This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1)

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
02/28/2018	\$ ALLOCATION NUMBER						

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	ACC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20172 Barcode Data Filing Period (optional - see instructions)
Accounting Period		
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		CEQUEL COMMUNICATIONS LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		SUDDENLINK COMMUNICATIONS
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)
		TYLER, TX 75701 (City, town, state, z/p)
•	INSTR	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
С	names	s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
		NELSON TWP, OH
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(manager should read apparation)
		(City, town, state, zip code)

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

accounting Period:	2017/2	FORM SA1-2E. PAGE 1b
_	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	033571
	Instructions: List each separate community served by the cable system. A "community	
D	"a separate and distinct community or municipal entity (including unincorporated comdiscrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho	nmunities within unincorporated areas and including single, twill serve as a form of system identification hereafter known
Area Served	identified city.	nne parks strouid be reported in parentneses below the
	CITY OR TOWN	STATE
First	NELSON TWP	OH
Community	AUBURN TWP & AUBURN	OH
	BLUE WATER MANOR	ОН
Add Rows as Necessary	BRACEVILLE TWP	ОН
	BRAINBRIDGE TWP	ОН
	BURTON TWP & PUNDERSON	ОН
	FARMINGTON TWP	ОН
	FREEDOM TWP	ОН
	MIDDLEFIELD	ОН
	NEWBURY	ОН
	NEWTON	ОН
	PALMYRA	ОН
	PARIS TWP	ОН
	PARKMAN	ОН
	SHALERSVILLE	ОН
	TROY TWP	ОН

Accounting Period: 2017/2 FORM SA1-2F PAGE 2 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 033571

E

Secondary **Transmission** Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

CEQUEL COMMUNICATIONS LLC

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BL	OCK 1		BLOCK 2				
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE		
Residential:							
 Service to first set 	1,158	22.99					
 Service to additional set(s) 	2,038	0					
 FM radio (if separate rate) 							
Motel, hotel							
Commercial	5	35.21					
Converter							
 Residential 							
 Non-residential 							
		T I			I		

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

BLOCK 1				BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
 Pay cable 	17.00	Motel, hotel			
 Pay cable—add'l channel 		Commercial			
 Fire protection 		• Pay cable			
 Burglar protection 		Pay cable-add'l channel			
Installation: Residential		Fire protection			
 First set 	40.00	Burglar protection			
 Additional set(s) 		Other services:			
• FM radio (if separate rate)		Reconnect	40.00		
Converter		Disconnect			
		Outlet relocation	25.00		
		Move to new address	40.00		
					l

Accounting Period: 2017/2 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 033571

CEQUEL COMMUNICATIONS LLC

G

Primary
Transmitters:
Television

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

Column 1: List each station's call sign. *Do not* report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.

Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Add Rows as Necessary

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WBNX-TV	30	l	AKRON, OH
WBNX-HD	30	I-M	AKRON, OH
WDLI-TV	49	I	CANTON, OH
WEWS-TV	15	N	CLEVELAND, OH
WEWS-HD	15	N-M	CLEVELAND, OH
WFMJ-CW	20	I-M	YOUNGSTOWN, OH
WFMJ-HD	20	I-M	YOUNGSTOWN, OH
WFMJ-TV	20	N	YOUNGSTOWN, OH
WJW-ANTENNA	8	I-M	CLEVELAND, OH
WJW	8	I	CLEVELAND, OH
WJW-HD	8	I-M	CLEVELAND, OH
WKBN-TV	41	N	YOUNGSTOWN, OH
WKBN-HD	41	N-M	YOUNGSTOWN, OH
WKYC-WEATHER	17	I-M	CLEVELAND, OH
WKYC-HD	17	N-M	CLEVELAND, OH
WKYC-TV	17	N	CLEVELAND, OH
WNEO	45	E	ALLIANCE, OH
WOIO	10	N	SHAKER HEIGHTS, OH
WOIO-HD	10	N-M	SHAKER HEIGHTS, OH
WQHS-TV	34	I	CLEVELAND, OH
WRLM	47	1	CANTON, OH
WUAB	28	I	LORAIN, OH
WVIZ	26	E	CLEVELAND, OH
WVIZ-HD	26	E-M	CLEVELAND, OH
WVPX-HD	23	I-M	AKRON, OH

Accounting Period: 2017/2

| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#
| CEQUEL COMMUNICATIONS LLC 033571

G

PRIMARY TRANSMITTERS: TELEVISION

substitute program basis, as explained in the next paragraph.

Primary Transmitters: Television

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

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

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

Column 1: List each station's call sign. *Do not* report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.

Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WVPX	23		AKRON, OH
WYFX-HD	19	I-M	YOUNGSTOWN, OH
WYFX-LD	19	<u>l</u>	YOUNGSTOWN, OH
WYTV	36	N	YOUNGSTOWN, OH
WYTV-BOUNCE	36	I-M	YOUNGSTOWN, OH
WYTV-HD	36	N-M	YOUNGSTOWN, OH

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

CEQUEL COMMUNICATIONS LLC

033571

PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

Column 1: Identify the call sign of each station carried.

Column 2: State whether the station is AM or FM.

Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
		 					
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Accounting Perio	d: 2017/2						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	ГЕМ:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LI	_C					033571
l	SUBSTITUTE CARRIAGE In General: In space I, identi substitute basis during the a	fy every nor	nnetwork televis eriod, under spe	sion program, broadcast becific present and former F	y a <i>distant</i> stat CC rules, regu	lations, or au	ıthorizations.	For a further
Substitute	explanation of the programm				ne general insti	uctions in th	e paper SAT	-2 101111.
Carriage: Special	1. SPECIAL STATEMENT							
Statement and	During the accounting period	•	r cable system	carry, on a substitute ba	sis, any nonne	twork televis		
Program Log	broadcast by a distant stat	tion?					YES	× NO
	Note: If your answer is "No"	, leave the	rest of this pag	ge blank. If your answer is	"Yes," you m	ust complete	the prograr	m
	log in block 2.							
	2. LOG OF SUBSTITUTE In General: List each subst clear. If you need more space Column 1: Give the title period, was broadcast by a under certain FCC rules, rep Do not use general categori "NBA Basketball: 76ers vs. Column 2: If the progran Column 3: Give the call s Column 4: Give the broad the case of Mexican or Can the case of Mexican or Can Golumn 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 lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	itute progra ce, please a of every no distant stati gulations, o es like "mo Bulls." n was broad sign of the s idcast static adian static th and day re "5/7." es when the Example: a er "R" if the ind regulatio	m on a separa add additional ranetwork televition and that yo rauthorizations vies" or "baske deast live, enterestation broadca on's location (thins, if any, the owner your system of program carried listed program ons in effect du	rows to the tables. ision program ("substitute ur cable system substitutes. See page (v) of the gentball." List specific program "Yes." Otherwise enter "asting the substitute program community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01 was substituted for programing the accounting period	e program") that ed for the program titles, for ex (No." am. e station is lice a program. Use a cable system (15 p.m. to 6:2 tramming that y d; enter the left	ent, during the gramming of ns for furthe ample, "I Lo ensed by the ntified). List the time 28:30 p.m. slewour system the "P" if the	e accounting another state information over Lucy" or e FCC or, in with the mornes accurate hould be was require elisted progr	tion n. nth ly
								T
				_		EN SUBSTI		
	S		E PROGRAM	1		IAGE OCC		7. REASON FOR DELETION
	TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM	TIMES — TO	BELETION
		162 01 140	CALL SIGN	4. STATION S LOCATION	AND DAT	I KOW		
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LEGAL NAME OF OWN	IER OF CARLES	YSTEM:						9	SYSTEM II
								•	03357
Instructions: The all amounts (gross (as identified in sp page (vii) of the ge Gross receipt	figure you gi s receipts) pa ace E) during eneral instruc s from subsc	id to your ca g the accoun tions located ribers for se	ible system by iting period. F d in the paper condary trans	y subscribers or a further SA1-2 form smission serv	s for the explana vice(s)	system's tion of ho	s secondary tr ow to compute	ansmission serv this amount, se	ice
								•	ross receipts)
Instructions: To con Complete block 1, Use block 1 if the Use block 2 if the Use block 3 if the	mpute the roy block 2, or lamount of gramount of gramo	block 3. oss receipts oss receipts oss receipts	in space K is in space K is in space K is	more than \$ more than \$	\$137,100 \$263,800	but less	than \$527,60		
		BLOCK	1: GROSS F	RECEIPTS	OF \$13	7,100 OF	RLESS		
		vith gross rec	eipts of \$137,	100 or less, t	the royal	ty fee that	t you must pay	for this six-month	1
Line 1. Royalty fee	for accounting	a period							
									0.00
Line 2. Interest cha	ige. Enter th	s amount noi	II lille 4, space	e Q, page 6 .				· ·	0.00
Line 3. TOTAL RO	YALTY FEE I	PAYABLE FO	OR ACCOUNT	TING PERIO	D Add li	nes 1 and	12		
						,		37,100)	
								00_	
		•			•		•	<u>81 </u>	
3. Subtract line 2 fr	om line 1					\$	38,067.	19_	
	•							225,732.81	•
								38,067.19	•
									938.33
8. Interest charge.	Enter the am	ount from line	4, space Q, p	page 8					0.00
9. TOTAL ROYAL	TY FEE PAY	ABLE FOR A	CCOUNTING	PERIOD. Ad	ld lines 7	and 8		· · · <u>\$</u>	938.33
	BLOCK 3:	GROSS RE	CEIPTS OF	MORE TH	AN \$26	3,800 (bu	ut less than \$	527,600)	
1. Enter the amoun	t of gross rece	eipts from sp	ace K						
2. Base amount un	der statutory f	ormula				\$	263,800.0	00	
3. Subtract line 2 fr	om line 1								
4. Multiply line 3 by	.01						<u> </u>		
5. Royalty due on t	he first \$263,8	300 of gross	eceipts (unde	r statutory for	rmula) .		\$	1,319.00	
6. Interest charge.	Enter the am	ount from line	4, space Q,	page 8				0.00	
7. TOTAL ROYAL	TY FEE PAYA	ABLE FOR A	CCOUNTING	PERIOD. Ac	ld lines 4	I, 5, and 6	S		
	-	II ING FEE	AND TOTAL	DEMITTAN	NCE DI	IE			
		ILINOTEL	71110 10171		TOL DO	<u>/L</u>			
1. Royalty Fee Pay	able for Accor	unting Period	(from Block 1	, 2, or 3, abo	ve)		\$	938.33	
2. Filing Fee (See t	he instruction	s for more in	formation on f	iling fee calcu	ulations)		\$	20.00	
									252.22
3. TOTAL AMOUN	T DUE FOR A	ACCOUNTIN	G PERIOD. A	Add lines 2 a	ınd 3			\$	958.33
	GROSS RECEIP Instructions: The all amounts (gross (as identified in sp page (vii) of the ge Gross receipt during the acc IMPORTANT: You COPYRIGHT ROY Instructions: To con Complete block 1, Use block 2 if the Use block 2 if the Use block 3 if the Gee page (vi) of the ge Instructions: As a c accounting period i Line 1. Royalty fee Line 2. Interest chan Line 3. TOTAL RO 1. Base amount un 2. Enter amount of 3. Subtract line 2 fr 4. Enter the amoun 6. Subtract line 5 fr 7. Multiply line 6 by 8. Interest charge. 9. TOTAL ROYAL 1. Enter the amoun 2. Base amount un 3. Subtract line 2 fr 4. Multiply line 3 by 5. Royalty due on t 6. Interest charge. 7. TOTAL ROYAL 1. Royalty Fee Pay 2. Filing Fee (See t	GROSS RECEIPTS Instructions: The figure you gi all amounts (gross receipts) pa (as identified in space E) during page (vii) of the general instructors receipts from subsciduring the accounting peric IMPORTANT: You must complete IMPORTANT: You must complete IMPORTANT: You must complete block 1, block 2, or lead to the amount of grown of the general instructions: To complete block 2 if the amount of grown Use block 3 if the amount of grown of the general instructions: As a cable system we accounting period is \$52.00 Line 1. Royalty fee for accounting Line 2. Interest charge. Enter the Line 3. TOTAL ROYALTY FEE INSTRUCTION 1. Base amount under statutory for the general instructions are considered as a cable system of the grown of the general instructions. As a cable system of the grown of the general instructions accounting period is \$52.00 Line 1. Royalty fee for accounting the grown of t	GROSS RECEIPTS Instructions: The figure you give in this sp. all amounts (gross receipts) paid to your ca (as identified in space E) during the accoun page (vii) of the general instructions located Gross receipts from subscribers for see during the accounting period	GROSS RECEIPTS Instructions: The figure you give in this space determinal amounts (gross receipts) paid to your cable system by (as identified in space E) during the accounting period. Fage (vii) of the general instructions located in the paper Gross receipts from subscribers for secondary trans during the accounting period. IMPORTANT: You must complete a statement in space COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is Use block 1 if the amount of gross receipts in space K is Use block 3 if the amount of gross receipts in space K is in the paper of the grown of the general instructions located in the paper BLOCK 1: GROSS I Instructions: As a cable system with gross receipts of \$137, accounting period is \$52.00 Line 1. Royalty fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING BLOCK 2: GROSS RECEIPTS Of the general instructions located in the paper should be accounted by the paper of the grown of the grown of the general instructions located in the paper should be accounted by the grown of the grown	GROSS RECEIPTS Instructions: The figure you give in this space determines the form: all amounts (gross receipts) paid to your cable system by subscriber (as identified in space E) during the accounting period. For a further page (vil) of the general instructions located in the paper SA1-2 form Gross receipts from subscribers for secondary transmission senduring the accounting period. IMPORTANT: You must complete a statement in space P concernin COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 2 if the amount of gross receipts in space K is smore than 3 is eapage (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the general instructions located in the paper SA1-2 form See page (vi) of the see page SA1-2 form SA1-	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explana page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross. COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: COmplete blook 1, block 2, or block 3. Use block 1 ff the amount of gross receipts in space K is \$137,100 or less. Use block 2 if the amount of gross receipts in space K is more than \$137,101. Use block 3 if the amount of gross receipts in space K is more than \$137,101. Use block 3 if the amount of gross receipts in space K is more than \$263,801. BLOCK 1: GROSS RECEIPTS OF \$13. Instructions: As a cable system with gross receipts of \$137,100 or less, the royal accounting period is \$52.00 Line 1. Royalty fee for accounting period . Line 2. Interest charge. Enter the amount from line 4, space Q, page 8. Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add line BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LE 1. Base amount under statutory formula 2. Enter amount of gross receipts from space K . 3. Subtract line 2 from line 1 . 4. Enter the amount from line 3 . 6. Subtract line 5 from line 4 . 7. Multiply line 6 by .005 (enter figure here) . 8. Interest charge. Enter the amount from line 4, space Q, page 8 . 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 . BLOCK 3: GROSS RECEIPTS OF MORE THAN \$26: 1. Enter the amount of gross receipts from space K . 2. Base amount under statutory formula . 3. Subtract line 2 from line 1 . 4. Multiply line 6 by .005 (enter figure here) . 8. Interest charge. Enter the amount from line 4, space Q, page 8 . 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 . Enter the amount	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the a all amounts (gross receipts) paid to your cable system by subscribers for the system's (as identified in space E) during the accounting period. For a further explanation of he page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is more than \$137,100 but less Use block 2 if the amount of gross receipts in space K is more than \$253,800 but less epage (vi) of the general instructions cated in the paper SA1-2 form for more informate pages and the second in the paper SA1-2 form for more informate accounting period is \$52.00 Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee the accounting period is \$52.00 Line 1. Royalty fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but in the second in the paper SA1-2 form for more informate in the page SA1-2 form for more informate in the page SA1-2 form for more informate in the page SA1-2 form in the second in the page SA1-2 form for in the second in the page SA1-2 form formate in the page SA1-2 form for information in the second in the page SA1-2 form formation in the second in the page SA1-2 form in formation in the second in the page SA1-2 formation in formation in the second in the page SA1-2 formation in formation in formation in formation in formation in formation in formation on filing fee calculations)	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pail all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary treat (as identified in space b) during the accounting period. For a further explanation of how to compute page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts. COPYRIGHT ROYALTY FEE INSTRUCTION: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is more than \$137,100 but less than or equal Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$257,60 are page (vi) of the general instructions located in the paper SA1-2 form for more information. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay accounting period is \$52.00 Line 1. Royalty fee for accounting period. Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$1. BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$1. 4. Enter the amount of gross receipts from space K 5. Enter the amount from line 1 5. 38,067.1 4. Enter the amount form line 4, space Q, page 8 BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$4. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$4. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$4. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$4. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$4. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$4. BLOCK 3: GROSS RECE	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, service (is identified in space E) during the accounting period. For a further explanation of how to compute this amount, service (is identified in space E) during period. ### WORDTAIN: You must complete a statement in space P concerning gross receipts. ### COPY RIGHT ROYALTY FEE ### To complete block 1, block 2, or block 3. Use block 2 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$283,800 Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than 527,600 ### SECOND RIGHT ROYALTY FEE ### TO SECOND RIGHT ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2 ### Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2 ### BLOCK 1: CROSS RECEIPTS OF \$263,800 OR LESS but more than \$137,100 ### BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS but more than \$137,100 ### BLOCK 3: GROSS RECEIPTS OF \$263,800 OR LESS but more than \$137,100 ### BLOCK 3: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100) ### BLOCK 3: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100) ### BLOCK 3: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100) ### BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) ### BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) ### BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) ### BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) ### BLOCK 3: GROSS RECEIPTS OF

Accounting Period:	: 2017/2	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 033571
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	175
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name SARAH BOGUE Telephone	(903) 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)	
O	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations; I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space I in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] X /s/ Michael Schreiber Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) Typed or printed name: MICHAEL SCHREIBER Title: EVP, CHIEF CONTENT OFFICER (Title of official position held in corporation or partnership) Date: 02/18/2018	3; or system as identified

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

ccounting Period: 2017/2	FORM SA1-2E. PAGE 8.
EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
EQUEL COMMUNICATIONS LLC	033571
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	P Special Statement Concerning Gross Receipts Exclusion
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number First community served Accounting period	

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