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				
2/27/2020	\$ 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	2019/2			
B Owner	Instructions:     Give the full legal name of the owner of the cable system title of the subsidiary, not that of the parent corporation List any other name or names under which the owner of there were different owners during the accounting a single statement of account and royalty fee payment of Check here if this is the system's first filing. If not, LEGAL NAME OF OWNER/MAILING ADDRESS OF COXCOM, LLC	on or conducts the business of the cable s period, only the owner on the last day vering the entire accounting perioa enter the system's ID number assigne	rstem  of the accounting period should s	
				06127320192
				061273 2019/2
	6205 PEACHTREE DUNWOODY ROA ATLANTA, GEORGIA 30328	D - 12 FLOOR		
С	INSTRUCTIONS: In line 1, give any business or trac names already appear in space B. In line 2, give the			
System	1 IDENTIFICATION OF CABLE SYSTEM:	maining address of the system, in	more in the address give	п зрасс В.
	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, se	e page 1b. Identify only the frst co	nmunity served below and re	list on page 1b
Area	with all communities.			
Served	CITY OR TOWN	STATE		
First	ENFIELD	СТ		
Community	Below is a sample for reporting communities if you	<u> </u>	<u> </u>	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Allenge	MD MD	A B	1 2
	Alliance	MD	В	3
	Gering	MID	D	,

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 th 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.

FORM SAJE. PAGE ID.			OVOTEN ID#				
LEGAL NAME OF OWNER OF CABLE SYSTEM:  COXCOM, LLC			061273				
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 fillings							
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 all communities with the channel line-up "A" in the appropriate column below or leav on a partially distant or partially permitted basis in the DSE Schedule, associate eac designated by a number (based on your reporting from Part 9).	e the column blank n relevant commun	. If you report any ity with a subscrib	stations er group				
When reporting the carriage of television broadcast stations on a community-by-com channel line-up designated by an alpha-letter(s) (based on your Space G reporting) (based on your reporting from Part 9 of the DSE Schedule) in the appropriate colum	and a subscriber g						
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#				
ENFIELD EAST GRANBY	CT CT	AA AA	1	First			
EAST WINDSOR	CT	AA AA	1	Community			
GRANBY	CT	AA	1				
HARTLAND	СТ	AA	1				
HOLLAND	MA	AB	2	See instructions for			
SOMERS STAFFORD	CT CT	AA AA	1	additional information on alphabetization.			
SUFFIELD	СТ	AA AA	1	·			
UNION	СТ	AA	1				
WINDSOR LOCKS	СТ	AA	1	Add rows as necessary.			
				Add fows as fiecessary.			

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

COXCOM, LLC

SYSTEM ID#

061273

### 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.

BLO	OCK 1		BLOC	K 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
<ul> <li>Service to first set</li> </ul>	23,764	\$0-\$25.00			
<ul> <li>Service to additional set(s)</li> </ul>	5	No Cost			
<ul> <li>FM radio (if separate rate)</li> </ul>					
Motel, hotel	14	\$0-\$25.00			
Commercial	522	\$0-\$25.00			
Converter					
Residential	58,006	\$ 2.99			
Non-residential	2,275	\$ 2.99			
1		1		l	I

### 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	<ul> <li>Motel, hotel</li> </ul>		EXPANDED	\$ 54.99
<ul> <li>Pay cable—add'l channel</li> </ul>	10.00-32.00	Commercial			
Fire protection		• Pay cable			
•Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>			
Installation: Residential		Fire protection			
First set	20-100.00	Burglar protection			
<ul> <li>Additional set(s)</li> </ul>	\$ 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.					OVOTEM ID#	
LEGAL NAME OF OWI		YSTEM:			SYSTEM ID# 061273	Namo
COXCOM, LLC					061273	
PRIMARY TRANSMITT In General: In space carried by your cable FCC rules and regular 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis: basis under specifc Fibasis under specifc Fibasis. For further in the paper SA3 fc Column 1: List eareach multicast stream cast stream as "WETA-simulcast).  Column 2: Give the	G, identify ever system during to tions in effect on 6.61(e)(2) and (isis, as explaine Stations: With CC rules, regular in here in space donline and also in spanformation concorm. It is such that it is associated with A-2". Simulcast the channel number. For example	y television st he accounting (4), or 76.63 (red in the next respect to any actions, or auth G—but do lis stitute basis. ace I, if the staterning substitute sign. Do not a h a station ac streams must ber the FCC he, WRC is Ch	g period, except 181, permitting the referring to 76.6 paragraph. It is a paragraph with the stations or izations: It it in space I (the station was carried tute basis station report origination coording to its own to be reported in the station was assigned to	(1) stations carrine carriage of certifice (2) and (4))]; is carried by your me Special Statement of both on a substans, see page (v) on program service er-the-air designation of the television statement of the	s and low power television stations) ed only on a part-time basis under tain network programs [sections and (2) certain stations carried on a cable system on a substitute program tent and Program Log)—if the tute basis and also on some other of the general instructions located the such as HBO, ESPN, etc. Identify ation. For example, report multi- th stream separately; for example tion for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, b (for independent multi For the meaning of th Column 4: If the s planation of local serv Column 5: If you h	y entering the le icast), "E" (for n ese terms, see tation is outside rice area, see p nave entered "Y the distant statie	etter "N" (for n oncommercia page (v) of the the local sen age (v) of the es" in column on during the	network), "N-M" ( al educational), of the general instruction of the genera	for network multion "E-M" (for nonce ctions located in the distant"), enter "Y cions located in the mplete column 5, od. Indicate by er	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	
For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these t Column 6: Give the FCC. For Mexican or	sion of a distant at entered into o a primary trans simulcasts, als hree categories to location of ea Canadian static	n or before Jumitter or an a conter "E". If s, see page (vach station. Foons, if any, given	une 30, 2009, be association repre you carried the ) of the general or U.S. stations, we the name of the	etween a cable sy esenting the prima channel on any c instructions locate list the communit the community wit	y payment because it is the subject stem or an association representing by transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form.  If y to which the station is licensed by the hydrother because the station is identifed.	
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For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these toolumn 6: Give the FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN  WCCT-1  WCCT-1  WCCT-2  WCTX-1  WEDH-1  WEDH-3  WFSB-1  WFSB-1  WFSB-1  WGBYDT-1  WGGB-1  WHPX-1	sion of a distant tentered into o a primary trans simulcasts, als hree categories te location of ea Canadian static ng multiple characteristics.  2. B'CAST CHANNEL NUMBER  20.1  20.2  59.1  24.1  24.3  3.1  3.2  3.3  57.1  40.1	n or before Jumitter or an a center "E". If a see page (vich station. Foons, if any, givennel line-ups,  CHANN  3. TYPE  OF  STATION  I  E  E-M  N  I-M  I-M  I-M  I-M  I-M  I-M  I-M	une 30, 2009, be association repreyou carried the of the general or U.S. stations, we the name of the use a separate of U.S. Stations, which is the name of the use and the use of the use	etween a cable system in the prima channel on any constructions locate list the community with space G for each AA  5. BASIS OF CARRIAGE	y payment because it is the subject stem or an association representing ary transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the handle when which the station is identified. It is channel line-up.  6. LOCATION OF STATION  WATERBURY, CT WATERBURY, CT WATERBURY, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT SPRINGFIELD, MA SPRINGFIELD, MA	additional information
For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these toolumn 6: Give the FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN  WCCT-1  WCCT-2  WCTX-1  WEDH-3  WFSB-1  WFSB-1  WFSB-1  WGBYDT-1  WGGB-1  WHPX-1  WRDM-1	sion of a distant at entered into o a primary trans simulcasts, als hree categories are location of ea Canadian station multiple characteristics.  2. B'CAST CHANNEL NUMBER 20.1 20.2 59.1 24.1 24.3 3.1 3.2 3.3 57.1 40.1 26.1	n or before Jumitter or an a center "E". If a see page (vich station. Foons, if any, givennel line-ups,  CHANN  3. TYPE  OF  STATION  I  E  E-M  N  I-M  I-M  I-M  I-M  I-M  I-M  I-M	une 30, 2009, be association repreyou carried the of the general or U.S. stations, we the name of the use a separate of U.S. Stations, which is the name of the use and the us	etween a cable system in the prima channel on any constructions locate list the community with space G for each AA  5. BASIS OF CARRIAGE	y payment because it is the subject stem or an association representing ary transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the handle when which the station is identified. It is channel line-up.  6. LOCATION OF STATION  WATERBURY, CT WATERBURY, CT WATERBURY, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT SPRINGFIELD, MA SPRINGFIELD, MA NEW LONDON, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT SPRINGFIELD, MA NEW LONDON, CT HARTFORD, CT	additional information
For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these toolumn 6: Give the FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN  WCCT-1  WCCT-2  WCTX-1  WEDH-1  WEDH-3	sion of a distant at entered into o a primary trans simulcasts, als hree categories le location of ea Canadian stationg multiple characteristics.  2. B'CAST CHANNEL NUMBER 20.1 20.2 59.1 24.1 24.3 3.1 3.2 3.3 57.1 40.1 26.1 19.1	n or before Jumitter or an a conter "E". If a see page (very station. For see, if any, givennel line-ups,  CHANN  3. TYPE  OF  STATION  I-M  I-M  I-M  I-M  I-M  I-M  I-M  I-	une 30, 2009, be association repressociation r	etween a cable system in the prima channel on any constructions locate list the community with space G for each AA  5. BASIS OF CARRIAGE	y payment because it is the subject stem or an association representing any transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the handle when which the station is identified. It is channel line-up.  6. LOCATION OF STATION  WATERBURY, CT WATERBURY, CT NEW HAVEN, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT SPRINGFIELD, MA SPRINGFIELD, MA NEW LONDON, CT HARTFORD, CT	additional information
For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these toolumn 6: Give the FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN  WCCT-1  WCCT-2  WCTX-1  WEDH-3  WFSB-1  WFSB-3  WGBYDT-1  WGGB-1  WHPX-1  WRDM-1  WRDM-2  WTIC-1	sion of a distant at entered into o a primary trans simulcasts, als hree categories te location of ea Canadian static and multiple characteristics.  2. B'CAST CHANNEL NUMBER 20.1 20.2 59.1 24.1 24.3 3.1 3.2 3.3 57.1 40.1 26.1 19.1 19.2 61.1	n or before Jumitter or an a conter "E". If a see page (vich station. Foons, if any, givened line-ups,  CHANN  3. TYPE  OF  STATION  I-M  I-M  I-M  I-M  I-M  I-M  I-M  I-	une 30, 2009, be association repressociation r	etween a cable system in the prima channel on any constructions locate list the community with space G for each AA  5. BASIS OF CARRIAGE	y payment because it is the subject stem or an association representing any transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the had which the station is identified. It is channel line-up.  6. LOCATION OF STATION  WATERBURY, CT WATERBURY, CT WATERBURY, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT SPRINGFIELD, MA SPRINGFIELD, MA NEW LONDON, CT HARTFORD, CT	additional information
For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these toolumn 6: Give the FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN  WCCT-1  WCCT-2  WCTX-1  WEDH-1  WEDH-3  WFSB-1  WFSB-3  WGBYDT-1  WGGB-1  WHPX-1  WRDM-1  WRDM-2  WTIC-1	sion of a distant at entered into o a primary trans simulcasts, als hree categories are location of ea Canadian stationg multiple characteristics.  2. B'CAST CHANNEL NUMBER 20.1 20.2 59.1 24.1 24.3 3.1 3.2 3.3 57.1 40.1 26.1 19.1 19.2 61.1 61.2	n or before Jumitter or an a conter "E". If cons, if any, givened line-ups,  CHANN  3. TYPE  OF  STATION  I-M  I-M  I-M  I-M  I-M  I-M  I-M  I-	une 30, 2009, be association repressociation repressociation repressociation repressociation repressociation repressociation repressociation repressociation repressociations, and the second repressociation	etween a cable system in the prima channel on any constructions locate list the community with space G for each AA  5. BASIS OF CARRIAGE	y payment because it is the subject stem or an association representing any transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the handle when which the station is identified. It is channel line-up.  6. LOCATION OF STATION  WATERBURY, CT WATERBURY, CT WATERBURY, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT SPRINGFIELD, MA SPRINGFIELD, MA NEW LONDON, CT HARTFORD, CT	additional information
For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these toolumn 6: Give the FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN  WCCT-1  WCCT-2  WCTX-1  WEDH-1  WEDH-3  WFSB-1  WFSB-3  WGBYDT-1  WGGB-1  WHPX-1  WRDM-1  WRDM-2	sion of a distant at entered into o a primary trans simulcasts, als hree categories te location of ea Canadian static and multiple characteristics.  2. B'CAST CHANNEL NUMBER 20.1 20.2 59.1 24.1 24.3 3.1 3.2 3.3 57.1 40.1 26.1 19.1 19.2 61.1	n or before Jumitter or an a conter "E". If a see page (vich station. Foons, if any, givened line-ups,  CHANN  3. TYPE  OF  STATION  I-M  I-M  I-M  I-M  I-M  I-M  I-M  I-	une 30, 2009, be association repressociation r	etween a cable system in the prima channel on any constructions locate list the community with space G for each AA  5. BASIS OF CARRIAGE	y payment because it is the subject stem or an association representing any transmitter, enter the designather basis, enter "O." For a further ed in the paper SA3 form. It is to which the station is licensed by the had which the station is identified. It is channel line-up.  6. LOCATION OF STATION  WATERBURY, CT WATERBURY, CT WATERBURY, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT HARTFORD, CT SPRINGFIELD, MA SPRINGFIELD, MA NEW LONDON, CT HARTFORD, CT	additional information

**ACCOUNTING PERIOD: 2019/2** FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name COXCOM, LLC 061273 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 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. CHANNEL LINE-UP AA (2) 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF CARRIAGE SIGN (Yes or No) NUMBER STATION (If Distant) WUVN-1 No HARTFORD, CT 18.1 ı WVIT-1 30.1 Ν No **NEW BRITAIN, CT** WVIT-2 30.2 I-M No **NEW BRITAIN, CT** No WEDH-2 24.2 E-M HARTFORD, CT No WCTX-2 59.2 I-M **NEW HAVEN, CT** WUVN-3 47.1 I-M No HARTFORD, CT

LEGAL NAME OF OWNER OF CABLE SYSTEM:

COXCOM, LLC

SYSTEM ID#

Name

Name

#### PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

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

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

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

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
WEDH-1	24.1	E	No		HARTFORD, CT
WFSB-1	3.1	N	No		HARTFORD, CT
WGBH-1	2.1	E	No		BOSTON, MA
WGBYDT-1	57.1	Е	No		SPRINGFIELD, MA
WGBYDT-2	57.2	E-M	No		SPRINGFIELD, MA
WGBYDT-3	57.3	E-M	No		SPRINGFIELD, MA
WGBYDT-4	57.4	E-M	No		SPRINGFIELD, MA
WGGB-1	40.1	N	No		SPRINGFIELD, MA
WGGB-2	40.2	I-M	No		SPRINGFIELD, MA
WRDM-1	19.1	I	Yes	0	HARTFORD, CT
WRDM-2	19.2	I-M	Yes	0	HARTFORD, CT
WSHM-5	3.5	N	No		SPRINGFIELD, MA
WUVN-1	18.1	I	No		HARTFORD, CT
WWLP-1	22.1	N	No		SPRINGFIELD, MA
WWLP-2	22.2	I-M	No		SPRINGFIELD, MA
WUVN-3	47.1	I-M	No		HARTFORD, CT

G

Primary Transmitters: Television

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 061273 COXCOM, 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 LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.								ACCOUNTING	PERIOD: 2019/2
LEGAL NAME OF OWNER OF COXCOM, LLC	CABLE SYST	FEM:					S	YSTEM ID# 061273	Name
SUBSTITUTE CARRIAGE In General: In space I, ident					n that vour	cable	svstem c	arried on a	ı
substitute basis during the average explanation of the programm  1. SPECIAL STATEMENT	ccounting pending that must	eriod, under spe st be included in NING SUBST	ecific present and former FC in this log, see page (v) of the ITUTE CARRIAGE	C rules, regula e general instr	ations, or a ructions loo	uthoriz cated i	zations. F n the pap	or a further	Substitute Carriage: Special
During the accounting per broadcast by a distant state      Note: If your answer is "No.	tion?	-	•	-			Yes	X No	Statement and Program Log
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the prograr Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	E PROGRA titute progra ce, please a of every no distant stat gulations, o tion. Do no Lucy" or "NE n was broad sign of the s adcast static addian static add	MS Im on a separa attach addition nnetwork telev ion and that you r authorization t use general of BA Basketball: deast live, ente station broadca on's location (th ons, if any, the when your sys e substitute pro a program carri listed program ons in effect du	te line. Use abbreviations al pages. ision program (substitute pour cable system substitute so See page (vi) of the generategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your ded by a system from 6:01:	wherever pos rogram) that, d for the prog eral instructio "basketball". lo." m. station is lice station is ider program. Use cable system. 15 p.m. to 6:2 mming that y ; enter the let under FCC r	usible, if the during the gramming on societies by the hitified). In numerals a sign of the sign of th	eir me e acco of anoid in the iffic pro ne FCC , with mes a should n was ne liste egulat	eaning is punting ther static paper ogram  C or, in the mont accurately d be required ed protions in	on h	
S	SUBSTITUT	E PROGRAM			EN SUBS	CURF	RED	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		TIME:	S TO	DELETION	
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 061273 COXCOM, LLC PART-TIME CARRIAGE LOG J 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** DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
СО	OXCOM, LLC	061273	Name
Inst all a (as	tructions: The figure you give in this space determines the form you fle and the amount you amounts (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 conge (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s)	dary transmission service	K Gross Receipts
IMP	during the accounting period.  PORTANT: You must complete a statement in space P concerning gross receipts.	\$ 5,718,223.34 (Amount of gross receipts)	
<ul><li>Cor</li><li>Cor</li><li>If you fee</li><li>If you</li></ul>	YRIGHT ROYALTY FEE  uctions: Use the blocks in this space L to determine the royalty fee you owe:  mplete block 1, showing your minimum fee.  mplete block 2, showing whether your system carried any distant television stations.  bour system did not carry any distant television stations, leave block 3 blank. Enter the amo  from block 1 on line 1 of block 4, and calculate the total royalty fee.  bour system did carry any distant television stations, you must complete the applicable parts  companying this form and attach the schedule to your statement of account.		L Copyright Royalty Fee
bloo	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be $\epsilon$ ck 3 below.		
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entelow.	tered on line 2 in block	
	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	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more at least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period.  Line 1. Enter the amount of gross receipts from space K		
	Line 2. Multiply the amount in line 1 by 0.01064  Enter the result here.	Ţ 0,: 10,220.0 :	
		\$ 60,841.90	
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'  X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and con	4, you must check ?	
Block 3	Line 1. <b>BASE RATE FEE:</b> 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	\$ 3,294.99	
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	\$ 3,294.99	
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  Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7	\$ 60,841.90	Cable systems submitting
	(block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.  Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9	0.00	additional deposits under Section 111(d)(7)
	(Interest Worksheet)	0.00	should contact the Licensing
	Line 4. FILING FEE	\$ 725.00	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	\$ 61,566.90	appropriate form for submitting the additional fees.
	EFT Trace # or TRANSACTION ID #		additional 1663.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions located in the paper SA3 form and the Excel instructions tab		

Name	LEGAL NAME OF OWNER O	OF CABLE S	YSTEM:			S	STEM ID#
Numb	COXCOM, LLC						061273
<b>M</b> Channels	to its subscribers and	d (2) the	(1) the number of channels cable system's total number thannels on which the cable	-	n carried television broadcas		
			padcast stations			24	
	•						
		system o	ctivated channels carried television broadcast			696	
N Individual to	INDIVIDUAL TO BE we can contact abou		CTED IF FURTHER INFOR tement of account.)	MATION IS NEEDED: (Id	lentify an individual		
for Further	Name BRYAN	GOSS	5		Telephone	404-269-4444	
Information			TREE DUNWOODY Route, apartment, or suite number)	OAD - 12 FLOOR			
	ATLAN (City, town, s		ORIGA 30328				9444444
	Email	BRYA	N.GOSS@COX.COM	1	Fax (optional) 404-269-	1607	
0	CERTIFICATION (Thi	s statem	ent of account must be certi	fed and signed in accorda	nce with Copyright Office re	gulations.	
Certifcation	• I, the undersigned, h	ereby cer	tify that (Check one, but only	one, of the boxes.)			
	(Owner other than	n corpora	ation or partnership) I am th	e owner of the cable syster	m as identifed in line 1 of space	e B; or	
			n corporation or partnershi that the owner is not a corpo		agent of the owner of the cabl	e system as identified	
	(Officer or partner in line 1 of spa	-	n officer (if a corporation) or a	a partner (if a partnership) o	of the legal entity identifed as o	wner of the cable systen	m
		nd correct	to the best of my knowledge		at all statements of fact contain d are made in good faith.	ned herein	
		X	/s/ Mary Vickers				
		(e.g., /s/		the first forward slash of the	ture to certify this statement.  /s/ signature, place your cursowill avoid enabling Excel's Lotu		•
		Typed	or printed name: MARY	VICKERS			
		Title:	VICE PRESIDENT (Title of official position held in c	orporation or partnership)			
		Date:	February 15, 2020				

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 th 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 telephor numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in 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:  SYSTEM ID#	Name
COXCOM, LLC 061273	
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 subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."  For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Special Statement Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
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 underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	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	-
Line 3 Multiply line 2 by the number of days late and enter the sum here	-
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	
(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please 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.	
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 th 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.

ACCOUNTING PERIOD: 2019/2

# INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica 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 accoun (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 lead stations are not counted at all in computing DSEs	

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 C 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 or 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 particula 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  $\varepsilon$  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, ir 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 statior 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 Syndicatec 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 pursuan to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/o 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 ir
  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.

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

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

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

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

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
   the rates given above;
   the total number of DSEs for that group's complement of stations;
   and
   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
<b>\</b> an	Bodega Bay ns B, D, id E le zone

	<b>Distant Stations Carrie</b>	d	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 DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6.384.00

		φο,σοσο			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	<u>.</u>
(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: 2019/2** 

DSE SCHEDULE. PAG						
1	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#
I	COXCOM, LLC					061273
	SUM OF DSEs OF CATEGOR	RY "O" STATION	NS:			
	Add the DSEs of each station					
	Enter the sum here and in line	1 of part 5 of this	s schedule.		2.00	
	Instructions:					-
2	In the column headed "Call	Sign": list the ca	ll signs of all distant stations	s identified by	the letter "O" in column 5	
0	of space G (page 3).	lifar agab indon	and ant atation wive the DCI	= "4 O": for		
Computation of DSEs for	In the column headed "DSE" mercial educational station, given	the DSF as " ?	endent station, give the DSi 25 "	= as 1.0 ; lor	each network or noncom-	
Category "O"	merciai educational station, gr	VC tric DOL as .2	CATEGORY "O" STATION	NS: DSFs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Giations	WRDM-1	1.000	07 KEE 01011	202	07 (EE 01011	562
	WRDM-2	1.000				
	WKDW-2	1.000				
Add rows as						
necessary.						
Remember to copy						
all formula into new						
rows.						
10W3.						

Nama		WNER OF CABLE SYSTEM:					S	YSTEM ID#
Name	COXCOM, LL	-C						061273
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: figure should of Column 3: Column 4: be carried out Column 5: give the type-v Column 6:	t the call sign of all dista For each station, give to correspond with the infor For each station, give to Divide the figure in colu at least to the third decir For each independent stalue as ".25."	he number of hours mation given in space he total number of hours 2 by the figure in mal point. This is the station, give the "typelumn 4 by the figure	your cable system of J. Calculate on burs that the statin column 3, and g "basis of carriage e-value" as "1.0." in column 5, and	n carried the sta ly one DSE for e on broadcast ov ive the result in e value" for the s For each netwo give the result i	ition during the accounting each station. ver the air during the acco decimals in column 4. Th	ounting period.  nis figure must  cational station,	
Capacity		C	ATEGORY LAC	STATIONS: (	COMPUTATI	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEM	R 3. NI JRS OI ED BY ST M OI	JMBER F HOURS FATION N AIR	4. BASIS OF CARRIAG VALUE	5. TYPE SE VALUE		Έ
			÷	=		x	=	
			÷			x x	=	
			÷	=		x	=	
			÷	=		x	=	
			÷	=		x	=	
			÷	=		<u>x</u>	=	
			÷	=		Х	=	
	Add the DSEs of	OF CATEGORY LAC Soft each station. The here and in line 2 of p		<del>)</del> ,	▶	0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effer Broadcast or space I).     Column 2: F at your option. T Column 3: E Column 4: E	ct on October 19, 1976 ( ne or more live, nonnetwood or each station give the This figure should correst Enter the number of days Divide the figure in column	itution for a program as shown by the lett ork programs during number of live, nonispond with the informs in the calendar yearn 2 by the figure in a	that your system er "P" in column 7 that optional carri- network programs nation in space I. r: 365, except in a column 3, and giv	was permitted to of space (); and age (as shown by a carried in substance the result in content of the carried in substance the result in content of the carried in substance the result in content of the carried in substance the result in content of the carried in substance the carried in substance the carried in substance in sub	to delete under FCC rules	2 of were deleted s than the third	·m).
		SU	BSTITUTE-BAS	IS STATIONS	S: COMPUTA	ATION OF DSEs	1	
	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	OF SUBSTITUTE-BAS of each station. In here and in line 3 of p		<b>)</b> ,	▶	0.00		
5		R OF DSEs: Give the am applicable to your system		in parts 2, 3, and	4 of this schedul	e and add them to provide	the tota	
Total Number	1. Number of	DSEs from part 2 ●				<b>&gt;</b>	2.00	
of DSEs	2. Number of	DSEs from part 3 ●				<b>&gt;</b>	0.00	
	3. Number of	DSEs from part 4 ●				<b>&gt;</b>	0.00	
	TOTAL NUMBER	R OF DSEs						2.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF C	WNER OF CABLE	SYSTEM:					S	YSTEM ID#	
COXCOM, LLC								061273	Name
Instructions: Bloc	ck A must be com	pleted.							
If your answer if schedule.	•		,	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
If your answer if	"No," complete blo			ELEVISION M	ADVETO				Computation of
Is the cable system	•					ection 76.5 of	FCC rules and re	gulations in	3.75 Fee
effect on June 24, Yes—Com		schedule—D	O NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7	•		
X No—Comp	olete blocks B and	C below.							
		BLOC	K B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulatione DSE Sche	ons prior to Jui dule. (Note: Th	part 2, 3, and 4 or ne 25, 1981. For for ne letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rd A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered	ules and reguled pursuant to as defined as defined at educational station (76.6	ations cited be to the FCC ma I in 76.5(kk) (7 Il station [76.5 55) (see parag	sis on which you on the state of the state o	ose in effect of 76.57, 76.59(b (e)(1), 76.63(a (63(a) referring	n June 24, 198 ), 76.61(b)(c), a) referring to 7 g to 76.61(d)	76.63(a) referring 76.61(e)(1	g tc	
		ant to individu viously carrie JHF station w	ıal waiver of F d on a part-tin ithin grade-B ଏ	ne or substitute ba contour, [76.59(d)(			erring to 76.61(e)	(5)	
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			worksheet on page	e 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	
WRDM-1	В	1.00							
WRDM-2	M	1.00							
	1			I				0.00	
								2.00	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule			"		
Line 2: Enter the	sum of permitte	ed DSEs fror	n block B abo	ove			"		
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.			
Line 4: Enter gro	oss receipts from	ı space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375	and enter su	ım here				X		permited/ partially nonpermitted
Line 6: Enter tota	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00	

ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF OWNER OF CABLE SYSTEM:  COXCOM, LLC  SYSTEM ID#  061273							
CALL 2. PERMITTED 3. DS	1. C	(CONTIN	ON MARKETS . PERMITTED	1. CALL	BLOCK 3. DSE	2. PERMITTED	
SIGN BASIS	SIC		BASIS	SIGN		BASIS	SIGN
							***************************************

Name	COXCOM, LLC		SYSTEM:						S	YSTEM ID#: 061273
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.  A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections									981 ne enterei
					ED	ON A PART-TIME AN				
	1. CALL SIGN	2. PRIC		COUNTING ERIOD		4. BASIS OF CARRIAGE		RESENT DSE	6. P	ERMITTED DSE
	CICIT	DOL		LITTOD		O/ IT IT IT IT IT		302		DOL
Computation of the Syndicated Exclusivity Surcharge	If your answer is	"Yes," comple "No," leave b	ete blocks B and C locks B and C blan BLOC vithin a top 100 maj	k and complete	TE	ert 8 of the DSE scheduction of the DSE sched	ET 6.5 of FCC	rules in effect J	lune 24,	1981?
					<b>-</b> 11					
	BLOCK B: C	arriage of VHI	-/Grade B Contour	Stations	4	BLOCK	C: Compu	itation of Exem	npt DSE	8
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places				Was any station listed nity served by the cab to former FCC rule 76	le system p			
	Yes—List each s  No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st  X No—Enter zero a			ate permi	tted DSE
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN .	DSE
			-					-		
		<del></del>	TOTAL DSEs	0.00		-	· · · · · · · · · · · · · · · · · · ·	TOTAL DS	SEs	0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:  COXCOM, LLC  SYSTEM ID#	Namo
	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 of the
	B. Enter the total number of exempt DSEs from block C of part 7	Syndicated
	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	Exclusivity Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  X Yes—Complete section 3 below.  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?      \( \text{\text{Y}} \) 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)	
	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	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			STEM ID# 061273
		COXCOM, LLC	061273
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ _	
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ \$	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u> .
	Instruc	ctions:	
8		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.	
		checked res, 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		rr 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 below .	
		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	_	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
	Ŀ	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 <b>4.000 or less</b> , 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)	0.00
		Base Rate Fee	

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/2

	AME OF OWNER OF CABLE SYSTEM: SOM, LLC	SYSTEM ID# 061273	Name
Section 4	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		0
•	A. Enter 0.01064 of gross receipts  (the amount in section 1) ▶  \$		8
	B. Enter 0.00701 of gross receipts	_	0
	(the amount in section 1) \$		Computation of
	C. Multiply line B by 3.000 and enter here <b>\$</b>		Base Rate Fee
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here <b>\$</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	
	<b>TANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcas be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel G	•	9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee,		Computation
•	s from subscribers located within the station's local service area, from your system's total gross receipts. To take ad on, you must:	vantage of this	of Base Rate Fee
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to	the same	and
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the	he number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for $\epsilon$ : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	each group.	Surcharge
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in parampute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B belocable system is wholly located outside all major television markets, complete block A only.		for Partially Distant Stations, and
	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
-	For each community served, determine the local service area of each wholly distant and each partially distant static to that community.	on you	Stations
Step 2	For each wholly distant and each partially distant station you carried, determine which of your subscribers were loc the station's local service area. A subscriber located outside the local service area of a station is distant to that state the token, the station is distant to the subscriber.)		
Step 3 subscr	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. E ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note tha will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Comp	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system.	m's subscriber	
	section:		
	fy the communities/areas represented by each subscriber group. he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all o	of the	
	bers in the group.		
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in	parts 2, 3,	
2) any	of this schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in blo 6 of this schedule.	ock B,	
•	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in apper SA3 form.	structions	
• Comp	wite a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the p In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need	t 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 061273 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.

LEGAL NAME OF OWNE	ER OF CABI	LE SYSTEM:				•	061273	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAG	CH SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND	SUBSCRIBER GRO	)UP	•
COMMUNITY/ AREA	SUBGF	ROUP 1		COMMUNITY/ ARE	A HOLLAN	ND, MA	9 Computat	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		=		WRDM-1	1.00			Base Rate
		-		WRDM-2	1.00	=		and
		 				_		Syndicate
								Exclusivit
		-				=		Surcharg
		 				_		for
								Partially
								Distant
								Stations
		-						
Total DSEs		Ш	0.00	Total DSEs			2.00	
					d C			
Gross Receipts First G	roup	\$ 5,531	,538.18	Gross Receipts Sec	cona Group	\$ '	186,685.16	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	cond Group	\$	3,294.99	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	)UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						_		
		_						
	<u></u>	-				_		
		_				_		
		-						
			0.00	T-4-1 DOS			0.00	
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
				<u> </u>				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxe	s above.	\$	3,294.99	

							061273	
В				TE FEES FOR EACH				
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP			UP	9
COMMUNITY/ AREA	SUBGR	RUUP 1		COMMUNITY/ AREA	HULLAND, MA			Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
O/ IEE OF OF	BOL	O/ LEE STOTA	562	O/ IEE O/O/Y	BOL	ONEE SIGH	562	Base Rate
		=						and
								Syndicat
		-						Exclusiv
								Surcharg
								for
								Partially
								Distant
								Stations
	4!							
otal DSEs		-	0.00	Total DSEs		-	0.00	
ross Receipts First G	roup	\$ 5,531,	538.18	Gross Receipts Second Group \$ 186,685.16			86.685.16	
,	•							
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second Group \$ 0.00				
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
······			1		-1			
		-						
		-						
rotal DSEs			0.00	Total DSEs			0.00	
	Group				n Group	S		
	Group	\$	0.00	Total DSEs Gross Receipts Fourt	n Group	\$	0.00	
Fotal DSEs Gross Receipts Third (	Group	\$			n Group	\$		
		\$				\$		
ross Receipts Third 0			0.00	Gross Receipts Fourt			0.00	
ross Receipts Third 0			0.00	Gross Receipts Fourt			0.00	

ACCOUNTING PERIOD: 2019/2

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name COXCOM, LLC 061273 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 mustalso compute a 9 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 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. 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. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant 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 computation . . . . . . . . . . . . . . . . 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 Third Group . . . . . . . . . . . . . . . . Fourth Group . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown