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 COPYRIGH	IT OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>
General instructions are located in the first tab of this workbook	8/28/2019	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

A	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		2019/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20191 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, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these is 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:
		OKMULGEE, OK
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	020017
D Area	Instructions: List each separate community served by the cable system. A "cor "a separate and distinct community or municipal entity (including unincorpora discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that as the "first community." Please use it as the first community on all future filir Note: Entities and properties such as hotels, apartments, condominiums, or m identified city.	mmunity" is the same as a "community unit" as defined in FCC rules: ted communities within unincorporated areas and including single, t you list will serve as a form of system identification hereafter known ngs.
Served		
	CITY OR TOWN	STATE
First	OKMULGEE	ОК
Community	OKMULGEE COUNTY	ОК
Add Rows as Necessary		
Add Rows as Necessary		

								FORM SA1	
Name	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:							TEM ID
	CEQUEL COMMUNICAT	IONS LLC							02001
-	SECONDARY TRANSMISSION	SERVICE: SU	BSCRI	BERS AND R	ATES				
E		In General: The information in space E should cover all categories of secondary transmission service of the cable							
		ystem, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information							
Secondary	about other services (including p						hose existii	ng on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						le svetem	broken	
scribers and	down by categories of secondary								
Rates	each category by counting the nu								
	separately for the particular servi							-	
	Rate: Give the standard rate cl								
	unit in which it is generally billed. category, but do not include disc				ny standai	rd rate variations	s within a p	articular rate	
	Block 1: In the left-hand block				ries of seco	ondarv transmis	sion service	e that cable	
	systems most commonly provide								
	that applies to your system. Note								
	categories, that person or entity								
	subscriber who pays extra for ca first set" and would be counted o					i in the count un	der "Servic	e to the	
	Block 2: If your cable system h					service that are	different fro	om those	
	printed in block 1 (for example, ti								
	with the number of subscribers a	nd rates, in the	right-h	and block. A tv	vo- or thre	e-word descripti	on of the se	ervice is	
	BLOCK 1						BLOCK	· •	
		NO. OF						NO. OF	
	CATEGORY OF SERVICE	SUBSCRIBE	RS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RATE
	Residential:		450						
	Service to first set		1,452	34.99					
	Service to additional set(s)	4	2,652	0					
	• FM radio (if separate rate)								
	Motel, hotel		40						
	Commercial		43	34.99					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s				
F	In General: Space F calls for rat	•	,		•	• •			
	not covered in space E, that is, the								
Services	service for a single fee. There and furnished at cost or (2) services of								
Other Than	amount of the charge and the un								
Secondary	enter only the letters "PP" in the	rate column.	-	-		-			
Fransmissions:	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								
Rates	listed in block 1 and for which a s								
	brief (two- or three-word) descrip				Sheu. List			ionn or a	
		BLOC						BLOCK 2	
	CATEGORY OF SERVICE			ORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RATE
	Continuing Services:			ation: Non-res					
	• Pay cable	19.00	• Mo	tel, hotel					
	Pay cable—add'l channel	19.00	• Cor	nmercial					
	Fire protection		• Pay	cable					
	•Burglar protection		• Pay	v cable-add'l ch	nannel				
	Installation: Residential		• Fire	e protection					
	• First set	99.00		glar protection					
	 Additional set(s) 			services:					
	• FM radio (if separate rate)			connect		40.00			
	• Converter			connect					
				let relocation		25.00			
				ve to new addr	ess	99.00			

News	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM				
Name	CEQUEL COMMUNIC	ATIONS LLC		020				
	PRIMARY TRANSMITTERS:	TELEVISION						
G		ntify every television station (including						
0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	carried by your cable system during the accounting period, <i>except</i> (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						
Primary	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.							
Transmitters: Television		With respect to any distant stations of	arried by your cable system on a su	ubstitute program				
		les, regulations, or authorizations: e in space G—but do list it in space I (the Special Statement and Program	1 og)—if the				
	station was carried only on	a substitute basis.		<i></i>				
		Ilso in space I, if the station was carrie n concerning substitute basis stations						
	Column 1: List each station	's call sign. Do not report origination	program services such as HBO, ES	PN, etc. Identify each				
	"WETA-2" as the same on t	with a station according to its over-th he form.	e-air designation. For example, rep	oort multistream				
		I number the FCC assigned to the tel	evision station for broadcasting ove	r the air in its community				
		RC is channel 4 in Washington, D.C. case whether the station is a network	station, an independent station, or	a noncommercial				
		ring the letter "N" (for network), "N-M" "E" (for noncommercial educational),						
	For the meaning of these te	rms, see page (iv) of the general instr	uctions in the paper SA1-2 form.					
		n of each station. For U.S. stations, lis lian stations, if any, give the name of						
		nan otationo, n'arry, give the name of						
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	KDOR-1	17	1	BARTLESVILLE, OK				
	KGEB-1	53		TULSA, OK				
	KGEB-HD1	53	i-M	TULSA, OK				
Add Rows as Necessary								
	KJRH-1	2	<u>N</u>	TULSA, OK				
	KJRH-HD1	2	N-M	TULSA, OK				
	КМҮТ-2	41	I-M	TULSA, OK				
	KMYT-3	41.2	I-M	TULSA, OK				
	KMYT-HD1	41.3	I-M	TULSA, OK				
	KMYT-1	41	<u> </u>	TULSA, OK				
	KOED-HD1	11	E-M	TULSA, OK				
	KOED-1	11	E	TULSA, OK				
	KOKI-3	23	I-M	TULSA, OK				
	KOKI-HD1	23.2	I-M	TULSA, OK				
	KOKI-2	23.3	I-M	TULSA, OK				
	KOKI-1	23	I	TULSA, OK				
	KOTV-1	6	N	TULSA, OK				
	KOTV-HD1	6.3	N-M	TULSA, OK				
	KOTV-3	6	I-M	TULSA, OK				
	KQCW-1	19		MUSKOGEE, OK				
	KQCW-HD1	19	 I-M	MUSKOGEE, OK				
		15		OKMULGEE, OK				
	KTPY-1	14						
	KTPX-1	44	l I-M					
	KTPX-HD1	44	I-M	OKMULGEE, OK				
	KTPX-HD1 KTUL-1	44 8	I-M N	OKMULGEE, OK TULSA, OK				
	KTPX-HD1 KTUL-1 KTUL-3	44 8 8.2	I-M N I-M	OKMULGEE, OK TULSA, OK TULSA, OK				
	KTPX-HD1 KTUL-1 KTUL-3 KTUL-2	44 8 8.2 8.3	I-M N I-M I-M	OKMULGEE, OK TULSA, OK TULSA, OK TULSA, OK				
	KTPX-HD1 KTUL-1 KTUL-3 KTUL-2 KTUL-HD1	44 8 8.2 8.3 8.4	I-M N I-M I-M N-M	OKMULGEE, OK TULSA, OK TULSA, OK TULSA, OK TULSA, OK				
	KTPX-HD1 KTUL-1 KTUL-3 KTUL-2	44 8 8.2 8.3	I-M N I-M I-M	OKMULGEE, OK TULSA, OK TULSA, OK TULSA, OK TULSA, OK TULSA, OK				
	KTPX-HD1 KTUL-1 KTUL-3 KTUL-2 KTUL-HD1	44 8 8.2 8.3 8.4	I-M N I-M I-M N-M	OKMULGEE, OK TULSA, OK TULSA, OK TULSA, OK TULSA, OK				
	KTPX-HD1 KTUL-1 KTUL-3 KTUL-2 KTUL-HD1 KTUL-4	44 8 8.2 8.3 8.4 8	I-M N I-M I-M N-M I-M	OKMULGEE, OK TULSA, OK TULSA, OK TULSA, OK TULSA, OK TULSA, OK				
	KTPX-HD1 KTUL-1 KTUL-3 KTUL-2 KTUL-HD1 KTUL-4	44 8 8.2 8.3 8.4 8	I-M N I-M I-M N-M I-M	OKMULGEE, OK TULSA, OK TULSA, OK TULSA, OK TULSA, OK TULSA, OK				

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
•			the carriage of certain network program	
Primary	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 stati	
ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPI	
			ne-air designation. For example, repor	t multistream
	"WETA-2" as the same on		levision station for broadcasting over tl	a air in its community
		VRC is channel 4 in Washington, D.C.		
			k station, an independent station, or a	noncommercial
			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
		erms, see page (iv) of the general insti on of each station. For U.S. stations, liv	st the community to which the station is	s licensed by the
			the community with which the station i	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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			program services such as HBO, ESPI	
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
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	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER O	E CABLE SYSTEM		SYSTEI
Name				02
	PRIMARY TRANSMITTERS: TELEVISION			
G	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, <i>except</i> (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]			
•				
Primary	76.59(d)(2) and (4), 76.61(
ansmitters:	substitute program basis, as explained in the next paragraph.			
Television	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. <i>Do not</i> 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
				••••••••••••••••••••••••••••••••••••••

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
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	PRIMARY TRANSMITTERS:			
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	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
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•			the carriage of certain network program	
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			the Special Statement and Program L	og)—if the
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			program services such as HBO, ESPI	
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	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
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			the Special Statement and Program L	og)—if the
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			ed both on a substitute basis and also s, see page (v) of the general instruction	
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G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
•			the carriage of certain network program	
Primary	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 stati	
ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPI	
			ne-air designation. For example, repor	t multistream
	"WETA-2" as the same on		levision station for broadcasting over tl	a air in its community
		VRC is channel 4 in Washington, D.C.		
			k station, an independent station, or a	noncommercial
			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
		erms, see page (iv) of the general insti on of each station. For U.S. stations, liv	st the community to which the station is	s licensed by the
			the community with which the station i	
			-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
			1	

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
•			the carriage of certain network program	
Primary	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 stati	
ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
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			or "E-M" (for noncommercial educatio	nal multicast).
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			the community with which the station i	
			-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
•			the carriage of certain network program	
Primary	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 stati	
ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPI	
			ne-air designation. For example, repor	t multistream
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		VRC is channel 4 in Washington, D.C.		
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			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
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			the community with which the station i	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
			1	

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
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Primary	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 stati	
ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPI	
			ne-air designation. For example, repor	t multistream
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		VRC is channel 4 in Washington, D.C.		
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			the community with which the station i	
			-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
			1	

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
•			the carriage of certain network program	
Primary	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 stati	
ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPI	
			ne-air designation. For example, repor	t multistream
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			-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
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	PRIMARY TRANSMITTERS:			
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ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
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			the community with which the station i	
			-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
•			the carriage of certain network program	
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			the Special Statement and Program L	og)—if the
	station was carried only or			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPI	
			ne-air designation. For example, repor	t multistream
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	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
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				02
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			the Special Statement and Program L	og)—if the
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			ed both on a substitute basis and also s, see page (v) of the general instruction	
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
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				02
	PRIMARY TRANSMITTERS:			
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ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
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			or "E-M" (for noncommercial educatio	nal multicast).
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
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				02
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ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
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		VRC is channel 4 in Washington, D.C.		
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			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
		erms, see page (iv) of the general insti on of each station. For U.S. stations, liv	st the community to which the station is	s licensed by the
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
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ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
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			ne-air designation. For example, repor	t multistream
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		VRC is channel 4 in Washington, D.C.		
			k station, an independent station, or a	noncommercial
			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
		erms, see page (iv) of the general insti-	st the community to which the station is	s licensed by the
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			-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
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•			the carriage of certain network program	
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			ed both on a substitute basis and also s, see page (v) of the general instruction	
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			k station, an independent station, or a	noncommercial
			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
		erms, see page (iv) of the general insti-	st the community to which the station is	s licensed by the
			the community with which the station i	
			-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
•			the carriage of certain network program	
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ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPI	
			ne-air designation. For example, repor	t multistream
	"WETA-2" as the same on		levision station for broadcasting over tl	a air in its community
		VRC is channel 4 in Washington, D.C.		
			k station, an independent station, or a	noncommercial
			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
		erms, see page (iv) of the general insti on of each station. For U.S. stations, liv	st the community to which the station is	s licensed by the
			the community with which the station i	
			-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
			1	

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE
Name				02
				02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
•			the carriage of certain network program	
Primary	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 stati	
ansmitters:		as explained in the next paragraph.	corried by your apple system on a sub-	tituto program
Television		ules, regulations, or authorizations:	carried by your cable system on a sub	situte program
			the Special Statement and Program L	og)—if the
	station was carried only or			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPI	
			ne-air designation. For example, repor	t multistream
	"WETA-2" as the same on		levision station for broadcasting over tl	a air in its community
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			k station, an independent station, or a	noncommercial
			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
		erms, see page (iv) of the general insti on of each station. For U.S. stations, liv	st the community to which the station is	s licensed by the
			the community with which the station i	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
			1	

Name		F CABLE SYSTEM:		SYSTE
				02
	CEQUEL COMMUNIC			02
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele of (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			.61(e)(2) and (4))]; and (2) certain stati	
ransmitters:		s explained in the next paragraph.		
Television		: With respect to any distant stations ules, regulations, or authorizations:	carried by your cable system on a subs	stitute program
			the Special Statement and Program L	og)—if the
	station was carried only on			
			ed both on a substitute basis and also s, see page (v) of the general instruction	
			program services such as HBO, ESPN	
			ne-air designation. For example, repor	tmultistream
	"WETA-2" as the same on "		levision station for broadcasting over tl	a air in its community
		/RC is channel 4 in Washington, D.C.		
			k station, an independent station, or a	noncommercial
			' (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	nal multicast).
		erms, see page (iv) of the general inst	st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	CEQUEL COMMUNIC	ATIONS LLC		0200
	PRIMARY TRANSMITTERS:			
G Primary Transmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC rt • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on Column 2: Give the chann- of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio	m during the accounting period, excep in effect on June 24, 1981, permitting e)(2) and (4), or 76.63 (referring to 76 s explained in the next paragraph. : With respect to any distant stations ules, regulations, or authorizations: e in space G—but do list it in space I of a substitute basis. also in space I, if the station was carri on concerning substitute basis stations of call sign. <i>Do not</i> report origination d with a station according to its over-the the form. el number the FCC assigned to the te RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-NI), "E" (for noncommercial educational), "E" (for noncommercial educational) n of each station. For U.S. stations, lii	k station, an independent station, or a ' (for network multicast), "I" (for indepe or "E-M" (for noncommercial educatio	me basis under ms [sections ions carried on a stitute program og)—if the on some other ons. N, etc. Identify each rt multistream he air in its community noncommercial ndent), "I-M" inal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

EGAL NAME O								SYSTEM II 0200
		-	arried on a separate and discr	ete hasis and list	those FM sta	tions ca	rried on an	н
			nerally receivable by your cab					••
eceivable if (1) n the basis of or detailed infi aper SA1-2 fo Column 1: lo Column 2: S Column 3: li ignal, indicate Column 4: C	it is carried b monitoring, to prmation about rm. dentify the cal state whether the radio stat this by placing Sive the station	y the sys be recein at the Co I sign of the the static tion's sign g a chech n's locati	I-Band FM Carriage: Under (tem whenever it is received a ved at the headend, with the pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	at the system's he system's FM ante this point, see pa sed by the cable s ne station is licens	eadend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st general i eparate	be expected, tated intervals. nstructions in the. and discrete	Primary Transmitters Radio
	AM or FM	e/D		CALL SIGN	AM or EM	e/D		
CALL SIGN	AIVI OF FIVI	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	od: 2019/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF							SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LI	LC					020017
	SUBSTITUTE CARRIAGI	E: SPECIA	L STATEME	NT AND PROGRAM LO	G			
I I	In General: In space I, identi				•	ion that your	cable syste	m carried on a
•	substitute basis during the a							
Substitute	explanation of the programm	ing that mus	st be included in	this log, see page (v) of the	e general instr	uctions in the	e paper SA1	-2 form.
Carriage:	1. SPECIAL STATEMEN		NING SUBS	TITUTE CARRIAGE				
Special Statement and	 During the accounting per 	iod, did you	r cable system	carry, on a substitute basi	s, any nonne	twork televis	ion program	
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No'	, leave the	rest of this pag	e blank. If your answer is	'Yes," you mι	ist complete	the program	n
	log in block 2.					•		
	2. LOG OF SUBSTITUTE		MS					
	In General: List each subst				wherever pos	sible, if their	meaning is	
	clear. If you need more spa			rows to the tables. ision program ("substitute	orogram") tha	t during the	accounting	
	period, was broadcast by a							
	under certain FCC rules, re	gulations, o	r authorizations	s. See page (v) of the gene	eral instruction	ns for further	r informatior	
	Do not use general categori "NBA Basketball: 76ers vs.		vies" or "baske	tball." List specific progran	n titles, for exa	ample, "I Lov	ve Lucy" or	
			dcast live, ente	r "Yes." Otherwise enter "N	lo."			
	Column 3: Give the call	sign of the s	station broadca	sting the substitute progra	m.			
				e community to which the			FCC or, in	
	the case of Mexican or Can Column 5: Give the mon	ith and day	when vour svs	tem carried the substitute	orogram. Use	numerals. v	vith the mor	nth
	first. Example: for May 7 giv	/e "5/7."			-			
				gram was carried by your				ly
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. sh	iould be	
		er "R" if the	listed program	was substituted for progra	mming that y	our system v	was require	d
	to delete under FCC rules a							am
	was substituted for program effect on October 19, 1976.		our system wa	s permitted to delete unde	r FCC rules a	nd regulation	ns in	
								1
						N SUBSTI		
		2. LIVE?	E PROGRAN 3. STATION'S		5. MONTH	AGE OCCL		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	— то	
						-	_	
						_	_	
								'
						-	_	
]					
						-	_	
]			_	_	
						-	_	
1		1	1	1	<u>ו (</u>	1		7

Accounting Period:	2019/1	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 020017
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmiss (as identified in space E) during the accounting period. For a further explanation of how to compute this an 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.	sion service
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$26 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	3,800
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for the accounting period is \$52.00 Line 1. Royalty fee for accounting period	
	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 \$137,100))
	1. Base amount under statutory formula \$ 263,800.00	
	2. Enter amount of gross receipts from space K	
	3. Subtract line 2 from line 1	
	4. Enter the amount of gross receipts from space K	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	
	8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,60	00)
	1. Enter the amount of gross receipts from space K \$ 417,136.78	
	2. Base amount under statutory formula	
	3. Subtract line 2 from line 1	
		1,533.37
		1,319.00
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	<u>\$2,852.37</u>
	FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	2,852.37
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	20.00
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$ 2,872.37
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo	

Accounting Period:	2019/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 020017
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 .	28
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	438
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	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner 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/ Alan Dannenbaum 	stem as identified
	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: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership) Date: 08/18/2019	

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

Inting Period: 2019/1	FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
UEL COMMUNICATIONS LLC	0200
 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? NO 	P Special Statemen Concerning Gros Receipts Exclusio
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address	
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
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
	Q Interest Assessme
	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	
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