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.

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

## SA3E Long Form

Return completed workbook by email to:

## coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	AC	COUNTING PERIOD COVERED BY THIS STATEMENT:				
Accounting Period		2017/1				
B Owner	rate	ructions: Give the full legal name of the owner of the cable system. If the owner is title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owner ngle statement of account and royalty fee payment covering the entire account Check here if this is the system's first filing. If not, enter the system's ID	ess of the cable system for on the last day of the counting period	m e accounting period should s		007704
	LE	GAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
		CEQUEL COMMUNICATIONS LLC				
		SUDDENLINK COMMUNICATIONS				
					00770	420171
					007704	2017/1
		3015 S SE LOOP 323 TYLER, TX 75701				
С		TRUCTIONS: In line 1, give any business or trade names used to i nes already appear in space B. In line 2, give the mailing address or				
System	1	IDENTIFICATION OF CABLE SYSTEM: KINSTON				
		MAILING ADDRESS OF CABLE SYSTEM:				
	2	(Number, street, rural route, apartment, or suite number)				
		(City, town, state, zip code)				
D	Inst	tructions: For complete space D instructions, see page 1b. Identify	only the frst comm	unity served below and rel	ist on page	e 1b
Area	with	all communities.				
Served		CITY OR TOWN	STATE			
First Community		KINSTON	NC			
Community	B	elow is a sample for reporting communities if you report multiple cha	· · · ·			
		CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB	3 GRP#
Sample	Alda	a ance	MD MD	A B		2
	Ger		MD	B		3
form in order to pro numbers. By provic search reports prep	ocess y ding Pll pared f	ion 111 of title 17 of the United States Code authorizes the Copyright Offce to collect our statement of account. PII is any personal information that can be used to identify , you are agreeing to the routine use of it to establish and maintain a public record, v or the public. The effect of not providing the PII requested is that it may delay proces ments of account, and it may affect the legal sufficiency of the fling, a determination t	or trace an individual, so which includes appearing sing of your statement of	uch as name, address and teleph in the Offce's public indexes and account and its placement in the	ione 1 in	

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

08/28/2017

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#			
CEQUEL COMMUNICATIONS LLC			007704			
<b>Instructions:</b> 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 filings.						
<b>Note:</b> 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-commuchannel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber grou					
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	-		
KINSTON	NC			First		
LAGRANGE	NC			Community		
LENOIR COUNTY (PORTION)	NC					
	NC NC					
WAYNE COUNTY (PORTION)	NC					
				See instructions for additional information		
				on alphabetization.		
				Add rows as passage		
				Add rows as necessary.		
				1		


Nama	LEGAL NAME OF OWNER OF CABL	E SYSTEM:									S	YSTEN	I ID
Name	CEQUEL COMMUNICA	TIONS LLC										007	70
-	SECONDARY TRANSMISSION	I SERVICE: SL	JBSCR	IBERS AND R	A	TES							
E	In General: The information in s	•		-			•						
<b>•</b> •	system, that is, the retransmissi												
Secondary Transmission	about other services (including plast day of the accounting period							e ti	hose existi	ng on the			
Service: Sub-								ab	ole svstem	broken			
scribers and	<b>Number of Subscribers:</b> 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												
Rates	each category by counting the n									charged			
	separately for the particular serv												
	Rate: Give the standard rate of unit in which it is generally billed										to		
	category, but do not include disc					iy Stanual		118	s wiu iir a p		le		
	Block 1: In the left-hand block					es of sec	ondary transm	nis	sion servic	e that cable	Э		
	systems most commonly provide												
	that applies to your system. Not												
	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)."												
	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, t										r		
	with the number of subscribers a	and rates, in the	e right-ł	hand block. A t	w	o- or thre	e-word descrip	otio	on of the s	ervice is			
	sufficient.	OCK 1							BLOC	K 2			
		NO. OF	:		-				BLUC	NO. O	)F		
	CATEGORY OF SERVICE	SUBSCRIB		RATE		CATE	EGORY OF SE	EF	RVICE	SUBSCRI		RAT	ſΕ
	Residential:												
	<ul> <li>Service to first set</li> </ul>		7,236	\$ 25.00									
	<ul> <li>Service to additional set(s)</li> </ul>	1	2,461	0									
	<ul> <li>FM radio (if separate rate)</li> </ul>												
	Motel, hotel												
	Commercial		312	\$ 32.20									
	Converter												
	Residential												
	Non-residential												
	SERVICES OTHER THAN SEC				:0								
Б	In General: Space F calls for ra						l vour cable s	vsi	tem's serv	ices that we	ere		
F	not covered in space E, that is, t	•	'			•	, ,						
	service for a single fee. There a												
Services	furnished at cost or (2) services												
Other Than Secondary	amount of the charge and the up		usually	billed. If any ra	at	tes are ch	arged on a va	ria	able per-pr	ogram basi	S,		
ransmissions:		enter only the letters "PP" in the rate column. <b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed.											
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				lis	hed. List	these other se	erv	ices in the	form of a			
	brief (two- or three-word) descrip	ption and inclue	de the ra	ate for each.				T	1				
		BLO					•				CK 2		
	CATEGORY OF SERVICE	RATE		GORY OF SER			RATE		CATEGO	RY OF SEI	RVICE	RAT	ΪE
				ation: Non-res	SIC	dential							
	Continuing Services:	<b>• •</b>		otel, hotel			·····	-					
	• Pay cable	\$ 17.00		-				1					
	Pay cable     Pay cable—add'l channel	\$    17.00 \$    19.00	۰Co	mmercial				•	•••••				
	Pay cable     Pay cable—add'l channel     Fire protection		•Co •Pa	mmercial y cable	L-			•					•••••
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> </ul>		•Co •Pa •Pa	mmercial y cable y cable-add'l cl	ha	annel		•					
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> </ul>	\$ 19.00	•Co •Pa •Pa •Fir	mmercial y cable y cable-add'l cl e protection		annel	······						
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> </ul>	\$ 19.00 \$ 40.00	∙Co ∙Pa ∙Pa ∙Fir ∙Bu	mmercial y cable y cable-add'l cl e protection rglar protectior		annel							
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> </ul>	\$ 19.00	• Co • Pa • Pa • Fir • Bu <b>Other</b>	mmercial y cable y cable-add'l cl e protection rglar protection <b>services:</b>		annel							
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>	\$ 19.00 \$ 40.00	∙Co ∙Pa ∙Pa ∙Fin •Bu <b>Other</b> ∙Re	mmercial y cable y cable-add'l cl e protection rglar protection services: connect		annel	\$ 40.00	•					
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> </ul>	\$ 19.00 \$ 40.00	• Co • Pa • Pa • Fin • Bu <b>Other</b> • Re • Dis	mmercial y cable y cable-add'l cl e protection rglar protection <b>services:</b> connect sconnect		annel		  					
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>	\$ 19.00 \$ 40.00	• Co • Pa • Fir • Bu • Bu • Re • Dis • Ou	mmercial y cable y cable-add'l cl e protection rglar protection services: connect	ı		\$ 40.00 \$ 25.00 \$ 40.00	·· ·· ··					

### ACCOUNTING PERIOD: 2017/1

LEGAL NAME OF OWNE					SYSTEM ID# 007704	Name
PRIMARY TRANSMITTE						+
			tion (including tr	anslator stations a	and low power television stations)	
carried by your cable sy	ystem during th	e accounting	period except (1	) stations carried	only on a part-time basis under	G
0				0	n network programs [section:	Drimon
substitute program basi				(e)(2) and (4))], ar	nd (2) certain stations carried on a	Primary Transmitters:
Substitute Basis St	tations: With re	espect to any	distant stations of	carried by your ca	ble system on a substitute program	Television
basis under specifc FC	, 0			Special Statemer	nt and Program Log)—if the	
station was carried of			it in space i (the	Special Statemen		
	ormation conce				te basis and also on some othe the general instructions located	
		sign. Do not re	port origination	program services	such as HBO, ESPN, etc. Identify	
					on. For example, report multi stream separately; for example	
WETA-simulcast).						
			•		n for broadcasting over-the-air i	
ts community of license on which your cable sys			nnel 4 in Washir	igton, D.C. This m	hay be different from the channe	
Column 3: Indicate	in each case w	hether the sta		· · ·	endent station, or a noncommercia	
	0	· ·	<i>,,</i>		st), "I" (for independent), "I-M	1
for the meaning of thes					nmercial educational multicast) e paper SA3 form	1
Column 4: If the sta	tion is outside	the local servi	ce area, (i.e. "di	stant"), enter "Yes	". If not, enter "No". For an ex-	1
planation of local servic Column 5: If vou ha					paper SA3 form ating the basis on which you	
					ring "LAC" if your cable syster	1
carried the distant static						1
					payment because it is the subjec em or an association representin	1
the cable system and a	primary transm	nitter or an as	sociation repres	enting the primary	r transmitter, enter the designa	1
tion "E" (exempt). For si explanation of these thr					er basis, enter "O." For a furthe	
					to which the station is licensed by th	
					which the station is identifed	
Note: If you are utilizing	g multiple chan	nel line-ups, u	ise a separate s	pace G for each c	hannel line-up.	
		CHANN	EL LINE-UP	AA		
1 CALL	2 B'CAST		-		6 LOCATION OF STATION	-
1. CALL SIGN	2. B'CAST CHANNEL	CHANN 3. TYPE OF	EL LINE-UP 4. DISTANT? (Yes or No)	AA 5. BASIS OF CARRIAGE	6. LOCATION OF STATION	-
		3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	-
SIGN	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN WCTI-HD	CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE		- - -
SIGN WCTI-HD WCTI-MOVIES	CHANNEL NUMBER 12 12	3. TYPE OF STATION N-M I-M	4. DISTANT? (Yes or No) NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC	. See instructions for additional informatior
SIGN WCTI-HD WCTI-MOVIES WCTI-TV	CHANNEL NUMBER 12 12 12	3. TYPE OF STATION N-M I-M N	4. DISTANT? (Yes or No) NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC	
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX	CHANNEL NUMBER 12 12 12 51	3. TYPE OF STATION N-M I-M N I	4. DISTANT? (Yes or No) NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD	CHANNEL NUMBER 12 12 12 51 51	3. TYPE OF STATION I-M I I I-M	4. DISTANT? (Yes or No) NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV	CHANNEL NUMBER 12 12 12 51	3. TYPE OF STATION N-M I-M N I	4. DISTANT? (Yes or No) NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD	CHANNEL NUMBER 12 12 12 51 51	3. TYPE OF STATION I-M I I I-M	4. DISTANT? (Yes or No) NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD	CHANNEL NUMBER 12 12 12 51 51 32	3. TYPE OF STATION I-M I I I-M I-M N-M	4. DISTANT? (Yes or No) NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-HD	CHANNEL NUMBER 12 12 12 51 51 32 32	3. TYPE OF STATION I-M I I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-MNT WITN-TV	CHANNEL NUMBER 12 12 12 51 51 32 32 32	3. TYPE OF STATION I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-MNT	CHANNEL NUMBER 12 12 12 51 51 32 32 32 32 32 32 10	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WEPX-HD WITN-HD WITN-HD WITN-MT WITN-MNT WITN-TV WNCT-CW WNCT-CW HD	CHANNEL NUMBER 12 12 51 51 32 32 32 32 32 10 10	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-HD WITN-METV WITN-METV WITN-MUT WITN-TV WNCT-CW WNCT-CW HD WNCT-CW HD	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-METV WITN-MNT WITN-TV WNCT-CW WNCT-CW HD WNCT-GetTV WNCT-HD	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10 10	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-METV WITN-MNT WITN-TV WNCT-CW WNCT-CW HD WNCT-GetTV WNCT-HD	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-METV WITN-MNT WITN-TV WNCT-CW WNCT-CW HD WNCT-GetTV WNCT-HD	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10 10	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-HD WITN-MNT WITN-MNT WITN-TV WNCT-CW WNCT-CW WNCT-CW WNCT-GetTV WNCT-HD WNCT-TV	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10 10 10 10	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC REW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-TV WITN-TV WNCT-CW WNCT-CW WNCT-CW WNCT-CW WNCT-CW WNCT-TV WNCT-HD WNCT-TV WTMH-ANTENNA	CHANNEL NUMBER 12 12 12 51 51 32 32 32 32 32 10 10 10 10 10 10 21	3. TYPE OF STATION N-M I-M I-M I-M I-M I-M I-M I-M N-M N-M N-M N-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-TV WNCT-CW WNCT-CW WNCT-CW WNCT-CW WNCT-GetTV WNCT-HD WNCT-TV WNCT-TV WNCT-TV WNCT-TV	CHANNEL NUMBER 12 12 12 51 51 32 32 32 32 32 10 10 10 10 10 21 21 21	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-WITN-WITN WITN-TV WNCT-CW WNCT-CW HD WNCT-GetTV WNCT-GetTV WNCT-HD WNCT-HD WNCT-TV WTMH-ANTENNA WTMH-ANTENNA WTMH-HEROS	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10 10 10 21 21 21 21 21	3. TYPE OF STATION I-M I-M I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-TV WITN-TV WNCT-CW WNCT-CW WNCT-CW WNCT-GetTV WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-CW WTMH-ANTENNA WTMH-ANTENNA	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10 10 10 21 21 21 21 21 21 59	3. TYPE OF STATION N-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC KINSTON, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-HD WITN-METV WITN-MNT WITN-TV WNCT-CW WNCT-CW WNCT-CW WNCT-CW WNCT-HD WNCT-HD WNCT-TV WTMH-ANTENNA WTMH-ANTENNA WTMH-HEROS WTMH-LD WUNC-EX	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10 10 10 10 21 21 21 21 21 59 59	3. TYPE OF STATION N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC CHAPEL HILL, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-TV WITN-TV WNCT-CW	CHANNEL NUMBER 12 12 51 51 32 32 32 32 32 10 10 10 10 10 21 21 21 21 21 59 59 59	3. TYPE OF STATION N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC REW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC CHAPEL HILL, NC CHAPEL HILL, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-TV WITN-TV WNCT-CW	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10 10 10 10 21 21 21 21 21 59 59	3. TYPE OF STATION N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC CHAPEL HILL, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WIEPX-HD WITN-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-W WITN-W WITN-W WITN-W WNCT-CW WINC-KIDS2	CHANNEL NUMBER 12 12 51 51 32 32 32 32 32 10 10 10 10 10 21 21 21 21 21 59 59 59	3. TYPE OF STATION N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC REW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC CHAPEL HILL, NC CHAPEL HILL, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-METV WITN-WITN-WITN WITN-TV WNCT-CW WNCT-CW HD WNCT-CW HD WNCT-GetTV WNCT-GetTV WNCT-HD WNCT-HD WINC-ANTENNA WTMH-ANTENNA WTMH-HEROS WTMH-LD WUNC-EX WUNC-KIDS WUNC-KIDS2 WUNC-TV	CHANNEL NUMBER 12 12 51 51 32 32 32 32 32 10 10 10 10 10 10 21 21 21 21 21 21 59 59 59 59	3. TYPE OF STATION N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC CHAPEL HILL, NC CHAPEL HILL, NC	additional information
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SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-MNT WITN-TV WNCT-CW WNCT-CW WNCT-CW WNCT-CW WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-HD WNCT-KIDS WTMH-LD WUNC-KIDS WUNC-KIDS2 WUNC-TV WUNK-HD WUNK-HD	CHANNEL NUMBER 12 12 51 51 32 32 32 32 32 10 10 10 10 10 10 21 21 21 21 21 21 59 59 59 59 59 59 59 59 59	3. TYPE OF STATION N-M I-M N-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC CHAPEL HILL, NC CHAPEL HILL, NC CHAPEL HILL, NC CHAPEL HILL, NC CHAPEL HILL, NC	additional information
SIGN WCTI-HD WCTI-MOVIES WCTI-TV WEPX WEPX-HD WITN-HD WITN-METV WITN-METV WITN-METV WITN-MUT WITN-MUT WITN-TV WITN-TV WNCT-CW WNCT-CW WNCT-CW WNCT-CW WNCT-CW WNCT-GetTV WNCT-GetTV WNCT-GetTV WNCT-HD WNCT-TV WTMH-ANTENNA WTMH-ANTENNA WTMH-HEROS WTMH-LD WUNC-EX WUNC-FU WUNC-KIDS2 WUNC-TV WUNC-TV WUNC-TV	CHANNEL NUMBER 12 12 51 51 32 32 32 32 10 10 10 10 10 10 21 21 21 21 21 21 21 59 59 59 59 59 59 59	3. TYPE OF STATION N-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE (If Distant)	NEW BERN, NC NEW BERN, NC NEW BERN, NC GREENVILLE, NC GREENVILLE, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC WASHINGTON, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC GREENVILLE, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC KINSTON, NC CHAPEL HILL, NC CHAPEL HILL, NC CHAPEL HILL, NC CHAPEL HILL, NC	additional information

	LEGAL NAME OF (	OWNER OF CABL	E SYSTE	И:					SYSTEM ID#
Name	CEQUEL CO		TIONS	LLC					007704
H Primary Transmitters: Radio	all-band basis v Special Instruct receivable if (1) on the basis of For detailed info located in the p Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G	t every radio s whose signals of ctions Concer it is carried by monitoring, to prmation about aper SA3 form dentify the call state whether the the radio stati this by placing Sive the station	tation ca were "ge ning All the syst be receive the the the sign of e he statio on's sigr a check 's locatio	rried on a separate and discre- nerally receivable" by your ca <b>-Band FM Carriage:</b> Under C tem whenever it is received a ved at the headend, with the s Copyright Office regulations of each station carried. n is AM or FM. nal was electronically process is mark in the "S/D" column. on (the community to which the the community with which the	abl Co t tl sy: on sec	le system during ppyright Office re he system's hea stem's FM anter this point, see p d by the cable sy station is license	the accounting egulations, an adend, and (2) ana, during ce bage (vi) of the ystem as a sep ed by the FCC	ng period FM sign it can b rtain sta genera genera	d. al is generally e expected, ted intervals. al instructions nd discrete
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION
					ŀŀ				
					ŀŀ				
					ŀŀ				

	TIONS LL	_C				007704	Name
SUBSTITUTE CARRIAGE	ify every nor	nnetwork televis	ion program broadcast by a	distant station			I
substitute basis during the ac explanation of the programm							Substitute
1. SPECIAL STATEMENT				general mot			Carriage:
<ul> <li>During the accounting peri</li> </ul>	-			s, any nonne	twork television prograr	n	Special Statement an
broadcast by a distant stat	tion?				Yes	XNo	Program Lo
Note: If your answer is "No' og in block 2.	", leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	ist complete the progra	m	
2. LOG OF SUBSTITUTE In General: List each substiclear. If you need more spar Column 1: Give the title of period, was broadcast by a under certain FCC rules, reg SA3 form for futher informati titles, for example, "I Love L Column 2: If the program Column 3: Give the call s Column 4: Give the broa the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules a	titute progra ace, please a of every nor distant stati gulations, o tion. Do nor Lucy" or "NB n was broad sign of the s adcast statio adian statio th and day we "5/7." es when the Example: a er "R" if the and regulatio	m on a separa attach additiona nnetwork televi ion and that you r authorizations t use general c A Basketball: dcast live, enter station broadca on's location (th ons, if any, the c when your syst substitute program program carrie listed program ons in effect du	al pages. ision program (substitute pl ur cable system substituted s. See page (vi) of the gene ategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "N sting the substitute program the community to which the community with which the s tem carried the substitute p gram was carried by your c ed by a system from 6:01:1 was substituted for programing the accounting period;	rogram) that, d for the prog eral instructio "basketball". o." m. station is lice station is iden program. Use sable system. 5 p.m. to 6:2 mming that ye enter the let	during the accounting ramming of another sta ns located in the paper List specific program nsed by the FCC or, in ntified). numerals, with the mo List the times accurate 8:30 p.m. should be our system was require ter "P" if the listed pro	tion nth Iy	
gram was substituted for pro effect on October 19, 1976.		that your syste	em was permitted to delete	1	_		
effect on October 19, 1976.		E PROGRAM		WHE	Ules and regulations in EN SUBSTITUTE IAGE OCCURRED	7. REASON	
effect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	7. REASON FOR DELETION	
ffect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR	EN SUBSTITUTE IAGE OCCURRED	FOR	
ffect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
ffect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
ffect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
ffect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
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effect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
effect on October 19, 1976. S	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
effect on October 19, 1976. S	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
effect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
effect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	
effect on October 19, 1976.	SUBSTITUT	E PROGRAM		WHE CARR 5. MONTH	EN SUBSTITUTE IAGE OCCURRED 6. TIMES	FOR	

FORM SA3E. PAGE 5.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

## ACCOUNTING PERIOD: 2017/1

FORM SA3E. PAGE 6.

Nama	LEGAL NAME OF (	OWNER OF CABLE	SYSTEM:					5	SYSTEM ID#
Name	CEQUEL CO	OMMUNICAT	IONS LLC						007704
J Part-Time Carriage Log	<ul> <li>PART-TIME CARRIAGE LOG</li> <li>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-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.</li> <li>Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.</li> <li>Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.</li> <li>Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."</li> <li>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."</li> <li>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."</li> </ul>								the
			DATES	AND HOURS (	DF F	PART-TIME CAF	RIAGE		
	CALL SIGN	WHEN	CARRIAGE OCCL			CALL SIGN	WHEN	I CARRIAGE OCCL	
	O, LE OTON	DATE	HOUF FROM	rs TO		ON LE CICIT	DATE	HOUF FROM	RS TO
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FORM	SA3E. PAGE 7.			
LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
CE	QUEL COMMUNICATIONS LLC		007704	Name
Inst all a (as i page	DSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amoun mounts (gross receipts) paid to your cable system by subscribers for the system's second dentified in space E) during the accounting period. For a further explanation of how to be (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.	ondar	y transmission service	K Gross Receipts
<ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If yo fee t</li> <li>If yo according</li> </ul>	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: uplete block 1, showing your minimum fee. uplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the and from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable pro- prompanying this form and attach the schedule to your statement of account. rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b	arts o	f the DSE Schedule	L Copyright Royalty Fee
bloc	k 3 below.			
If pa 3 be	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low	entere	ed on line 2 in block	
▶ If pa	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	uld be	e entered on line	
	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.		064 percent of the	
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064		\$ 1,469,244.79	
	Enter the result here.			
	This is your minimum fee.	\$	15,632.76	
Block 2 Block 3	<ul> <li>DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting peri Yes—Complete the DSE schedule.</li> <li>Ine 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</li> </ul>	nn 4, od?	you must check	
	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero		0.00_	
	Line 3. Add lines 1 and 2 and enter here	\$	11,724.57	
Block 4	<ul> <li>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</li> <li>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</li> </ul>	r	<u>\$ 15,632.76</u> 0.00	Cable systems submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)		0.00	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE		\$ 725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	16,357.76	appropriate form for submitting the additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. ( general instructions located in the paper SA3 form for more information.)	See p	age (i) of the	

ACCOUNTING PERI	OD: 2017/1	FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007704
M Channels	CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast st 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	ations 28
	and nonbroadcast services	218
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
for Further Information	Name SARAH BOGUE Telephone 90	3-579-3121
	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)	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regula	itions.
Certifcation	• 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 identifed in line 1 of space B	or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable so in line 1 of space B and that the owner is not a corporation or partnership; or	/stem as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	er of the cable system
	<ul> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.</li> <li>[18 U.S.C., Section 1001(1986)]</li> </ul>	herein
	X /s/ Sabrina Warr	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus co	
	Typed or printed name: SABRINA WARR	
	Title: VICE PRESIDENT OF ACCOUNTING (Title of official position held in corporation or partnership)	
	Date: August 18, 2017	

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

FORM	SA3E	PAGE9
	JAJL.	I AULS

LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007704	Name
SPECIAL STATEMENT CONCERNING GROSS RI The Satellite Home Viewer Act of 1988 amended Title 17, sect lowing sentence: "In determining the total number of subscribers and the service of providing secondary transmissions of primary scribers and amounts collected from subscribers receiv For more information on when to exclude these amounts, see paper SA3 form.	tion 111(d)(1)(A), of the Copyright Act by adding the fol- e gross amounts paid to the cable system for the basic y broadcast transmitters, the system shall not include sub- ving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any made by satellite carriers to satellite dish owners?		
YES. Enter the total here and list the satellite carrier(s) be Name Mailing Address	Plow	
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments For an explanation of interest assessment, see page (viii) of th		Q
Line 1 Enter the amount of late payment or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum h	here	
Line 3 Multiply line 2 by the number of days late and enter the		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, b space L, (page 7)		
* To view the interest rate chart click on <i>www.copyright.go</i> contact the Licensing Division at (202) 707-8150 or licen:		
** This is the decimal equivalent of 1/365, which is the inter-	erest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of please list below the owner, address, first community served, a filing.		
OwnerAddress		
First community served Accounting period		
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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.

#### INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carriec 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 LISTEE IN SPACE G OF SA3E (LONG FORM)

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

Independent: its type-value is	1.00
• Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that 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 sover the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

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

#### TOTAL OF DSEs

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

#### THE ROYALTY FEE

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

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

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, 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 sys-

tems 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, noncommercial educational, or regular independent station for which *a* quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

## DSE SCHEDULE. PAGE 11.

## COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distantthat 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 DSF 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.

TOTAL DSEs

5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.

6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

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

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

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

CITY

Santa Rosa

Bodega Bay

Rapid City

Fairvale

DSE

1.0

1.0

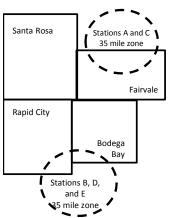
0.083

0.139

0.25

2.472

Distant Stations Carried STATION In most cases under current FCC rules, all of Fairvale would be within A (independent) B (independent) the local service area of both stations C (part-time) A and C and all of Rapid City and Bo-D (part-time) dega Bay would be within the local E (network) service areas of stations B, D, and E.



Minimum Fee Total Gross F	Receipts	\$600,000.00				
		x .01064				
		\$6,384.00				
First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)		
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00	
DSEs	2.472	DSEs	1.083	DSEs	1.389	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80	
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	

Identification of Subscriber Groups

OUTSIDE LOCAL

Stations A and C

Stations A and C

Stations B. D. and E

TOTAL GROSS RECEIPTS

SERVICE AREA OF

Stations A, B, C, D ,E

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

GROSS RECEIPTS

\$310,000.00

100,000.00

70,000.00

120,000.00

\$600,000.00

FROM SUBSCRIBERS

## DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#CEQUEL COMMUNICATIONS LLC007704									
	SUM OF DSEs OF CATEGORY "O" STATIONS:         • Add the DSEs of each station.         Enter the sum here and in line 1 of part 5 of this schedule.         0.75									
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5									
Computation of DSEs for	of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom- mercial educational station, give the DSE as ".25."									
Category "O" Stations	CALL SIGN	DSE	CATEGORY "O" STATION CALL SIGN	DSES	CALL SIGN	DSE				
Stations	WUNC-EX	0.250	CALL SIGN	DSE	CALL SIGN	DSE				
	WUNC-KIDS	0.250								
	WUNC-TV	0.250								
		0.230								
Add rows as										
necessary.										
Remember to copy										
all formula into new										
rows.										
	[	<u> </u>								

	CEQUEL CO	OWNER OF CABLE SYSTEM:	C				Ş	O0770
<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 be carried out Column 4 give the type- Column 6	<b>: CAPACITY</b> ist the call sign of all dista 2: For each station, give t correspond with the infor 3: For each station, give t 4: Divide the figure in colu t at least to the third decir 5: For each independent totalue as ".25." 6: Multiply the figure in co point. This is the station's	he number of mation given he total numb umn 2 by the f nal point. This station, give the lumn 4 by the	hours your cable syst in space J. Calculate of er of hours that the sta igure in column 3, and s is the "basis of carria he "type-value" as "1.0 figure in column 5, ar	em carried the sta only one DSE for ation broadcast o d give the result in ge value" for the ." For each netwo	ation during the accou each station. ver the air during the decimals in column 4 station. ork or noncommercial in column 6. Round to	accounting period. 4. This figure must educational station, o no less than the	
Capacity		C	ATEGORY	LAC STATIONS	: COMPUTAT	ION OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTE	JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS O CARRIAG VALUE		PE 6. DA	SE
							=	
			÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
	Was carried tions in efferences     Broadcast of	ve the call sign of each st d by your system in subst ect on October 19, 1976 ( one or more live, nonnetw	itution for a pr as shown by f	ogram that your syste the letter "P" in columr	m was permitted n 7 of space I); ar	to delete under FCC	rules and regular-	
- Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4:	d by your system in subst ect on October 19, 1976 (	itution for a pr as shown by to ork programs of number of liv spond with the s in the calence on 2 by the fig	ogram that your syste the letter "P" in column during that optional car e, nonnetwork program a information in space lar year: 365, except in ure in column 3, and c	m was permitted n 7 of space I); ar rriage (as shown b ms carried in sub I. n a leap year. give the result in c	to delete under FCC d y the word "Yes" in colu stitution for programs column 4. Round to no	rules and regular- imn 2 of that were deleted b less than the third	ırm).
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- Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN	d by your system in subst ect on October 19, 1976 ( one or more live, nonnetw For each station give the This figure should corres Enter the number of days Divide the figure in colum This is the station's DSE SU 2. NUMBER OF PROGRAMS	itution for a pr as shown by to ork programs of number of liv spond with the s in the calence in 2 by the fig (For more info BSTITUTE 3. NUMB OF DA' IN YEA	ogram that your syste       the letter "P" in column       during that optional car       e, nonnetwork program       a information in space       a information in space       lar year: 365, except in       ure in column 3, and go       pormation on rounding,       -BASIS STATION       ER     4. DSE       YS       R	m was permitted n 7 of space I); ar rriage (as shown b ms carried in sub- I. n a leap year. give the result in c see page (viii) of NS: COMPUT. 1. CALL SIGN	to delete under FCC d y the word "Yes" in colu- stitution for programs column 4. Round to no the general instructio ATION OF DSES 2. NUMBER OF PROGRAM	rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S INUMBER OF DAYS IN YEAR + +	4. DS
- Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN	d by your system in subst ect on October 19, 1976 ( one or more live, nonnetw For each station give the This figure should corres Enter the number of days Divide the figure in colum This is the station's DSE SU 2. NUMBER OF PROGRAMS	itution for a pr as shown by to ork programs of number of liv spond with the s in the calence in 2 by the fig (For more info BSTITUTE 3. NUMB OF DA' IN YEA	ogram that your syste       the letter "P" in column       during that optional car       e, nonnetwork program       a information in space       a information in space       lar year: 365, except in       ure in column 3, and go       pormation on rounding,       -BASIS STATION       ER     4. DSE       YS       R	m was permitted n 7 of space I); ar rriage (as shown b ms carried in sub- I. n a leap year. give the result in c see page (viii) of NS: COMPUT. 1. CALL SIGN	to delete under FCC d y the word "Yes" in colu stitution for programs column 4. Round to no the general instructio ATION OF DSEs 2. NUMBER OF PROGRAM	rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S INUMBER OF DAYS IN YEAR	4. DS
- Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN SIGN SUM OF DSEs Add the DSEs	d by your system in subst ect on October 19, 1976 ( one or more live, nonnetw For each station give the This figure should corres Enter the number of days Divide the figure in colum This is the station's DSE SU 2. NUMBER OF PROGRAMS	itution for a pr as shown by f ork programs of number of liv spond with the s in the calenci in 2 by the fig (For more info BSTITUTE 3. NUMB OF DA' IN YEA IN YEA	ogram that your syste the letter "P" in column during that optional car e, nonnetwork program e information in space lar year: 365, except in ure in column 3, and g ormation on rounding, -BASIS STATION ER 4. DSE R = = = = = = = =	m was permitted a 7 of space I); ar riage (as shown b ms carried in sub- l. a leap year. give the result in c see page (viii) of NS: COMPUT, 1. CALL SIGN	to delete under FCC d y the word "Yes" in colu- stitution for programs column 4. Round to no the general instructio ATION OF DSES 2. NUMBER OF PROGRAM	rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S NUMBER OF DAYS IN YEAR + +	4. DS
- Computation of DSEs for Substitute-	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN SIGN SUM OF DSEs Add the DSEs Enter the su TOTAL NUMBI	d by your system in subst ect on October 19, 1976 ( one or more live, nonnetw For each station give the This figure should corres Enter the number of days Divide the figure in colun This is the station's DSE SU 2. NUMBER OF PROGRAMS # # # # # # # # # # # # # # # # # # #	itution for a pr as shown by f ork programs of number of liv spond with the s in the calence in 2 by the fig (For more info BSTITUTE 3. NUMB OF DA' IN YEA IN YEA IS STATIONS art 5 of this so	ogram that your system         the letter "P" in column         the letter "P" in column         during that optional car         e, nonnetwork program         e information in space         lar year: 365, except in         urre in column 3, and gormation on rounding,         -BASIS STATION         ER         4. DSE         R         = <td< td=""><td>m was permitted n 7 of space I); ar riage (as shown b ms carried in sub- l. n a leap year. give the result in c see page (viii) of NS: COMPUT. 1. CALL SIGN</td><td>to delete under FCC d y the word "Yes" in colu- stitution for programs column 4. Round to no the general instruction ATION OF DSES 2. NUMBER OF PROGRAM</td><td>rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S INUMBER OF DAYS IN YEAR ÷ ÷ ÷</td><td>4. DS</td></td<>	m was permitted n 7 of space I); ar riage (as shown b ms carried in sub- l. n a leap year. give the result in c see page (viii) of NS: COMPUT. 1. CALL SIGN	to delete under FCC d y the word "Yes" in colu- stitution for programs column 4. Round to no the general instruction ATION OF DSES 2. NUMBER OF PROGRAM	rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S INUMBER OF DAYS IN YEAR ÷ ÷ ÷	4. DS
Computation of DSEs for Substitute- Basis Stations	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN SUM OF DSEs Add the DSEs Enter the su TOTAL NUMBI number of DSE	d by your system in subst ect on October 19, 1976 ( one or more live, nonnetw For each station give the This figure should corres Enter the number of days Divide the figure in colum This is the station's DSE SU 2. NUMBER OF PROGRAMS # * * * * * * * * * * * * * * * * * *	itution for a pr as shown by f ork programs of number of liv spond with the s in the calence in 2 by the fig (For more info BSTITUTE 3. NUMB OF DA' IN YEA IN YEA IS STATIONS art 5 of this so	ogram that your system         the letter "P" in column         the letter "P" in column         during that optional car         e, nonnetwork program         e information in space         lar year: 365, except in         urre in column 3, and gormation on rounding,         -BASIS STATION         ER         4. DSE         R         = <td< td=""><td>m was permitted n 7 of space I); ar riage (as shown b ms carried in sub- l. n a leap year. give the result in c see page (viii) of NS: COMPUT. 1. CALL SIGN</td><td>to delete under FCC d y the word "Yes" in colu- stitution for programs column 4. Round to no the general instruction ATION OF DSES 2. NUMBER OF PROGRAM</td><td>rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S INUMBER OF DAYS IN YEAR ÷ ÷ ÷</td><td>4. DS</td></td<>	m was permitted n 7 of space I); ar riage (as shown b ms carried in sub- l. n a leap year. give the result in c see page (viii) of NS: COMPUT. 1. CALL SIGN	to delete under FCC d y the word "Yes" in colu- stitution for programs column 4. Round to no the general instruction ATION OF DSES 2. NUMBER OF PROGRAM	rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S INUMBER OF DAYS IN YEAR ÷ ÷ ÷	4. DS
Computation of DSEs for Substitute- Basis Stations	Column 1: Giv • Was carried tions in effe • Broadcast of space I). Column 2: at your option. Column 3: Column 4: decimal point. 1. CALL SIGN SUM OF DSEs Add the DSEs Enter the su TOTAL NUMBI number of DSE 1. Number of	d by your system in subst ect on October 19, 1976 ( one or more live, nonnetw For each station give the This figure should corres Enter the number of days Divide the figure in colum This is the station's DSE SU 2. NUMBER OF PROGRAMS 2. NUMBER of PROGRAMS 4 5 OF SUBSTITUTE-BAS of each station. um here and in line 3 of p ER OF DSEs: Give the am s applicable to your system	itution for a pr as shown by f ork programs of number of liv spond with the s in the calence in 2 by the fig (For more info BSTITUTE 3. NUMB OF DA' IN YEA IN YEA IS STATIONS art 5 of this so	ogram that your system         the letter "P" in column         the letter "P" in column         during that optional car         e, nonnetwork program         e information in space         lar year: 365, except in         urre in column 3, and gormation on rounding,         -BASIS STATION         ER         4. DSE         R         = <td< td=""><td>m was permitted n 7 of space I); ar riage (as shown b ms carried in sub- l. n a leap year. give the result in c see page (viii) of NS: COMPUT. 1. CALL SIGN</td><td>to delete under FCC d y the word "Yes" in colu- stitution for programs column 4. Round to no the general instruction ATION OF DSES 2. NUMBER OF PROGRAM</td><td>rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S 1. NUMBER OF DAYS IN YEAR + + + + + + + 00</td><td>4. DS</td></td<>	m was permitted n 7 of space I); ar riage (as shown b ms carried in sub- l. n a leap year. give the result in c see page (viii) of NS: COMPUT. 1. CALL SIGN	to delete under FCC d y the word "Yes" in colu- stitution for programs column 4. Round to no the general instruction ATION OF DSES 2. NUMBER OF PROGRAM	rules and regular- imn 2 of that were deleted b less than the third ns in the paper SA3 for S 1. NUMBER OF DAYS IN YEAR + + + + + + + 00	4. DS

LEGAL NAME OF C	WNER OF CABLE	SYSTEM:					S	YSTEM ID#	
CEQUEL COM	MUNICATION	S LLC						007704	Name
Instructions: Bloo	ck A must be com	pleted.							
• If your answer if schedule.	"Yes," leave the re	emainder of p	oart 6 and part	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6
If your answer if	"No," complete blo								0
									Computation of 3.75 Fee
effect on June 24,	1981?			aller markets as de				gulations in	
	plete part 8 of the			PLETE THE REMA	AINDER OF F	ART 6 AND 7			
		BLOC	K B: CARR		MITTED DS	Es			
Column 1:	List the call signs	s of distant st	ations listed in	part 2, 3, and 4 of	this schedule	hat your sys	tem was permitte	d to carry	
CALL SIGN	under FCC rules	and regulation of the second sec	ons prior to Jui dule. (Note: Th	ne 25, 1981. For fu ne letter M below r	urther explana	ation of permit	ed stations, see the	ne	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru	les and regu	lations cited be	isis on which you c elow pertain to tho irket quota rules [7	se in effect o	n June 24, 198		tc	
GANNAGE	B Specialty stati C Noncommeric	al educationa d station (76.6	al station [76.5 65) (see parag	76.59(d)(1), 76.61( 9(c), 76.61(d), 76.0 Jraph regarding sul	63(a) referring	g to 76.61(d)			
	E Carried pursus *F A station pre	ant to individu viously carrie JHF station w	ual waiver of F ed on a part-tin rithin grade-B o	ne or substitute ba contour, [76.59(d)(			ferring to 76.61(e)	(5)	
Column 3:		e stations ide	ntified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on page	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WUNC-EX	М	0.25							
WUNC-KID	M	0.25							
WUNC-TV	С	0.25							
							+		
								0.75	
		В	LOCK C: CO	MPUTATION OF	- 3.75 FEE				
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule				0.75	
Line 2: Enter the	sum of permitte	d DSEs fror	n block B ab	ove				0.75	
Line 3: Subtract (If zero, I				r of DSEs subjec 7 of this schedu		rate.		0.00	
Line 4: Enter gro	oss receipts from	space K (p	age 7)				<u>.</u>	375	Do any of the DSEs represent
Line 5: Multiply li	ine 4 by 0.0375	and enter su	ım here						partially permited/ partially
Line 6: Enter tota	al number of DS	Es from line	3				x	_	nonpermitted carriage? If yes, see part
			-						9 instructions.
Line 7: Multiply li	ine 6 by line 5 a	nd enter her	e and on line	2, block 3, space	e L (page 7)		<u> </u>	0.00	

DSE SCHEDULE. PAGE 13.

							DSE SCHEDULE. PAGE 14.			
Name	LEGAL NAME OF OWN	NER OF CABLE SYSTE	M:				SYSTEM ID#			
Name	CEQUEL COM	MUNICATIONS L	_C				007704			
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	<ul> <li>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 stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.</li> <li>Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule</li> <li>Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981</li> <li>Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1)</li> <li>Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters</li> <li>(Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.</li> <li>A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, section: 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)).</li> <li>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)).</li> <li>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.</li> <li>Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule</li> <li>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 enterer in block B, column 3 of part 6 for this station.</li> <li>IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verifcation from the designated statement of account on fle in the Licensing Division.</li> </ul>									
							1			
	1 0 4 1	1				ID SUBSTITUTE BASIS				
	1. CALL	2. PRIOR DSE	3. ACCO		4. BASIS OF	5. PRESENT DSE	6. PERMITTED DSE			
	SIGN	DSE	PER	IOD	CARRIAGE	DSE	DSE			
			•••••••••••••••••••••••••••••••••••••••							
			-							
			•••••••••••••••••••••••••••••••••••••••							
			-+							
7 Computation of the Syndicated Exclusivity Surcharge	Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. BLOCK A: MAJOR TELEVISION MARKET • 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? X Yes—Complete blocks B and C. X No—Proceed to part 8									
	BLOCK B: C	arriage of VHF/Grade	B Contour St	ations	BLOCK	C: Computation of Exe	mpt DSEs			
		ion that places a grad ble system? tation below with its app	e B contour, ir	n whole	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refe to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE					
	X No—Enter zero a	and proceed to part 8.			X No—Enter zero a	nd proceed to part 8.				
				DOG						
	CALL SIGN	DSE CA	LL SIGN	DSE	CALL SIGN	DSE CALL S	IGN DSE			
		······								
		······								
						<mark></mark>				
						<mark></mark>	·····			
		·····								
		······								
		↓↓		0.00		<u>↓                                      </u>				
		TO	TAL DSEs	0.00		TOTAL	DSEs 0.00			

L

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007704	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,469,244.79	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?     Yes—Complete part 9 of this schedule.     X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	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	Yes—Complete part 9 of this schedule.		
	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)	SE	
	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		

## ACCOUNTING PERIOD: 2017/1

Name		ME OF OWNER OF CABLE SYSTEM: S	ULE. PAGE 16. SYSTEM ID# 007704
		CEQUEL COMMUNICATIONS LLC	007704
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) )	
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in	
		section 2) and enter here.	_
		F. Multiply line D by line E and enter here▶ \$	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	
8		ctions: nust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part	t
0		checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation		an answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	<ul> <li>If you blank</li> </ul>	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	N
Dase Rale Fee		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	service	e area," see page (v) of the general instructions.	
		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?	
	[	Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	<u>)</u>
	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.)	<b>'</b> 5
	Section		<u> </u>
	3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.	
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	_
		(the amount in section 1) 11,724.57	7
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)▶ <b>\$ 10,299.41</b>	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	
		Base Rate Fee	11,724.57

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nome
CEQL	IEL COMMUNICATIONS LLC 007704	Name
0		
Section 4	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.	•
-	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)► \$	Computation of
		Base Rate Fee
	C. Multiply line B by 3.000 and enter here	
	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 5 0.00	
	<b>TANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	
Space		9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this	of
exclusio	on, you must:	Base Rate Fee
	ivide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of nd the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity
	Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
•	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 must	for Partially
also co	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However,	Distant
if your o	cable system is wholly located outside all major television markets, complete block A only.	Stations, and
	Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted
	For each community served, determine the local service area of each wholly distant and each partially distant station you	Stations
	to that community.	
-	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by	
	he token, the station is distant to the subscriber.)	
•	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
	ber 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.	
•		
groups.	ting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber	
	section:	
• Identii	y the communities/areas represented by each subscriber group.	
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the	
	bers in the group.	
• lf:		
	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, f this schedule; or,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B,	
	6 of this schedule.	
• Add th	e DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	ate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions	
	paper SA3 form.	
	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding n making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total	
	or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your	
	alculations on the form.	

Name		STEM II
	CEQUEL COMMUNICATIONS LLC	0077
	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 0 used in store 1 and 2 must equal the amount reported in append K.	
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K. <b>Step 3:</b> 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	9
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement	
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	
	······································	

LEGAL NAME OF OWNE						SYS	STEM ID# 007704	Name
BL				TE FEES FOR EACH				
	FIRST	SUBSCRIBER GROU	P		SECOND	SUBSCRIBER GROUP	)	9
COMMUNITY/ AREA				COMMUNITY/ AREA				Computation
CALL SIGN DSE CALL SIGN DSE				CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
						_		Distant
						_		Stations
Total DSEs	••		0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	Р					
COMMUNITY/ AREA				COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourth	Group	\$	0.00	
	se Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. ter here and in block 3, line 1, space L (page 7) \$ 0.00							

LEGAL NAME OF OW							6YSTEM ID# 007704	Name
				ATE FEES FOR EACH				
FIRST SUBSCRIBER GROUP			SECOND SUBSCRIBER GROUP			OUP	9	
COMMUNITY/ AREA			COMMUNITY/ AREA				_	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
								Base Rate
								and
								Syndicate
								Exclusivi
						•		Surcharg
						•		for Dortiolly
								Partially Distant
	•••••					•		Stations
		]						
			<mark></mark>					
						11		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group		<u>\$ 0.00</u>		Gross Receipts Second Group		<u>\$</u>	0.00	
ase Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	OUP		FOURTH	I SUBSCRIBER GRC	)UP	
OMMUNITY/ ARE	Α			COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	•••••							
						•		
	<mark></mark>							
Total DSEs 0.00		0.00	Total DSEs			0.00		
Gross Receipts Third Group		<u>\$ 0.00</u>		Gross Receipts Fourth Group		\$ 0.00		
Base Rate Fee Third Group		\$	0.00 Base Rate Fee Fourth Gr		h Group	\$ 0.00		
				Ш				
			scriber group	as shown in the boxes	above.			
ter here and in bl	ock 3, line 1,	space L (page 7)				\$	0.00	

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E, PAGE 20. SYSTEM ID#						
Name	CEQUEL COMMUNICATIONS LLC	007704						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP							
9	If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:							
Computation of	☐ First 50 major television market	Second 50 major television market						
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commerce	ial VHF Grade B contour stations listed in block A, part 9 of						
Syndicated Exclusivity Surcharge for Partially Distant Stations	<ul> <li>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 Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul>							
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP						
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs						
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs						
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation						
	SYNDICATED EXCLUSIVITY SURCHARGE First Group	SYNDICATED EXCLUSIVITY SURCHARGE Second Group						
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP						
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs						
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation						
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group	SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group						
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7							