Form **8937** (December 2017) Department of the Treasury

Report of Organizational Actions Affecting Basis of Securities

➤ See separate instructions.

OMB No. 1545-0123

Part I Reporting Issue	r						
1 Issuer's name					2 Issuer's employ	er identification numb	er (EIN)
					37-169949	9	
LIBERTY MEDIA CORPORATION 3 Name of contact for additional information 4 Telephone No. of contact			5 Email address of				
• Name of contact for addition							
INVESTOR RELATIONS	5	877-772-3				LIBERTYMEDIA.	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact					7 City, town, or post	office, state, and ZIP code	of contact
						00110	
12300 LIBERTY BLVI		la Classif	ication and description		ENGLEWOOD	, CO 80112	
8 Date of action		9 Classii	ication and description	1			
7/19/23		DISTRIBU	ITION OF ATLANTA	BRAVES H	HOLDINGS, INC. SE	RIES C COMMON SIC	CK
0 CUSIP number	11 Serial nur		12 Ticker symbol		13 Account number		
531229 870							
047726 302			FWONA; BATR				
			ments if needed. S				
14 Describe the organizations	al action and, if	applicable, the da	te of the action or the	date agai	inst which shareholde	rs' ownership is measu	red for
the action ► ON JULY	19, 2023	LIBERTY	MEDIA CORPORA	A.T. TON	("LMC") DISTR	TROIFD .UZ896	U TO EN
OF A SHARE OF ATLAN	TA BRAVES	HOLDINGS,	INC. ("ABH") SERI.	ES C COMMON 3	ND SIICH) IO LA
HOLDER OF LMC'S SEP DISTRIBUTION THE "1				N 510C.	A I EWONA , F	AND SOCII	
DISTRIBUTION THE T	OKMULA OI	NE DIDIKIDO	TION).				
15 Describe the quantitative	effect of the org	ganizational actior	on the basis of the s	security in	the hands of a U.S. t	axpayer as an adjustm	ent per
share or as a percentage of	of old basis 🕨 💄	THE TAX BAS	SIS OF EACH S	HARE C	F FWONA HELD	IMMEDIATELY	CHADE
PRIOR TO THE FORMU	LA ONE DIS	STRIBUTION	SHOULD BE AL.	LOCATE	D 98.204/% TO	THE I FWONA	SHAKE
AND 1.7953% TO THE	.02896060	04 FRACTION	OF THE BATE	K SHAR	E RECEIVED IT	THE FURMULA	ONE
DISTRIBUTION.							
							and the
16 Describe the calculation	of the change is	n basis and the d		calculatio	n, such as the marke TOTAL VALUE	PERCENT	and the
valuation dates ► AVER		* DATE		0000	\$6500.0000	98.2047%	
	65.000	7/20,			\$ 118.8254	1.7953%	
BATRK \$	41.030	7/20,	/23 2.896	10004	A TTO:0704	1.17330	
LAWRENCE OF HIGH	NID TOTA DA	CED					
*AVERAGE OF HIGH A		SED					
ON FIRST DAY OF TR	ADING						

		4 11
Part II	Organizational Action	a (continued)
	Organizational Action	I (COITHINGE)

I7 List th	ne applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is base MULA ONE DISTRIBUTION, TAKEN TOGETHER WITH THE SPLIT-OFF C	of ARH. IS INTENDED TO
THE FOR	MULA ONE DISTRIBUTION, TAKEN TOGETHER WITH THE STEEL OF SERVICE OF	ND ACCORDINGLY FWONA
BE A TA	WILL NOT RECOGNIZE INCOME, GAIN OR LOSS WITH RESPECT TO I	HE FORMULA ONE
NT STRIR	UTION, EXCEPT WITH RESPECT TO CASH RECEIVED IN LIEU OF FRA	CTIONAL SHARES.
UNDER T	RC SECTION 358, THE AGGREGATE BASIS OF A HOLDER'S FWONA SH	IARES AND BATRK
SHARES	THAT WERE RECEIVED BY SUCH HOLDER IN THE FORMULA ONE DISTR	RIBUTION (INCLUDING
ANY FRA	CTIONAL SHARE OF BATRK DEEMED TO BE RECEIVED AND SOLD) IMM	EDIATELY AFTER THE
FORMULA	ONE DISTRIBUTION SHOULD BE THE SAME AS THE HOLDER'S AGGRE	GATE BASIS IN ITS
FWONA S	HARES IMMEDIATELY PRIOR TO THE FORMULA ONE DISTRIBUTION.	
18 Can a	any resulting loss be recognized?	
TF A HC	LDER RECEIVED CASH IN LIEU OF A FRACTIONAL SHARE OF BATRK	IN THE FORMULA ONE
DISTRIE	BUTION, A HOLDER COULD RECOGNIZE A LOSS, SUBJECT TO CERTAIN	LIMITATIONS, TO THE
EXTEND	THE TAX BASIS ALLOCATED TO SUCH FRACTIONAL SHARE EXCEEDS T	SHARE. OTHERWISE,
	HOLDER AS A RESULT OF THE DISPOSITION OF SUCH FRACTIONAL S	MARE. OTHERWISE,
NO LOSS	MAY BE RECOGNIZED	
-		
10 Provi	de any other information necessary to implement the adjustment, such as the reportable tax year	
THE FOR	RMULA ONE DISTRIBUTION WAS EFFECTIVE ON JULY 19, 2023. THE	EREFORE, AN
ADJUSTN	MENT TO BASIS WOULD BE TAKEN INTO ACCOUNT IN THE SHAREHOLDI	ER'S TAX YEAR
II TAHT	NCLUDES JULY 19, 2023 (E.G., THE 2023 TAX YEAR FOR CALENDAR	R YEAR TAXPAYERS).
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state	ements, and to the best of my knowledge and
	belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which	n preparer has any knowledge.
Sign		
Here	Date > 7/	21/23
	Signature Date Date	
	Print your name > 11 Marinno	NIOR VICE PRESIDENT
	Print/Type preparer's name Preparer's signature Date	Check if PTIN
Paid		self-employed
Prepare Use Onl		Firm's EIN
	Firm's address 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service	Phone no. Odden, UT 84201-0054
Sand Form	8937 (including accompanying statements) to: Department of the Treasury, internal nevertibe Service	A MANAGE OF O 1201 2001