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.

SA1-2E Short Form

STATEM	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook b email to:
	ary Transmissions by	DATE RECEIVED	AMOUNT	-
	ems (Short Form)		\$	For additional information,
General instr	uctions are located	08/28/2017		contact the U.S. Copyright Office Licensing Division at:
in the first tab	o of this workbook	00/20/2017	ALLOCATION NUMBER	Tel: (202) 707-8150
Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT: (Y	YYY/(Period))	
	2017/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20	171 Barcode Data Filing Period (optiona	I - see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner or of the subsidiary, not that of the paren	-	diary of another corporation, give the full corp	orate title
Owner	List any other name or names under w	hich the owner conducts the business of th	ne cable system.	
		the accounting period, only the owner on t y fee payment covering the entire account	he last day of the accounting period should su ing period.	bmit a
	Check here if this is the system's first fi	iling. If not, enter the system's ID number a	assigned by the Licensing Division.	063624
	CEQUEL COMMUNICATIONS LLC	ING ADDRESS OF CABLE SYSTEM		
		OF CABLE SYSTEM (IF DIFFERENT))	
1	SUDDENLINK COMMUNICATION	s		
	MAILING ADDRESS OF OWNER	OF CABLE SYSTEM		

INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these

names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.

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 filing, a determination that would be made by a court of law.

3015 S SE LOOP 323

IDENTIFICATION OF CABLE SYSTEM:

MONTGOMERY COUNTY DET MAILING ADDRESS OF CABLE SYSTEM:

(Number, street, rural route, apartment, or suite number)

TYLER, TX 75701

(City, town, state, zip code)

(City, town, state, zip)

(Number, street, rural route, apartment, or suite number)

С

System

1

2

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	063624
D	Instructions: List each separate community served by the cable system. A "commu "a separate and distinct community or municipal entity (including unincorporated of discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you	nity" is the same as a "community unit" as defined in FCC rules: ommunities within unincorporated areas and including single,
	known as the "first community." Please use it as the first community on all future	ilings.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile identified city.	home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	ROCKVILLE	MD
Community	(MONTGOMERY CNTY DET)	
Add Rows as Necessary		
Add nows as necessary		
	การการการการการการการการการการการการการก	

	1							FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:							TEM ID
	CEQUEL COMMUNICAT	TIONS LLC							06362
-	SECONDARY TRANSMISSION	SERVICE: SU	BSCRI	BERS AND RA	ATES				
E	In General: The information in s								
0	system, that is, the retransmission								
Secondary Transmission	about other services (including p last day of the accounting period						iose existi	ng on the	
Service: Sub-	Number of Subscribers: Both						le system.	broken	
scribers and	down by categories of secondary								
Rates	each category by counting the n							charged	
	separately for the particular serv Rate: Give the standard rate c							a and the	
	unit in which it is generally billed								
	category, but do not include disc				ing otaniaal		, mann a p		
	Block 1: In the left-hand block	in space E, the	form lis	sts the categor					
	systems most commonly provide								
	that applies to your system. Note categories, that person or entity								
	subscriber who pays extra for ca								
	first set" and would be counted of								
	Block 2: If your cable system	has rate catego	ries for	secondary tran	nsmission				
	printed in block 1 (for example, t								
	with the number of subscribers a sufficient.	and rates, in the	right-h	and block. A tv	vo- or three	e-word description	on of the s	ervice is	
		OCK 1					BLOCK	ζ2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	RS	RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential:	0020011122						002001102110	
	Service to first set		0	-					
	 Service to additional set(s) 		0	0					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		14	41.89					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	-			-				
F	In General: Space F calls for rat	•	,		•	• •			
•	not covered in space E, that is, t service for a single fee. There ar								
Services	furnished at cost or (2) services	•			•		• • •		
Other Than	amount of the charge and the ur		usually	billed. If any ra	ates are ch	arged on a varia	ble per-pr	ogram basis,	
Secondary	enter only the letters "PP" in the		o ooblo	avotom for og	ob of the c	annliaghla agruig	on lintod		
Fransmissions: Rates	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.								
		BLOC	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:		Installa	tion: Non-res	idential				
	• Pay cable	-	• Mot	el, hotel					
	 Pay cable—add'l channel 	-		nmercial					
	Fire protection			cable					
	•Burglar protection		• Pay	cable-add'l ch	nannel				
	Installation: Residential			protection					
			• Bur	glar protection					
	First set	-							
	 Additional set(s) 		Other s	services:					
				services:		-			
	 Additional set(s) 		• Rec			-			
	Additional set(s)FM radio (if separate rate)		• Rec • Disc	connect					

ne	LEGAL NAME OF OWNER O			SYSTEM ID# 063624
	CEQUEL COMMUNIC			00302-
ary itters: sion	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further informatic Column 1 : List each statio multicast stream associate "WETA-2" as the same on Column 2 : Give the chann of license. For example, W Column 3 : Indicate in each educational station, by ente (for independent multicast) For the meaning of these to Column 4 : Give the location	also in space I, if the station was carrie on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	t (1) stations carried only on a part-ti- he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain stat arried by your cable system on a sub he Special Statement and Program I d both on a substitute basis and also see page (v) of the general instructi- program services such as HBO, ESF e-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indepen- per "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station	ime basis under ams [sections tions carried on a bostitute program Log)—if the p on some other ions. PN, etc. Identify each ort multistream the air in its community in noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WJLA-TV	7	0	WASHINGTON, DC
	WJLA-TV WTTG	7 36	<u> </u>	WASHINGTON, DC WASHINGTON, DC
cessary				
ecessary	WTTG	36	0	WASHINGTON, DC
ecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
ecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
lecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
cessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
ecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
lecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
lecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
lecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
lecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
Necessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
Necessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
Necessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
lecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
Vecessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
Necessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
Necessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
Necessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD
Necessary	WTTG WHAG-TV	36 26	0	WASHINGTON, DC HAGERSTOWN, MD

LEGAL NAME O								SYSTEM 063
	t every radio s	station c) arried on a separate and dis enerally receivable by your c					н
eceivable if (1) on the basis of For detailed inf paper SA1-2 fo Column 1: I Column 2: S Column 3: I signal, indicate	it is carried b monitoring, to prmation abou- rm. dentify the call state whether the radio stat this by placing	y the sy be rece it the C I sign of the stati tion's sig g a chec	II-Band FM Carriage: Under stem whenever it is received eived at the headend, with the opyright Office regulations of each station carried. on is AM or FM. gnal was electronically proce ck mark in the "S/D" column. tion (the community to which	I at the system's e system's FM a n this point, see ssed by the cab	headend, and intenna, during page (v) of the le system as a	(2) it ca g certain e genera separat	an be expected, stated intervals. al instructions in the. te and discrete	Primary Transmitters Radio
Mexican or Car	nadian station:	s, if any	, the community with which th	he station is ider	ntified).	1		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	od: 2017/1						FOR	M SA1-2E. PAGE 5.
News	LEGAL NAME OF OWNER OF	CABLE SYST	TEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LI	_C					063624
	SUBSTITUTE CARRIAGE	: SPECIA		NT AND PROGRAM LO	G			
	In General: In space I, identi		-		-	ion that you	r cable syste	m carried on a
-	substitute basis during the ad							
Substitute	explanation of the programm	ng that mus	t be included in	this log, see page (v) of the	e general instr	uctions in the	e paper SA1	-2 form.
Carriage:	1. SPECIAL STATEMENT		NING SUBST	ITUTE CARRIAGE				
Special Statement and	 During the accounting peri 	od, did you	r cable system	carry, on a substitute bas	is, any nonne	twork televis	sion progran	
Program Log	broadcast by a distant stat	ion?					YES	× NO
	Note: If your answer is "No"	, leave the	rest of this pag	e blank. If your answer is	"Yes," you mu	ist complete	the program	n
	log in block 2.					•		
	2. LOG OF SUBSTITUTE	PROGRA	MS					
	In General: List each subst				wherever pos	sible, if thei	r meaning is	
	clear. If you need more space			ows to the tables. sion program ("substitute	nrogram") tha	t during the	accounting	
	period, was broadcast by a							
	under certain FCC rules, reg	gulations, o	r authorizations	s. See page (v) of the gen	eral instruction	ns for furthe	r information	
	Do not use general categori "NBA Basketball: 76ers vs.		vies" or "baske	tball." List specific program	n titles, for exa	ample, "I Lo	ve Lucy" or	
			lcast live. enter	· "Yes." Otherwise enter "N	No."			
	Column 3: Give the call s	sign of the s	station broadca	sting the substitute progra	ım.			
	Column 4: Give the broat the case of Mexican or Can			e community to which the			FCC or, in	
				tem carried the substitute			with the mor	nth
	first. Example: for May 7 giv	e "5/7."	5 5					
				gram was carried by your				ly
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. sr	nould be	
		er "R" if the	listed program	was substituted for progra	amming that y	our system	was require	d
	to delete under FCC rules a							am
	was substituted for program effect on October 19, 1976.	ming that y	our system wa	s permitted to delete unde	r FCC rules a	nd regulatio	ons in	
					11			1
		דו דו דו די ח				EN SUBSTI		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	E PROGRAM		5. MONTH	IAGE OCC 6. T	IMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то	
							_	
							_	
							_	
								"
					-			
			+		-			
			+		-	·		
							_	
							_	
			†					"
					-			
							_	
							_	
								1
			+					
			L					

Accounting Period:	2017/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
			063624
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	mission servic s amount, see	e 3,570.00
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	this six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	\$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,	100)	
	1. Base amount under statutory formula		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527	(,600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		hts!

Accounting Period:	2017/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 063624
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations on which the cable system carried television broadcast stations and nonbroadcast services	. <u>4</u> . <u>9</u>
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name SARAH BOGUE Telephone	e <u>(903) 579-3121</u>
	Address 3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)	
	TYLER, TX 75701 (City, town, state, zip)	
	Email SARAH.BOGUE@ALTICEUSA.COM Fax (optional)	
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) 	;)
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space	B; or
	 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner is not a corporation). 	
	 in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained hereir are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	-
	Typed or printed name: SABRINA WARR	
	Title: VICE PRESIDENT OF ACCOUNTING (Title of official position held in corporation or partnership)	
	Date: 08/18/2017	

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

unting Period: 2017/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
QUEL COMMUNICATIONS LLC	06362
 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 located in the paper SA1-2 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	P Special Statement Concerning Gross Receipts Exclusion
Name	
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 located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
x	-
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
	-
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	-
Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	-
Line 3 Multiply line 2 by the number of days late and enter the sum here - k - <td>-</td>	-
x	-
Line 3 Multiply line 2 by the number of days late and enter the sum here -	-
Line 3 Multiply line 2 by the number of days late and enter the sum here - - - - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - - x 0.00274 - - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - <td></td>	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x	
Line 3 Multiply line 2 by the number of days late and enter the sum here	

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