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			
	\$			
2/26/2025	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	2024/2								
Period									
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting the control of the counting period of the system's first filing. If not, enter the system's ID not not period of the counting period of the counting the counti	s of the cable systen on the last day of th unting period.	m. e accounting period should sub						
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
	COX COMMUNICATIONS HAMPTON ROADS, LLC								
				01403920242					
				014039 2024/2					
	6205 PEACHTREE DUNWOODY ROAD - 12 FLOOR								
	ATLANTA, GEORIGA 30328								
С	INSTRUCTIONS: In line 1, give any business or trade names used to id								
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address given	in space B.					
System	1 IDENTIFICATION OF CABLE SYSTEM:								
	MAILING ADDRESS OF CABLE SYSTEM:								
	2 (Number, street, rural route, apartment, or suite number)								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and relis	st on page 1b					
Area	with all communities.	,	,						
Served	CITY OR TOWN	STATE							
First	VIRGINIA BEACH	VA							
Community	Below is a sample for reporting communities if you report multiple cha	ւ nnel line-ups in Տր	pace G.						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda	MD	A	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: COX COMMUNICATIONS HAMPTON ROADS, LLC			SYSTEM ID# 014039				
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future 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., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).							
When reporting the carriage of television broadcast stations on a community-by-common 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	ıd a subscriber gro						
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#				
VIRGINIA BEACH	VA	AA	1	First			
CHESAPEAKE	VA	AA	11	Community			
COAST GUARD CURRITUCK COUNTY	VA NC	AA AA	1				
FORT EUSTIS	VA	AC	4				
FORT MONROE	VA	AC	4	C :			
FORT STORY	VA	AA	1	See instructions for additional information			
GLOUCESTER COUNTY	VA	AB	3	on alphabetization.			
HAMPTON	VA	AC	4				
JAMES CITY COUNTY	VA	AB	2				
LANGLEY AIR FORCE BASE	VA	AC	4	l			
NAVAL BASE	VA	AA	1	Add rows as necessary.			
NEWPORT NEWS	VA	AC	4				
NORFOLK	VA	AA	1				
POQUOSON	VA	AC	4				
PORTSMOUTH	VA	AA	1				
WILLIAMSBURG	VA	AB	2				
YORK COUNTY	VA	AB	3				
YORKTOWN NEWS	VA	AC	4				

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 014039

COX COMMUNICATIONS HAMPTON ROADS, LLC

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		BLOCK 2
	NO. OF		NO. OF
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE SUBSCRIBERS RATE
Residential:			
 Service to first set 	4	\$25-\$50.00	
Service to additional set(s)	4,233	No Cost	
 FM radio (if separate rate) 			
Motel, hotel	12,485	\$25-\$50.00	
Commercial	278,503	\$25-\$50.00	
Converter			
Residential	48,257	\$ 6.00	
Non-residential	343,482	\$ 6.00	
		1	

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 1						
CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE		
Continuing Services:			Installation: Non-residential				
• Pay cable	\$	15.99	Motel, hotel				
 Pay cable—add'l channel 	10.0	0-32.00	Commercial				
Fire protection			Pay cable				
Burglar protection			Pay cable-add'l channel				
Installation: Residential			Fire protection				
First set	20	-100.00	Burglar protection				
 Additional set(s) 	\$		Other services:				
• FM radio (if separate rate)			Reconnect				
Converter			Disconnect				
			Outlet relocation	\$0-\$50.00			
			Move to new address	20.00-50.00			

COX COMMUN	NER OF CABLE SY				SYSTEM ID	Name	
	ICATIONS H	IAMPTON F	ROADS, LLC		01403	9	
PRIMARY TRANSMITT							
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.							
				carried by your c	able 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							
basis. For further in	and also in spa nformation cond	ace I, if the sta			ute basis and also on some other f the general instructions located		
each multicast stream	ch station's call associated wit	h a station acc	cording to its over	er-the-air designa	s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example		
			-		on for broadcasting over-the-air in		
on which your cable s	ystem carried th	ne station.			may be different from the channel		
educational station, by (for independent multi For the meaning of the Column 4: If the st	y entering the le cast), "E" (for no ese terms, see ation is outside	etter "N" (for ne oncommercial page (v) of the the local serv	etwork), "N-M" (f l educational), o e general instruc rice area, (i.e. "d	for network multicater "E-M" (for nonco ctions located in the listant"), enter "Ye	s". If not, enter "No". For an ex-		
	ave entered "Ye the distant station	es" in column on during the	you must con accounting perio	nplete column 5, s od. Indicate by ent	stating the basis on which your ering "LAC" if your cable system		
of a written agreemen the cable system and	t entered into o a primary trans	n or before Ju mitter or an as	ne 30, 2009, be ssociation repre	tween a cable sys senting the prima	payment because it is the subject tem or an association representing y transmitter, enter the designa-		
Column 6: Give the	e location of ea Canadian statio	, see page (v) ch station. Fo ons, if any, give	of the general i r U.S. stations, I e the name of th	nstructions locate list the community ne community with	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. channel line-up.		
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Column 6: Give th FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN WAVY-DT1 WAVY-DT2 WAVY-DT3 WAVY-DT4 WGNT-1 WGNT-2 WGNT-3 WHRO-1 WHRO-2 WHRO-3 WHRO-4 WPXV-1 WSKY-1	2. B'CAST CHANNEL NUMBER 10.1 10.2 10.3 10.4 27.1 27.2 27.3 15.1 15.2 15.3 15.4 49.1 4.1	, see page (v) ch station. For ons, if any, give nnel line-ups, CHANN 3. TYPE OF STATION N I-M I-M I-M I-M E E-M E-M I I I I I I I I I I I I I I I I I I I	of the general i r U.S. stations, I e the name of thuse a separate stellar LINE-UP 4. DISTANT? (Yes or No) No	nstructions locate ist the community the community with space G for each AA 5. BASIS OF CARRIAGE	d in the paper SA3 form. To which the station is licensed by the which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION PORTSMOUTH, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA NORFOLK, VA MANTEO, NC	additional information	
Column 6: Give th FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN WAVY-DT1 WAVY-DT2 WAVY-DT3 WAVY-DT4 WGNT-1 WGNT-2 WGNT-3 WHRO-1 WHRO-2 WHRO-3 WHRO-4 WPXV-1 WSKY-1 WSKY-1	2. B'CAST CHANNEL NUMBER 10.1 10.2 10.3 10.4 27.1 27.2 27.3 15.1 15.2 15.3 15.4 49.1 4.1 4.2	, see page (v) ch station. For ons, if any, give nnel line-ups, CHANN 3. TYPE OF STATION N I-M	of the general i r U.S. stations, I e the name of thuse a separate see the INE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	nstructions locate ist the community the community with space G for each AA 5. BASIS OF CARRIAGE	d in the paper SA3 form. To which the station is licensed by the which the station is identifed. Channel line-up. 6. LOCATION OF STATION PORTSMOUTH, VA A PORTSMOUTH, VA PORTSMOUTH, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA MANTEO, NC MANTEO, NC	additional information	
Column 6: Give th FCC. For Mexican or Note: If you are utilizing 1. CALL SIGN WAVY-DT1 WAVY-DT2 WAVY-DT3 WAVY-DT4 WGNT-1 WGNT-2 WGNT-3 WHRO-1 WHRO-2 WHRO-3 WHRO-4 WPXV-1 WSKY-1 WSKY-1 WSKY-2 WSKY-3	2. B'CAST CHANNEL NUMBER 10.1 10.2 10.3 10.4 27.1 27.2 27.3 15.1 15.2 15.3 15.4 49.1 4.1 4.2 4.3	, see page (v) ch station. For ons, if any, give nnel line-ups, CHANN 3. TYPE OF STATION I-M I-M I-M I-M E E-M E-M I I-M I I-M I-M I-M I-M I-M I-M I-M I	of the general i r U.S. stations, I e the name of the use a separate set. LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No	nstructions locate ist the community the community with space G for each AA 5. BASIS OF CARRIAGE	d in the paper SA3 form. To which the station is licensed by the which the station is identifed. channel line-up. 6. LOCATION OF STATION PORTSMOUTH, VA A PORTSMOUTH, VA PORTSMOUTH, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA HAMPTON-NORFOLK, VA MANTEO, NC MANTEO, NC MANTEO, NC	additional information	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example 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. CHANNEL LINE-UP AA (2) 2. B'CAST 3. TYPE 4. DISTANT? 6. LOCATION OF STATION 1. CALL 5. BASIS OF OF CHANNEL CARRIAGE SIGN (Yes or No) NUMBER STATION (If Distant) WTPC-2 21.2 I-M No VIRGINIA BEACH, VA WTPC-3 VIRGINIA BEACH, VA 21.3 I-M No WTPC-4 21.4 I-M No VIRGINIA BEACH, VA WTPC-5 21.5 I-M No VIRGINIA BEACH, VA WTVZ-1 33.1 1 No NORFOLK, VA WTVZ-2 33.2 I-M No NORFOLK, VA WTVZ-3 33.3 I-M No NORFOLK, VA WUND-1 Ε 2.1 No **EDENTON, NC** WUND-2 2.2 E-M No **EDENTON, NC** WUND-3 2.3 E-M No **EDENTON, NC** WUND-4 2.4 E-M No **EDENTON, NC** WVBT-DT1 43.1 1 No VIRGINIA BEACH, VA WVBT-DT2 43.2 I-M No VIRGINIA BEACH, VA WVBT-DT3 43.3 I-M No VIRGINIA BEACH, VA WVBT-DT4 43.4 I-M No VIRGINIA BEACH, VA WVEC-1 13.1 Ν No HAMPTON, VA WVEC-2 I-M 13.2 HAMPTON, VA No WVEC-3 13.3 I-M HAMPTON, VA No

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example 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. CHANNEL LINE-UP AB 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION CHANNEL ΩF CARRIAGE SIGN (Yes or No) NUMBER **STATION** (If Distant) WAVY-1 10.1 Ν No PORTSMOUTH, VA WAVY-2 10.2 PORTSMOUTH, VA I-M No WAVY-3 10.3 I-M No PORTSMOUTH, VA WAVY-4 10.4 I-M No PORTSMOUTH, VA WGNT-1 27.1 1 No PORTSMOUTH, VA WGNT-2 27.2 I-M No PORTSMOUTH, VA WGNT-3 27.3 I-M No PORTSMOUTH, VA WHRO-1 15.1 Ε No HAMPTON-NORFOLK, VA WHRO-2 15.2 E-M No HAMPTON-NORFOLK, VA WHRO-3 15.3 E-M No HAMPTON-NORFOLK, VA WHRO-4 15.4 E-M No HAMPTON-NORFOLK, VA WPXV-1 49.1 ı NORFOLK, VA No WSKY-1 4.1 т No MANTEO, NC WSKY-2 4.2 I-M No MANTEO. NC WSKY-3 4.3 I-M No MANTEO, NC WTKR-1 Ν NORFOLK, VA 3.1 No WTKR-2 I-M 3.2 NORFOLK, VA No

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

VIRGINIA BEACH, VA

WTPC-1

21.1

1

No

ACCOUNTING PERIOD: 2024/2 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example

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.

WFTA-simulcast)

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.

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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	AB (2)	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WTPC-2	21.2	I-M	No		VIRGINIA BEACH, VA
WTPC-3	21.3	I-M	No		VIRGINIA BEACH, VA
WTPC-4	21.4	I-M	No		VIRGINIA BEACH, VA
WTPC-5	21.5	I-M	No		VIRGINIA BEACH, VA
WTVZ-1	33.1	I	No		NORFOLK, VA
WTVZ-2	33.2	I-M	No		NORFOLK, VA
WTVZ-3	33.3	I-M	No		NORFOLK, VA
WVBT-1	43.1	I	No		VIRGINIA BEACH, VA
WVBT-2	43.2	I-M	No		VIRGINIA BEACH, VA
WVBT-3	43.3	I-M	No		VIRGINIA BEACH, VA
WVBT-4	43.4	0			VIRGINIA BEACH, VA
WVEC-1	13.1	N	No		HAMPTON, VA
WVEC-2	13.2	I-M	No		HAMPTON, VA
WVEC-3	13.3	I-M	No		HAMPTON, VA
	13.4	I-M	No		HAMPTON, VA

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS, LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example 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. CHANNEL LINE-UP AC 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 1. CALL 6. LOCATION OF STATION CHANNEL ΩF CARRIAGE SIGN (Yes or No) (If Distant) NUMBER **STATION** WAVY-1 10.1 Ν No PORTSMOUTH, VA WAVY-2 10.2 PORTSMOUTH, VA I-M No WAVY-3 10.3 I-M No PORTSMOUTH, VA WAVY-4 10.4 I-M No PORTSMOUTH, VA WGNT-1 27.1 1 No PORTSMOUTH, VA WGNT-2 27.2 I-M No PORTSMOUTH, VA WGNT-3 27.3 I-M No PORTSMOUTH, VA WHRO-1 15.1 Ε No HAMPTON-NORFOLK, VA WHRO-2 15.2 E-M No HAMPTON-NORFOLK, VA WHRO-3 15.3 E-M No HAMPTON-NORFOLK, VA WHRO-4 15.4 E-M No HAMPTON-NORFOLK, VA WPXV-1 49.1 ı NORFOLK, VA No WSKY-1 4.1 т No MANTEO, NC WSKY-2 4.2 I-M No MANTEO. NC WSKY-3 4.3 I-M No MANTEO, NC WTKR-1 3.1 Ν NORFOLK, VA No WTKR-2 3.2 I-M NORFOLK, VA No

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 014039 COX COMMUNICATIONS HAMPTON ROADS. LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G. identify every television station (including translator stations and low power television stations)

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

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

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

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

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

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

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

		CHANN	EL LINE-UP	AC (2)	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WTPC-1	21.1	I	No		VIRGINIA BEACH, VA
WTPC-2	21.2	I-M	No		VIRGINIA BEACH, VA
WTPC-3	21.3	I-M	No		VIRGINIA BEACH, VA
WTPC-4	21.4	I-M	No		VIRGINIA BEACH, VA
WTPC-5	21.5	I-M	No		VIRGINIA BEACH, VA
WTVZ-1	33.1	I	No		NORFOLK, VA
WTVZ-2	33.2	I-M	No		NORFOLK, VA
WTVZ-3	33.3	I-M	No		NORFOLK, VA
WVBT-1	43.1	I	No		VIRGINIA BEACH, VA
WVBT-2	43.2	I-M	No		VIRGINIA BEACH, VA
WVBT-3	43.3	I-M	No		VIRGINIA BEACH, VA
WVBT-4	43.4	0	No		VIRGINIA BEACH, VA
WVEC-1	13.1	N	No		HAMPTON, VA
WVEC-2	13.2	I-M	No		HAMPTON, VA
WVEC-3	13.3	I-M	No		HAMPTON, VA
WVEC-4	13.4	I-M	No		HAMPTON, VA

G

Primary Transmitters: Television

ACCOUNTING PERIOD: 2024/2 FORM SA3E, PAGE 4. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name COX COMMUNICATIONS HAMPTON ROADS, LLC 014039 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 LOCATION OF STATION LOCATION OF STATION AM or FM S/D CALL SIGN AM or FM S/D

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2024/2
LEGAL NAME OF OWNER OF					5	SYSTEM ID#	Name
COX COMMUNICATIO	NS HAMP	TON ROADS	5, LLC			014039	
SUBSTITUTE CARRIAGI	E: SPECIA	L STATEME	NT AND PROGRAM LOG	i			
In General: In space I, ident substitute basis during the a explanation of the programm	ccounting pening that must	eriod, under spe st be included i	ecific present and former FC n this log, see page (v) of th	C rules, regul	ations, or authorizations.	For a further	Substitute Carriage:
1. SPECIAL STATEMENTDuring the accounting per				s anv nonne	twork television program	n	Special
broadcast by a distant stat	•	ii cable cyclon	r carry, orr a capolitate back	o, any nomi	Yes		Statement and Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is '	'Yes," you mι	ıst complete the prograr	n	0 0
log in block 2. 2. LOG OF SUBSTITUTE							
In General: List each subsiclear. If you need more spacelear. If you need more spacelear title period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love Lolumn 2: If the program Column 3: Give the call Column 4: Give the broat the case of Mexican or Car Column 5: Give the morfirst. Example: for May 7 gives Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please of every no distant stategulations, contion. Do no Lucy" or "NEm was broad sign of the sadcast statice and day we "5/7." es when the Example: a er "R" if the and regulation ogramming	am on a separa attach addition nnetwork televion and that your authorization at use general of the station broadca on's location (thous, if any, the when your system a program carrilisted program carrilisted program ons in effect du	al pages. ision program (substitute pour cable system substitute is. See page (vi) of the gencategories 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 gied by a system from 6:01:	rogram) that, d for the progeral instruction is lice station i	during the accounting tramming of another state on slocated in the paper. List specific program unsed by the FCC or, in ntified). numerals, with the more List the times accurate the second p.m. should be cour system was require tter "P" if the listed pro	tion nth	
	U IDOTITI IT				EN SUBSTITUTE	7. REASON	
1. TITLE OF PROGRAM	2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	6. TIMES	FOR DELETION	
I. TITLE OF FROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO		
					_		
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ACCOUNTING PERIOD: 2024/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name COX COMMUNICATIONS HAMPTON ROADS, LLC 014039 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." · State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED CALL SIGN CALL SIGN HOURS HOURS DATE FROM TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM: X COMMUNICATIONS HAMPTON ROADS, LLC	S	YSTEM ID# 014039	Name
Inst all a (as pag	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount you mounts (gross receipts) paid to your cable system by subscribers for the system's second identifed in space E) during the accounting period. For a further explanation of how to cone (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	dary transmission service npute this amount, see	5,794.11	K Gross Receipts
COPY Instru • Con • Con • If you fee • • If you accor	**RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. It is system did not carry any distant television stations, leave block 3 blank. Enter the amo from block 1 on line 1 of block 4, and calculate the total royalty fee. It is system did carry any distant television stations, you must complete the applicable parts ompanying this form and attach the schedule to your statement of account.	unt of the minimum		Copyright Royalty Fee
▶ If pa	k 3 below. art 6 of the DSE schedule was completed, the amount from line 7 of block C should be entelow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.			
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.	\$ 1.064 percent of the \$ 54,306	6,794.11	
Block 2	This is your minimum fee. DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ir 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.	nformation you gave in 4, you must check?	7,824.29	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE	\$	0.00	
	schedule. If none, enter zero 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 Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	\$ 577	0.00	Cable systems submitting additional deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	\$	725.00	the Licensing additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 578	3,549.29	form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions located in the paper SA3 form and the Excel instructions tab	,		

ACCOUNTING PERIOD: 2024/2
FORM SA3E PAGE 8

Name	LEGAL NAME OF OWN		SYSTEM: HAMPTON ROADS, LLC	SYSTEM ID# 014039					
M Channels	to its subscriber	s and (2) th	e (1) the number of channels on which the cable system carried television broadcast e cable system's total number of activated channels, during the accounting period. channels on which the cable broadcast stations	stations 37					
	on which the	cable syster	activated channels n carried television broadcast stations es	435					
N Individual to Be Contacted			ACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual atement of account.)						
for Further Information	Name Delicia Nwadike Telephone (404) 269-7471								
	ATLA		route, apartment, or suite number) EORIGA 30328						
	Email	Delic	a.Nwadike@cox.com Fax (optional N/A						
O Certifcation			ent of account must be certifed and signed in accordance with Copyright Office regulatify that (Check one, but only one, of the boxes.)	ılations.)					
	(Owner other t	han corpor	ation or partnership) I am the owner of the cable system as identifed in line 1 of space B;	or					
	in line 1 X (Officer or particular in line 1	of space B artner) I am artner) I am artner	n corporation or partnership) I am the duly authorized agent of the owner of the cable sy and that the owner is not a corporation or partnership; or n officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ownership of the legal entity identified a	er of the cable system					
		e, and corre	nt of account and hereby declare under penalty of law that all statements of fact contained on the best of my knowledge, information, and belief, and are made in good faith. (6)]	nel eni					
		<u>X</u>	/s/ Tim Montz						
		(e.g., /s	n electronic signature on the line above using an "/s/" signature to certify this statement. John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compa						
		Typed	or printed name: Tim Montz						
		Title:	SVP, Enterprise Accounting (Title of official position held in corporation or partnership)						
		Date:	February 11, 2025						

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#	Name
COX COMMUNICATIONS HAMPTON ROADS, LLC 014039	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding 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. 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	Special Statement Concerning 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.	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)	
* 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 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 sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2024/2

DSE SCHEDULE, PAGE 10.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs	

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

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

U.S. Copyright Office

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

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

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

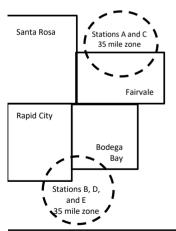
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

EXAMPLE:

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

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



Distant Stations Carrie	d	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	,	DSEs		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: 2024/2

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE	SYSTEM:			S'	YSTEM ID#
1	COX COMMUNICATIONS	S HAMPTON	ROADS, LLC			014039
	SUM OF DSEs OF CATEGOR		IS:			
	 Add the DSEs of each station. Enter the sum here and in line? 		schedule.		0.00	
	Instructions:			t		
2	In the column headed "Call S	ign": list the call	signs of all distant stations id	dentified by the	letter "O" in column 5	
Computation	of space G (page 3). In the column headed "DSE":	for each indene	ndent station, give the DSF a	s "1 0"· for ea	ch network or noncom-	
of DSEs for	mercial educational station, give			1.0 , 101 00	on network of nencom	
Category "O"			CATEGORY "O" STATION			
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
Add sources						
Add rows as necessary.						
Remember to copy all						
formula into new						
rows.						
				<u> </u>		Ĺ

Nama	LEGAL NAME OF C	OWNER OF CABLE SYSTEM:						SOE SOITED	SYSTEM ID#
Name	COX COMM	UNICATIONS HAMPT	ON ROADS, L	LC					014039
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all distar 2: For each station, give the correspond with the inform 3: For each station, give th 4: Divide the figure in colu 1: at least to the third decim 5: For each independent so value as ".25." 6: Multiply the figure in colu point. This is the station's	ne number of hou nation given in spectal number of mn 2 by the figur nal point. This is tation, give the "turn 4 by the figurum 5 by the figurum 5 by the figurum 5 by the figurum 6 by the figur	ars your cable system pace J. Calculate only f hours that the station in column 3, and go the "basis of carriage type-value" as "1.0." I ure in column 5, and	carried the static y one DSE for ea- on broadcast over ve the result in de value" for the sta For each network give the result in de	on during the act station. the air during ecimals in colution. or noncommondered the column 6. Roo	the accounumn 4. This ercial educat	ting period. figure must ional station, s than the	
Capacity		(CATEGORY L	AC STATIONS:	COMPUTATI	ON OF DS	Es		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3 JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAGI VALUE		5. TYPE VALUE	6. DS	SE
			÷ ÷			x		=	
					:	x x		=	
			÷			х		=	
			÷	:		x x		=	
			÷		:	x		=	
			÷	:	•	х		=	
	Add the DSEs	S OF CATEGORY LAC So of each station. Im here and in line 2 of pa		Jule,	▶		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effether broadcast capace I). Column 2: at your option. Column 3: Column 4:	re the call sign of each start by your system in substited on October 19, 1976 (as one or more live, nonnetwork of the cach station give the anti-station give the station give the number of days Divide the figure in colum This is the station's DSE (tution for a prograss shown by the lark programs during number of live, no pond with the infinithe calendary no 2 by the figure	am that your system etter "P" in column 7 ng that optional carria onnetwork programs ormation in space I. year: 365, except in a in column 3, and give	was permitted to of space I); and ge (as shown by the carried in substitute Ieap year.	delete under lander word "Yes" in ution for programm 4. Round	FCC rules arn column 2 of rams that we to no less the	re deleted	1).
		SU	IBSTITUTE-E	ASIS STATION	S: COMPUTA	TION OF I	DSEs		T
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR		1. CALL SIGN	2. NUM OF PRO	BER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		-		=			÷		=
		-		=			÷		=
		-		=			÷		=
		-	-	=			÷		=
	Add the DSEs	s OF SUBSTITUTE-BASI of each station. ım here and in line 3 of pa		dule,	▶		0.00		
5 Total Number of DSEs	number of DSE 1. Number 2. Number	ER OF DSEs: Give the ames applicable to your system of DSEs from part 2 • of DSEs from part 3 • of DSEs from part 4 •		xes in parts 2, 3, and	4 of this schedule	and add them	to provide th	0.00 0.00 0.00	
	TOTAL NUMBE	ER OF DSEs							0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2024/2

	WNER OF CABLE S		OADS, LLC				S	YSTEM ID# 014039	Name
In block A: • If your answer if schedule.	ck A must be comp	mainder of pa	•	of the DSE sched	ule blank and	complete part	8, (page 16) of th	e	6
If your answer if	"No," complete bloo			ELEVISION MA	ADVETS				Computation of
la the cable avator	n located wholly ou					tion 76 E of EC	C rules and regul	ations in	3.75 Fee
effect on June 24, Yes—Com		schedule—D	,				vo ruioo ana rogai		
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	and regulation e DSE Sche	ons prior to Jun dule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re Act of 2010.)	rther explanat	ion of permitte	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 Noncommerce D Grandfathered instructions fo E Carried pursua *F A station prev	les and reguled pursuant to a selfined al educational station (76.6 r DSE sched ant to individuationally carried HF station will be station will be selfined and the station will be stationally s	lations cited be of the FCC mar lin 76.5(kk) (76 al station [76.58 65) (see paragrule). Lal waiver of FC d on a part-tim ithin grade-B c	e or substitute bas ontour, [76.59(d)(5	se in effect on 5.57, 76.59(b), (c)(1), 76.63(a) (3(a) referring ostitution 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:		stations ide	ntified by the le	parts 2, 3, and 4 o tter "F" in column 2			orksheet on page 2	1	
SIGN	BASIS	J. DOL	SIGN	BASIS	J. DOL	SIGN	BASIS	J. DOL	
								0.00	
		E	BLOCK C: CO	MPUTATION OF	F 3.75 FEE				
ine 1: Enter the	total number of [DSEs from μ	oart 5 of this s	chedule					
ine 2: Enter the	sum of permitted	DSEs from	n block B abov	ve					
	line 2 from line 1. eave lines 4–7 bla			,		ate.		0.00	
∟ine 4: Enter gro	ess receipts from	space K (pa	ige 7)				x 0.0	375	Do any of the DSEs represen partially
_ine 5: Multiply li	ne 4 by 0.0375 al	nd enter sur	n here				x		permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.
l ine 7: Multinly li	ne 6 by line 5 and	d enter here	and on line 2	, block 3, space	L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC 014039								O14039	Name
		BLOCK	A: TELEVIS	SION MARKETS	(CONTINU	UED)			
1. CALL SIGN	2. PERMITTED BASIS			2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of
									3.75 Fee
		ļ							
		·							
		····							
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								·····	
		 							
		-							
		·							
		-							
		 							
		 							
	<u> </u>	·	<u> </u>	<u> </u>			· · · · · · · · · · · · · · · · · · ·		

ACCOUNTING PERIOD: 2024/2

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

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC	SYSTEM ID# 014039	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	54,306,794.11	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below.	N.	
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below. If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D)SE	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below. A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D 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)	OSE	
	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	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
ivaille		COX COMMUNICATIONS HAMPTON ROADS, LLC	014039
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$	
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Exclusivity 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. \$	
	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 pa	art
U		checked "Yes," use the total number of DSEs from part 5.	
Computation		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of	· ·	r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belo	ow
Base Rate Fee	blank		
		is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "loca	al
		e area," see page (v) of the general instructions.	ai
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		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.) ▶	
	0 "	use the total number of Bots from part o.j.	
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank.	
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)	
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1) ▶	
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	0.00
		Base Rate Fee	

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2024/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM:	
COX COMMUNICATIONS HAMPTON ROADS, LLC 01	4039 Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4	8
A. Enter 0.01064 of gross receipts	8
(the amount in section 1) ▶\$	
B. Enter 0.00701 of gross receipts	Computation
(the amount in section 1) > _	of Base Rate Fee
C. Multiply line B by 3.000 and enter here ▶\$	Buse Rute I ce
D. Enter 0.00330 of gross receipts (the amount in section 1)	
E. Subtract 4.000 from total DSEs	
(the figure in section 2) and enter here	
F. Multiply line D by line E and enter here	
G. Add lines A, C, and F. This is your base rate fee.	
Enter here and in block 3, line 1, space L (page 7) Base Rate Fee S 0.	.00
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	shall
instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups i Space G.	ⁱⁿ 9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	
receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of exclusion, you must:	of this of
	Base Rate Fee and
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number	er of Syndicated
DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity Surcharge
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. Howe	
your cable system is wholly located outside all major television markets, complete block A only.	Stations, and
How to Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you	Stations
carried to that community.	
Step 2 : For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, same token, the station is distant to the subscriber.)	by the
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	system
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subsgroups.	scriber
In each section:	
• Identify the communities/areas represented by each subscriber group.	
Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group. If	
If: I	3 and
4 of this schedule; or,	r, and
 any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule. 	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.	\$
Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding	
page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the to DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show actual calculations on the form.	

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

LEGAL NAME OF OWNER COX COMMUNICA			LLC			SY	O14039	Name
	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EACH	SUBSCRIE	BER GROUP		
	FIRST	SUBSCRIBER GROU)		SECOND	SUBSCRIBER GROUP)	
COMMUNITY/ AREA	CHANN	EL LINE-UP "AA"	SUB 1	COMMUNITY/ AREA	CHANNE	EL LINE-UP "AB" S	SUB 2	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	"							and
							·	Syndicated
	-					<u> </u>	·	
			.				.	Exclusivity
			.				 	Surcharge
								for
		-						Partially
								Distant
							<u> </u>	Stations
							T	
	<u> </u>							
Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts First Gr	oup	\$ 33,523	,165.96	Gross Receipts Second	d Group	\$ 4,75	1,211.45	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROUP	>		FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA	CHANN	EL LINE-UP "AB"	SUB 3	COMMUNITY/ AREA	CHANNI	EL LINE-UP "AC" S	UB 4	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
							-	
						H		
							·	
						H	 	
							·	
	-				······		 	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$ 8,977	,809.73	Gross Receipts Fourth	Group	\$ 7,05	4,606.98	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				11				
Base Rate Fee: Add the Enter here and in block			ber group a	as shown in the boxes abo	ove.	\$	0.00	
						L		

LEGAL NAME OF OWNER OF CABLE SYSTEM: COX COMMUNICATIONS HAMPTON ROADS, LLC 014039								
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP								
COMMUNITY/ AREA	CHANN	IEL LINE-UP "AA" SUB 1		COMMUNITY/ AREA	CHANNEL LINE-UP "AB" SUB 2			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs 0.00 Gross Receipts First Group \$ 33,523,165.96 Base Rate Fee First Group \$ 0.00			Total DSEs 0.00 Gross Receipts Second Group \$ 4,751,211.45					
			Base Rate Fee Second Group \$ 0.00					
THIRD SUBSCRIBER GROUP				FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA CHANNEL LINE-UP "AC" SUB 4				
COMMUNITY/ AREA	CHANN	IEL LINE-UP "AB	SOB 3	COMMUNITY/ AREA	CHANN	EL LINE-UP "AC"	SUB 4	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u> </u>			
					<u> </u>			
					<u> </u>			
Total DSEs 0.00			Total DSEs					
Gross Receipts Third (Group	\$ 8,97	7,809.73	Gross Receipts Fourth	Group	\$ 7,0	054,606.98	
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00		
				1				
Base Rate Fee: Add th Enter here and in bloch			criber group a	s shown in the boxes ab	ove.	\$	0.00	

ACCOUNTING PERIOD: 2024/2 FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name COX COMMUNICATIONS HAMPTON ROADS, LLC 014039 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market of **Base Rate Fee INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule **Exclusivity** Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Surcharge Exempt DSEs in block C. part 7 of this schedule. If none enter zero. 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 computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First 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

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

SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown