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				
	\$			
	ALLOCATION NUMBER			
8/23/2022				

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	2022/1					
Period						
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					
	COXCOM, LLC					
				00799020221		
				007990 2022/1		
	6205 PEACHTREE DUNWOODY ROAD - 12 FLOOR					
	ATLANTA, GEORIGA 30328					
С	INSTRUCTIONS: In line 1, give any business or trade names used to					
C	names already appear in space B. In line 2, give the mailing address	of the system, if o	lifferent from the address g	iven 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. Identif	fy only the frst co	mmunity served below and	relist on page 1b		
Area	with all communities.	.,,	a.my corred zorom ama	ronot on page 12		
Served	CITY OR TOWN	STATE				
First	TULSA OK					
Community	Below is a sample for reporting communities if you report multiple channel line-ups in Space G.					
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#		
Sample	Alda	MD	Α	1		
	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#					
COXCOM, LLC			007990		
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as define in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporate areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first community that you list will serve as a forn of system identification hereafter known as the "first community." Please use it as the first community on all future filings					
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hobelow the identified city or town	me parks should	be reported in pa	renthese:		
If all communities receive the same complement of television broadcast stations (i.e., all communities with the channel line-up "A" in the appropriate column below or leave on a partially distant or partially permitted basis in the DSE Schedule, associate each designated by a number (based on your reporting from Part 9)	the column blank	. If you report any	station		
When reporting the carriage of television broadcast stations on a community-by-comm channel line-up designated by an alpha-letter(s) (based on your Space G reporting) are (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	nd a subscriber g				
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#		
TULSA BIXBY	OK OK			First	
BROKEN ARROW	OK OK			Community	
CATOOSA	OK				
CLAREMORE	OK				
COWETA	OK			Continue tions for	
CREEK COUNTY	OK			See instructions for additional information	
GLEENPOOL	OK			on alphabetization.	
JENKS	OK				
KIEFER	OK				
OSAGE COUNTY	OK				
OWASSO	OK			Add rows as necessary.	
ROGERS COUNTY	•				
	OK				
SAND SPRINGS	OK				
SAPULPA	OK				
TULSA COUNTY	OK				
WAGONER COUNTY	OK				
	ļ.	ļ.	!	L	

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

COXCOM, LLC

SYSTEM ID# 007990

### Ε

### Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

**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		BLOC	K 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
Service to first set	36,087	\$25-\$50.00			
<ul> <li>Service to additional set(s)</li> </ul>	2	No Cost			
• FM radio (if separate rate)					
Motel, hotel	339	\$25-\$50.00			
Commercial	3,835	\$25-\$50.00			
Converter					
Residential	173,871	\$ 6.00			
Non-residential	24,274	\$ 6.00			

## 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.

		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			
<ul> <li>Pay cable—add'l channel</li> </ul>	10.00-32.00	Commercial			
Fire protection		• Pay cable			
<ul><li>Burglar protection</li></ul>		Pay cable-add'l channel			
Installation: Residential		Fire protection			
<ul> <li>First set</li> </ul>	20-100.00	Burglar protection			
<ul><li>Additional set(s)</li></ul>	\$ 25.00	Other services:			
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect			
Converter		Disconnect			
		Outlet relocation	\$0-\$50.00		
		Move to new address	20.00-50.00		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007990 COXCOM. 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 th∉ station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example 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 channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast). "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CARRIAGE SIGN **CHANNEL** OF (Yes or No) STATION NUMBER (If Distant) KDOR-1 17.1 I No BARTLESVILLE, OK KGEB-1 53.1 No TULSA, OK ı See instructions for additional information KJRH-1 Ν No 2.1 TULSA, OK on alphabetization. KJRH-3 2.3 I-M No **TULSA, OK** KJRH-4 2.4 I-M No **TULSA, OK** KMYT-1 41.1 I No TULSA, OK KMYT-2 TULSA, OK 41.2 I-M No KMYT-3 41.3 I-M No TULSA, OK KMYT-4 41.4 I-M No **TULSA, OK** Ε No KOED-1 11.1 TULSA, OK KOED-2 11.2 E-M No TULSA, OK 11.3 TULSA, OK KOED-3 E-M No KOED-4 11.4 E-M No TULSA, OK KOKI-1 23.1 No TULSA, OK ı KOKI-2 23.2 I-M No TULSA, OK KOKI-3 23.3 I-M No TULSA, OK KOTV-1 6.1 Ν No TULSA, OK KOTV-3 6.3 I-M No TULSA, OK

**Primary** 

Transmitters:

Television

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007990 COXCOM. 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 th∉ station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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

		CHANN	EL LINE-UP	AA (2)	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KQCW-1	19.1	I	No		MUSKOGEE, OK
KRSU-1	35.1	Е	No		CLAREMORE, OK
KRSU-2	35.2	E-M	No		CLAREMORE, OK
KTPX-1	44.1	I	No		OKMULGEE, OK
KTUL-1	8.1	N	No		TULSA, OK
KTUL-2	8.2	I-M	No		TULSA, OK
KTUL-3	8.3	I-M	No		TULSA, OK
KTUL-4	8.4	I-M	No		TULSA, OK
KUTU-CD-1	25.1	I	No		Tulsa, OK
KUTU-CD-2	25.2	I-M	No		Tulsa, OK
KWHB-1	47.1	I	No		TULSA, OK
KXAP-LD-1	14.1	I	No		Tulsa, OK

ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name COXCOM, LLC 007990 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** 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

LEGAL NAME OF OWNER OF CABLE SYS	TEM:			s	YSTEM ID# 007990	Name
SUBSTITUTE CARRIAGE: SPECI In General: In space I, identify every no substitute basis during the accounting pexplanation of the programming that me form.	onnetwork televi period, under spe	sion program broadcast by ecific present and former F0	a distant stati CC rules, regu	lations, or authorizations.	For a further	<b> </b> Substitute
SPECIAL STATEMENT CONCE     During the accounting period, did you broadcast by a distant station?  Note: If your answer is "No", leave the log in block 2.	ur cable systen	າ carry, on a substitute bas		Yes	ΧNο	Carriage: Special Statement and Program Log
2. LOG OF SUBSTITUTE PROGR In General: List each substitute progrelar. If you need more space, please Column 1: Give the title of every neriod, was broadcast by a distant stander certain FCC rules, regulations, SA3 form for futher information. Do ritiles, for example, "I Love Lucy" or "Neolumn 2: If the program was broadcast staft the case of Mexican or Canadian staft Column 5: Give the broadcast staft the case of Mexican or Canadian staft Column 5: Give the month and dafirst. Example: for May 7 give "5/7."  Column 6: State the times when the tothe nearest five minutes. Example: stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the delete under FCC rules and regular gram was substituted for programmine effect on October 19, 1976.	am on a separa attach addition onnetwork televition and that your authorization of use general BA Basketball: ideast live, enterstation broadcation's location (tions, if any, the your system a program carrel listed program carrel listed program tions in effect distance attachment of the second s	al pages. vision program (substitute pour cable system substitute pour cable system substitute as. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." er "Yes." Otherwise enter "leasting the substitute programe to community to which the community with which the stem carried the substitute or gram was carried by your field by a system from 6:01 in was substituted for programing the accounting period	orogram) that ed for the pro neral instructi r "basketball"  No." am. e station is lic station is ide program. Us cable system 15 p.m. to 6: amming that d; enter the le	t, during the accounting gramming of another statements located in the paper. List specific program ensed by the FCC or, in entified). e numerals, with the mon. List the times accurate 28:30 p.m. should be your system was require etter "P" if the listed pro	nth ely	
SUBSTITU	TE PROGRAM	1	1 1	EN SUBSTITUTE IAGE OCCURRED	7. REASON FOR	
1. TITLE OF PROGRAM 2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION	
	-					
				_		

ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007990 COXCOM. 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 parttime 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 FROM DATE TO DATE FROM TO

	AL NAME OF OWNER OF CABLE SYSTEM:  XCOM, LLC	SYSTEM ID# 007990	Name
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 secondary identifed in space E) during the accounting period. For a further explanation of how to compute (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s)	ry transmission service	K Gross Receipts
IMP	during the accounting period.  ORTANT: You must complete a statement in space P concerning gross receipts.	\$ 25,534,735.51 (Amount of gross receipts)	
• Com • Com • If you fee to accompany the second se	<b>TRIGHT ROYALTY FEE ctions:</b> 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.  bur system did not carry any distant television stations, leave block 3 blank. Enter the amount from block 1 on line 1 of block 4, and calculate the total royalty fee.  bur system did carry any distant television stations, you must complete the applicable parts of companying this form and attach the schedule to your statement of account.	f the DSE Schedule	L Copyright Royalty Fee
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered below.		
3 be	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered blow.		
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should be block 4 below.	e entered on line	
Block 1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more are least the minimum fee, regardless of whether they carried any distant stations. This fee is 1 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	\$ 25,534,735.51	
	Enter the result here. This is your minimum fee.	\$ 271,689.59	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the infor space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4, "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  Yes—Complete the DSE schedule.	you must check	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ -	
3	Line 2. <b>3.75 Fee:</b> 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	\$ 271,689.59	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
	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	\$ 272,414.59	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. (See pageneral instructions located in the paper SA3 form and the Excel instructions tab for		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
Name	COXCOM, LLC	007990					
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.						
Chameis	Enter the total number of channels on which the cable     system carried television broadcast stations	30					
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services	426					
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 John Tonellato Telephone	(504) 358-6422					
	Address 6205B PEACHTREE DUNWOODY ROAD - 21 FLOOR (Number, street, rural route, apartment, or suite number)						
	ATLANTA, GEORIGA 30328 (City, town, state, zip)						
	Email John.Tonellato@cox.com Fax (optional) N/A	104104104101101010101010101010101010101					
•	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office reg	ulations.)					
O 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 in line 1 of space B and that the owner is not a corporation or partnership; or	system as identified					
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as ow in line 1 of space B.	vner of the cable system					
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contains 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)]	ed herein					
	/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 button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus com						
	Typed or printed name: Sanford Mencher						
	Title: SVP, Finance and Accounting  (Title of official position held in corporation or partnership)						
	Date: August 10, 2022						

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephon numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in t completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of lav

LEGAL NAME OF OWNER OF CABLE SYSTEM:  COXCOM, LLC	007990	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 the following sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119.	sub-	P Special Statement Concerning
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissio made 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  Name Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment for an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	ent.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	- /4	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	-	
(interest chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance ple 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 filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	nal	
Owner Address		
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 the form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical value given by the Copyright Act to each distant television station carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

#### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

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

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

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

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

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

1.064% of gross receipts

0.330% of gross receipts

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
  - 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

- 5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

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

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

#### **EXAMPLE:**

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

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.

Santa Rosa	Stations A and C 35 mile zone Fairvale
<b>\</b> an	Bodega Bay ns B, D, d E le zone

Distant Stations Carri	ed	Identification	of Subscriber Groups	_
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
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

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)

JSE SCHEDULE. PAG	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			SY	STEM ID#
1	COXCOM, LLC					007990
	SUM OF DSEs OF CATEGOR		S:			
	Add the DSEs of each station.  Enter the sum here and in line in the sum here.		achadula		0.00	
	Enter the sum here and in line	i oi part 5 oi triis	scriedule.		0.00	
2	Instructions: In the column headed "Call S	ian": list the call	signs of all distant stations	identified by th	e letter "O" in column 5	
-	of space G (page 3).					
Computation of DSEs for	In the column headed "DSE":	for each indepe	endent station, give the DSE	as "1.0"; for e	ach network or noncom-	
Category "O"	mercial educational station, give	e the DSE as .2	o. CATEGORY "O" STATION	S: DSFs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
						0
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Add rows as						
necessary.						
Remember to copy						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
all formula into new						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
rows.						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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Name	COXCOM, LI	DWNER OF CABLE SYSTEM:					\$	8YSTEM ID# 007990
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 distart: For each station, give the correspond with the inform in For each station, give the Divide the figure in coluptate at least to the third decine For each independent sevalue as ".25."	ne number of hours yn nation given in space ne total number of ho mn 2 by the figure in nal point. This is the tation, give the "type umn 4 by the figure	your cable system of J. Calculate onlours that the station column 3, and ging "basis of carriage" to as "1.0." If the column 5, and ging column 5.	carried the station of the station o	on during the accounting the station the air during the accounted to a column 4. This stion.  The air during the accounted to account the air during the accounted to account the accounted to a column 6. Round to no less that accounted the accounted to a column 6. Round to no less that accounted the accounted to a column 6. Round to no less that accounted the accounted to a column 6. Round to no less that accounted the accounted to a column 6. Round to no less that accounted the accoun	nting period. figure must tional station, ss than the	
Capacity		C	CATEGORY LAC	STATIONS:	COMPUTATIO	ON OF DSEs		
	1. CALL SIGN	OF HOU CARRIE	JRS OI	F HOURS FATION	4. BASIS OF CARRIAGE VALUE	5. TYPE VALUE	-	E
			÷			x	=	
			÷	=		X	=	
							_	
			······	=		X	=	***************************************
			÷ ÷	=		x x	=	
	Add the DSEs	of each station.		,		0.00		
Computation of DSEs for Substitute-Basis Stations	Column 1: Giv  Was carried tions in effe  Broadcast c space I). Column 2: at your option. Column 3: Column 4:	I by your system in substited on October 19, 1976 (at one or more live, nonnetwoner each station give the This figure should correst Enter the number of days Divide the figure in colum	tution for a program as shown by the lette rk programs during the number of live, nonn pond with the inform in the calendar year n 2 by the figure in c	that your system or "P" in column 7 hat optional carrial etwork programs lation in space I or 365, except in a column 3, and give	was permitted to of space I); and ge (as shown by the carried in substitute leap year.	delete under FCC rules a e word "Yes" in column 2 o ution for programs that wo	of ere deletec than the thirc	n)
		SU	BSTITUTE-BAS	SIS STATIONS	S: COMPUTAT	TION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		······································				÷		
				=		÷		=
				=		÷		=
		-	-	=		÷		=
	Add the DSEs	of each station.		,		0.00		
5	third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.  CATEGORY LAC STATIONS: COMPUTATION OF DSES  1. CALL 2. NUMBER OF HOURS OF HOURS OF HOURS CARRIAGE VALUE STATION ON AIR  SIGN OF HOURS OF ARRIED BY STATION ON AIR  *****  ****  ****  ****  ***  ***							
Total Number	Column 8. Wildly the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the foliation of Column 8. Wildly the figure in column 5 and give the result in column 6. Round to no less than the find decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.    CATEGORY LAC STATIONS: COMPUTATION OF DSES							
of DSEs		·						
	3. Number o	f DSEs from part 4 ●			<b>&gt;</b>		0.00	
	TOTAL NUMBE	R OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/1

COXCOM, LLC	OWNER OF CABLES	SYSTEM:					S	YSTEM ID# 007990	Name
In block A:	ck A must be comp		art 6 and part :	7 of the DSE sched	dule blank and	complete part	t 8, (page 16) of th	e	6
If your answer if	"No," complete blo			FEL EVICIONI M	ADVETO				Computation o
s the cable system	m located wholly or			TELEVISION MA		ction 76.5 of E	CC rules and requi	lations in	3.75 Fee
effect on June 24, Yes—Com	,	schedule—D	•						
		BI OC	CK B: CARE	RIAGE OF PERM	MITTED DS	iFs			
Column 1: CALL SIGN	under FCC rules	of distant sta and regulatio e DSE Scheo	ations listed in ns prior to Jur dule. (Note: Th	part 2, 3, and 4 of the 25, 1981. For fur the letter M below re	this schedule	that your syste	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station pre-	les and reguled pursuant to on as defined al educationa I station (76.6 r DSE schedu ant to individu viously carrie HF station wi	ations cited be to the FCC man in 76.5(kk) (7 I station [76.58] (see paragule). The paragule on a part-timithin grade-B controlled by the paragular of the paragular in the paragular in the paragular in grade-B controlled by the paragular in the paragular in grade-B controlled by the paragular in the paragular in grade-B controlled by the paragular in the paragu	6.59(d)(1), 76.61(e 9(c), 76.61(d), 76.6 raph regarding sub CC rules (76.7) se or substitute bas ontour, [76.59(d)(5	se in effect on 5.57, 76.59(b), (1), 76.63(a) (3(a) referring estitution of gradies prior to Jun	June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered state	6.63(a) referring to		
Column 3:	*( <b>Note:</b> For those this schedule to c	e stations ider letermine the	ntified by the le	parts 2, 3, and 4 o	2, you must co	omplete the wo	т	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	
		В	LOCK C: CC	MPUTATION OF	F 3.75 FEE				
ine 1: Enter the	e total number of	DSEs from ן	oart 5 of this	schedule			11	-	
ine 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve			11-		
	line 2 from line 1 leave 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 DSEs represen partially
ine 5: Multiply I	ine 4 by 0.0375 a	and enter su	m here				<u>, x</u>		permited/ pertially nonpermitted
_ine 6: Enter tota	al number of DSE	Es from line	3						carriage? If yes, see part 9 instructions.
_ine 7: Multiplv I	ine 6 by line 5 an	d enter here	e and on line	2, block 3, space	e L (page 7)			0.00	

EGAL NAME OF COXCOM, LL			LEGAL NAME OF OWNER OF CABLE SYSTEM:  COXCOM, LLC  007990												
	·	BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)									
1. CALL SIGN	2. PERMITTED BASIS		T1	2. PERMITTED BASIS			2. PERMITTED BASIS	3. DSE	6						
***************************************									Computation 3.75 Fee						
									3.75 Fee						
***************************************															
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ACCOUNTING PERIOD: 2022/1

DSE SCHEDULE. PAGE 14.

Name	LEGAL NAME OF OWN	IER OF CABLE	SYSTEM:							YSTEM ID#
Name	COXCOM, LLC									007990
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You stations carried pric Column 1: List the c Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the FC A—Part-time specific price of the column 5: Indicate Column 5: Indicate Column 6: Compare in block	ge.) DSE schedule. 1978 and June l). etters: FCC rules, sect eferring to n, see page (vi) of this schedule. e. This figure sho	30, 198 ions of the	1. entered						
		PERMIT	TED DSE FOR	STATIONS CARR	IED (	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS		
	1. CALL	2. PRIC		ACCOUNTING		4. BASIS OF	-	RESENT DSE	6. P	ERMITTED
l	SIGN	DSE		PERIOD		CARRIAGE		DSE		DSE
<b>7</b> Computation of the	Instructions: Block A In block A: If your answer is	"Yes," comple	te blocks B and	•	nart	8 of the DSE schedul	e.			
Syndicated	ii your answer is	No, leave bi			•	LEVISION MARKI				
Exclusivity			DEC	2011 71. W/ WOOT	<u> </u>		_ !			
Surcharge	• Is any portion of the o	able system w	ithin a top 100 m	ajor television mar	ket as	s defned by section 76.	.5 of FCC ru	ules in effect June	e 24, 19	81?
	X Yes—Complete	blocks B and	C .			No—Proceed to	part 8			
	BLOCK B: C	arriage of VHI	-/Grade B Cont	our Stations		BLOCK	C: Compu	utation of Exemp	t DSEs	
	Is any station listed in commercial VHF stati or in part, over the cal	on that places			r	Was any station listed nity served by the cabl o former FCC rule 76.	le system p	•	,	
	Yes—List each st  X No—Enter zero a			permitted DSE		Yes—List each sta  X No—Enter zero ar			e permitt	ed DSE
	CALL SIGN	DSE	CALL SIGN	DSE	]	CALL SIGN	DSE	CALL SIGN	1	DSE
					]					
			-		.					
			-							
					1					
					]					
								_		
			TOTAL DSEs	0.00				TOTAL DSE	s	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  COXCOM, LLC  007990	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.  X No—Complete section 4 below.	
	SECTION 3: TOP 50 TELEVISION MARKET	
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      \( \text{\fix} \) No—Complete the applicable section below.  If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	
	A. Enter 0.00599 of gross receipts (the amount in section1)	
	B. Enter 0.00377 of gross receipts (the amount in section.1)	
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)	
	Syndicated Exclusivity Surcharge	
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.	
	A. Enter 0.00599 of gross receipts (the amount in section 1)	
	B. Enter 0.00377 of gross receipts (the amount in section 1) ▶ \$	
	C. Multiply line B by 3.000 and enter here	
	D. Enter 0.00178 of gross receipts (the amount in section 1)	
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge	
	SECTION 4: SECOND 50 TELEVISION MARKET	
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  Yes—Complete part 9 of this schedule.  X No—Complete the applicable section below.	
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	
	B. Enter 0.00189 of gross receipts (the amount in section 1)	
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge	

Name		ME OF OWNER OF CABLE SYSTEM:  COXCOM, LLC  007990						
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  C. Multiply line B by 3.000 and enter here.  D. Enter 0.00089 of gross receipts (the amount in section 1).  E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.  F. Multiply line D by line E and enter here.  G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)  Syndicated Exclusivity Surcharge.						
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ctions:  ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.  bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.  If answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.  If answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below  It is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers becated within that station's local service area and others were located outside that area. For the definition of a station's "local servae," see page (v) of the general instructions.						
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS  • Did your cable system retransmit the signals of any partially distant television stations during the accounting period?    Yes—Complete part 9 of this schedule.   X No—Complete the following sections.    BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 2 Section 3	Enter the amount of gross receipts from space K (page 7).   Enter the total number of permitted DSEs from block B, part 6 of this schedule.  (If block A of part 6 was checked "Yes,"  use the total number of DSEs from part 5.).   O.00  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).   **Signature**  **Signature**  **Signature**  **Signature**  **Signature**  **Outonature**  **Signature**  **Signature**  **Outonature**  **Signature**  **Signature**  **Outonature**  **Signature**  **Outonature**  **Signature**  **S						
		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.						

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2022/1

. = 2	AND OF OUR PROPERTY.	21/2=====	
	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
COX	COM, LLC	007990	
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		8
	(the amount in section 1)		
	`	_	
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) <b></b>		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here <b>&gt;</b>		
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) <b>\$</b>		
	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 <b>&gt;</b>		
	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	
MPOF		- d t - i d-	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television bro- stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multip		•
	Space G.		9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To ta clusion, you must:	ke advantage of	of
uno ox	ordotori, you must.		Base Rate Fee and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dista or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Detern		Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fe		Exclusivity
Finally	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system		Surcharge for
must a	If any portion of your cable system is located within the top 100 television market and the station is not exemple lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A er, if your cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
How to	dentify a Subscriber Group for Partially Distant Stations		for Partially Permitted
	: For each community served, determine the local service area of each wholly distant and each partially distant	station you	Stations
Step 2	to that community. : For each wholly distant and each partially distant station you carried, determine which of your subscribers we the station's local service area. A subscriber located outside the local service area of a station is distant to tha		
the sar	ne token, the station is distant to the subscriber.)		
subscr	: Divide your subscribers into subscriber groups according to the complement of stations to which they are dist iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. No will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
-	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your iber groups.	system's	
	n section:		
• Ident	fy the communities/areas represented by each subscriber group.		
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant ibers in the group.	o all of the	
• If:			
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gavi of this schedule; or,	e it in parts 2, 3,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave i :6 of this schedule.	in block B,	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	alate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gene e paper SA3 form.	ral instructions	
page. DSEs	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group for that group's complement of stations and total gross receipts from the subscribers in that group). You do not ctual calculations on the form.	that is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007990 COXCOM, 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.

_	1.001/ 1	COMPUTATION		TE EEEO EOO E : ^	11 01 10 0 0 5	DED ODOUG		
В		SUBSCRIBER GROU		TE FEES FOR EAC		SUBSCRIBER GRO	IIP	
COMMUNITY/ AREA	111101	SOBSCRIBER GROU	0	COMMUNITY/ AREA		30B3CNBER GRO	0	9
DOMINIONIT IT AIREA				COMMONT IT AREA				Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
		=						Syndicat
								Exclusiv
		-						Surcharg
								for
								Partially Distant
						-		Stations
			<u></u>					Stations
		-				<del>                                     </del>		
		-						
otal DSEs			0.00	Total DSEs			0.00	
Di-t- Fit O-		•				•		
ross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA				+				
			0	COMMUNITY/ AREA	A		0	
			0	COMMUNITY/ AREA	4			
	DSE	CALL SIGN				CALL SIGN	0	
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN		
	DSE	CALL SIGN				CALL SIGN	0	
	DSE	CALL SIGN				CALL SIGN	0	
	DSE	CALL SIGN				CALL SIGN	0	
	DSE	CALL SIGN				CALL SIGN	0	
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	DSE	CALL SIGN				CALL SIGN	0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN	DSE	
CALL SIGN		CALL SIGN	0.00	CALL SIGN  Total DSEs	DSE		DSE	
CALL SIGN		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			0.00	CALL SIGN  Total DSEs	DSE		DSE	
CALL SIGN	roup		0.00	CALL SIGN  Total DSEs	DSE		DSE	
CALL SIGN  CALL SIGN  Dital DSEs  Toss Receipts Third G	roup	\$	DSE	Total DSEs Gross Receipts Four	DSE	s	0 DSE	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNI	ER OF CABL	LE SYSTEM:					007990	Name
				TE FEES FOR EACH				
COMMUNITY/ AREA	FIRST	SUBSCRIBER GRO	<u> 0</u>	COMMUNITY/ AREA		SUBSCRIBER GRO	<b>0</b>	9
								Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate I and
								Syndicate
						.		Exclusivi
								Surcharg for
						+		Partially
								Distant
								Stations
Total DSEs	-	ĮĮ.	0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Secon		\$	0.00	
	THIRD	SUBSCRIBER GRO				I SUBSCRIBER GRO		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
				<u> </u>				

ACCOUNTING PERIOD: 2022/1

FORM SA3E. PAGE 20.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  COXCOM, LLC  007990	
Name		
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP	
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso 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 of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	Geoord of major television market
and	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	
Syndicated	this schedule.  Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as	
Exclusivity Surcharge	Exempt DSEs in block C, part 7 of this schedule. If none enter zero.	
for Partially Distant	<ul> <li>ep 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>ep 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show</li> </ul>	
Stations	your actual calculations on this form.	
l	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for
	this subscriber group subject to the surcharge computation	this subscriber group subject to the surcharge computation
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group
	subject to the surcharge	subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ear in the boxes above. Enter here and in block 4, line 2 of space L (page 7)	
ı		