October 19, 1976 (as one or more live, nonnetworthis figure should corresponded to the number of days Divide the figure in column This is the station's DSE (ution for a prog s shown by the rk programs du number of live, sond with the ir in the calendar a 2 by the figur For more infor	gram that your system a letter "P" in column 7 ring that optional carria nonnetwork programs information in space I. It year: 365, except in a e in column 3, and given attion on rounding, se	was permitted to of space I); and ge (as shown by t carried in substitute leap year. The the result in column is the page (viii) of the page (viii	delete under lene word "Yes" in tution for programm 4. Round be general inst	FCC rules ar n column 2 of rams that we to no less the ructions in the	re deleted	n).
		SU	BSTITUTE-	BASIS STATION	IS: COMPUTA	ATION OF I	DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	S	1. CALL SIGN	2. NUM OF PRO	BER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		<u>+</u>		=			÷		=
		÷		=			÷		=
		÷		=			÷		=
		÷		=			÷		=
	Add the DSEs	S OF SUBSTITUTE-BASIS of each station. Im here and in line 3 of pa		edule,			0.00		
5 Total Number of DSEs	number of DSE 1. Number 2. Number	ER OF DSEs: Give the amos applicable to your system of DSEs from part 2 • of DSEs from part 3 • of DSEs from part 4 •		poxes in parts 2, 3, and	4 of this schedule	and add them	to provide th	0.00 0.00 0.00	0.00

	NICATIONS HA		OADS, LLC				S	YSTEM ID# 014039	Name
In block A: • If your answer if "	ck A must be compl		rt 6 and part 7	of the DSE schedul	le blank and c	complete part 8	, (page 16) of the		6
schedule. If your answer if "	'No," complete bloc	ks B and C b	elow.						
			BLOCK A:	TELEVISION MA	ARKETS				Computation 3.75 Fee
on June 24, 1981?			•				C rules and regulati	ions in effect	3.75 Fee
	plete part 8 of the s		NOT COMPL	ETE THE REMAIN	IDER OF PAF	RT 6 AND 7.			
X No—Comp	lete blocks B and 0	C below.							
		BLO	CK B: CARF	NAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and reg	gulations prio e DSE Sched	r to June 25, 1 ule. (Note: The	part 2, 3, and 4 of the 981. For further experience letter M below refer act of 2010.)	olanation of pe	ermitted station	s, see the	j	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rul A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions for E Carried pursua *F A station prev	les and regula de pursuant to on as defined al educational station (76.6 r DSE schedu int to individua viously carried HF station wi	ations cited belothe FCC markin 76.5(kk) (76 station [76.59 5) (see paragralle). al waiver of FC don a part-time thin grade-B co	e or substitute basis ontour, [76.59(d)(5),	in effect on J 57, 76.59(b), 7 (1), 76.63(a) re (a) referring to titution of gran	une 24, 1981.) 76.61(b)(c), 76 eferring to 76.6 o 76.61(d)] adfathered stat	.63(a) referring to .1(e)(1)		
Column 3:		stations iden	tified by the let	oarts 2, 3, and 4 of ter "F" in column 2,			ksheet on page 14	of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
	•		•	•		•	•	0.00	
		F	BLOCK C: CC	MPUTATION OF	3 75 FFF			0.00	
ine 1: Enter the	total number of				2 0 . LL			-	
me ∠. Enter the	sum of permitted	n D3E8 11011	I DIOCK D SDC	v C				<u> </u>	
	line 2 from line 1 eave lines 4–7 bl			•		ate.		0.00	
ine 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the
ine 5: Multiply li	ine 4 by 0.0375 a	ınd enter su	m here						partially permited/ partially
ine 6: Enter tota	al number of DSE	Es from line	3				x		nonpermitte carriage? If yes, see pa 9 instruction
		d autar bara	and an line	2, block 3, space	I (naga 7)			0.00	a maducuon

	OWNER OF CABLE S		DADS, LLC				S'	7STEM ID# 014039	
		BLOCK	A: TELEVIS	SION MARKETS	(CONTIN	UED)			_
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
CICIV	Breio		OIOIV	Brole		SIGIV	Brole		Computation of 3.75 Fee
			<u> </u>	<u> </u>		<u> </u>	<u> </u>		

ACCOUNTING PERIOD: 2021/2

DSE SCHEDULE. PAGE 14.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name COX COMMUNICATIONS HAMPTON ROADS, LLC 014039 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Computating 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. the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? X Yes—Complete blocks B and C. No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Was any station listed in block B of part 7 carried in any commu-Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC	SYSTEM ID# 014039	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	57,425,230.38	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defned by the FCC? X Yes—Complete section 3 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? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS	BE	
	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?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS 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)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name		ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#									
	(COX COMMUNICATIONS HAMPTON ROADS, LLC	014039									
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	ed 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	<u></u>									
	Instruc	ntions.										
8	You m	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of pa	art									
		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.										
Computation	• If you	r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.										
of Base Rate Fee	 If you blank 	rr answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo)W									
Dase Nate i ee		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	ıl									
	service	e area," see page (v) of the general instructions.										
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS										
	• Did ye	our cable system retransmit the signals of any partially distant television stations during the accounting period?										
		X Yes—Complete part 9 of this schedule. No—Complete the following sections.										
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE										
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _\$										
	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.)										
	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) ▶											
		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)										
		Base Rate Fee	0.00									

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2021/2

	AME OF OWNER OF CABLE SYSTEM: COMMUNICATIONS HAMPTON ROADS, LLC	SYSTEM ID# 014039	Name			
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.					
4	A. Enter 0.01064 of gross receipts (the amount in section 1) * **State** **State**		8			
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$		Computation of			
	C. Multiply line B by 3.000 and enter here		Base Rate Fee			
	D. Enter 0.00330 of gross receipts (the amount in section 1) * **Tender of the image is a content of the image is a cont					
	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				
instead			9			
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in Space G. In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this exclusion, you must: First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only. How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community. Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station is calculated to that station (and, by the same token, the station is distant to the subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will hav						
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general paper SA3 form.	instructions				
• Comp page.		nat is, the total				

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS, LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC 014039							Name	
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRIE	BER GROUP		
	FIRST	SUBSCRIBER GROU	Р	SECOND SUBSCRIBER GROUP)	•
COMMUNITY/ AREA CHANNEL LINE-UP "AA" SUB 1			COMMUNITY/ AREA	CHANNE	NEL LINE-UP "AB" SUB 2		9 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
								
	··[<u>-</u>	
							···	
Total DSEs	<u> </u>	Ц	0.00	Total DSEs	!	<u> </u>	0.00	
Gross Receipts First Gr	oup	\$ 36,678	,224.95	Gross Receipts Second				
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	P		FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA CHANNEL LINE-UP "AB" SUB 3				COMMUNITY/ AREA	OMMUNITY/ AREA CHANNEL LINE-UP "AC" SUB 4			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			.					
			.					
			<u> </u>		<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
			Cross Bossints Fourth	Craun	<u> </u>	24 420 90		
Gross Receipts Third G	roup	\$ 4,0/1	,112.10	Gross Receipts Fourth	Group	\$ 10,08	31,430.80	
Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00		
				Ш				
			ber group a	s shown in the boxes abo	ove.			
Enter here and in block	ა, line 1, sį	pace L (page 7)				\$	0.00	

LEGAL NAME OF OWNE			S, LLC			•	014039	Name
	BLOCK A:	COMPUTATION (OF BASE RA	TE FEES FOR EACH				
		SUBSCRIBER GRO				SUBSCRIBER GROU		0
COMMUNITY/ AREA CHANNEL LINE-UP "AA" SUB 1			COMMUNITY/ AREA	CHANN	EL LINE-UP "AB"	SUB 2	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fo
						<u> </u>		and
	<u></u>							Syndicated
								Exclusivity
								Surcharge
								for
		H						Partially
	<u> </u>				-			Distant
							·····	Stations
	<mark> </mark>				-			
	 				-	-		
	-	-			-	H		
					-			
Total DSEs		Ш	0.00	Total DSEs		11	0.00	
Gross Receipts First G	roup	\$ 36,67	8,224.95		Gross Receipts Second Group \$ 5,993,801.93			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GRO)UP		FOURTH	SUBSCRIBER GRO	JP	
COMMUNITY/ AREA	IEL LINE-UP "A	3" SUB 3	COMMUNITY/ AREA	CHANN	EL LINE-UP "AC"			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>				-			
					-			
								
	<mark> </mark>				<u> </u>			
	<mark> </mark>				<u>_</u>			
		-			-	+		
	···					-		
Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 4,671,772.70			Gross Receipts Fourth	Group	<u>\$ 10,0</u>	081,430.80		
Base Rate Fee Third Group \$ 0.00		Base Rate Fee Fourth Group \$ 0.00		0.00				
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes ab	ove.	\$	0.00	

ACCOUNTING PERIOD: 2021/2

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM SYSTEM ID# Name COX COMMUNICATIONS HAMPTON ROADS, LLC 014039 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: Computation First 50 major television market Second 50 major television market of Base Rate Fee 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 and Syndicated this schedule. Exclusivity 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 Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. for 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 Partially Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

Radio

 \square Accepted

C	Cable Worksheet		Total amount of remittance	Nu	mber of SAs rec'd	Initials			
			Date of remittance	 □Check	□EFT	□FILING	G FEES		
Cable ID #						Amount	Initials		
Examined by		Reviewed by	Date examination completed	Allocati	on number				
Space A Accounting Period					<u> </u>				
	□Janua	ry 1 - June 30, 2017	[□July 1 - Decem	ber 31, 2017				
	□Letter	sent	☐ Information received						
	□Accep	ted]	□Phone call/Dat	e/Contact				
Space B Owner									
	Letter	sent	☐Information received						
	□Accep	ted	[☐Phone call/Dat	e/Contact				
Space D Area Served									
	Letter	sent]	☐Information re	ceived				
	□Accep	ted]	☐Phone call/Dat	e/Contact				
Space E Secondary Transission									
Service Subscribers:	Letter	sent]	☐Information received					
and Rates	□Accep	ted]	Phone call/Dat	e/Contact				
Space G Primary Transmitters:									
Television	□Letter	sent	☐Information received						
	□Accep	ted	☐Phone call/Date/Contact						
Space H Primary Transmitters:									

☐Phone call/Date/Contact

		Space I Substitute Carriage
Letter sent	☐ Information received	
□Accepted	☐Phone call/Date/Contact	
		Space J Part-time Carriage Log
☑Letter sent	☐ Information received	(SA3 only)
□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
☐Royalty Fee should be	Refund request to fiscal	Fees
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	