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
			1

A	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		20191 Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
		Instructions:	
В		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.	020937
		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 u is already appear in space B. In line 2, give the mailing address of the system, if different from the address given in s	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		HOXIE, AR	
		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 suffciency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	CEQUEL COMMUNICATIONS LLC	020937
D	Instructions: List each separate community served by the cable system. A "comm "a separate and distinct community or municipal entity (including unincorporated discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that yo as the "first community." Please use it as the first community on all future filings.	communities within unincorporated areas and including single, u list will serve as a form of system identification hereafter known
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobi identified city.	e home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	HOXIE	AR
Community	COLLEGE CITY	AR
	LAWRENCE COUNTY	AR
Add Rows as Necessary	WALNUT RIDGE	AR

	LEGAL NAME OF OWNER OF CABLE SYSTEM:							TEM ID	
Name	CEQUEL COMMUNICAT	IONS LLC							02093
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the nu- separately for the particular serv Rate: Give the standard rate c unit in which it is generally billed category, but do not include discc Block 1: In the left-hand block systems most commonly provide	SERVICE: SUI pace E should c on of television a ay cable) in spa (June 30 or De blocks in spac y transmission s umber of billings ice at the rate ir harged for each . (Example: "\$20 ounts allowed fo in space E, the	cover all and radi ace F, n ecember e E call service. s in that ndicated n catego 0/mth"). or advar form lis	categories of o broadcasts ot here. All the 31, as the ca for the number In general, yo category (the —not the num ry of service. Summarize a nee payment. ts the categor	secondary by your sy a facts you se may be or of subsc u can com number of ber of set include bo ny standar	stem to subscril state must be t b). There is to the cal pute the number f persons or org s receiving serv th the amount or rd rate variation ondary transmis	bers. Give i hose existi ble system, r of subscr anizations ice). f the charg s within a p sion servic	information ng on the broken ibers in charged e and the particular rate e that cable	
	that applies to your system. Note categories, that person or entity subscriber who pays extra for ca first set" and would be counted or Block 2: If your cable system I printed in block 1 (for example, to with the number of subscribers a sufficient.	should be count ble service to a once again unde has rate categor iers of services and rates, in the	ted as a dditiona er "Servi ries for s that incl	subscriber in I sets would b ce to addition secondary trai ude one or m	each appl e included al set(s)." nsmission ore second	licable category I in the count un service that are dary transmissio	Example: der "Servic different fr ons), list the on of the s	a residential ee to the om those em, together ervice is	
	BLO	DCK 1 NO. OF					BLOCK		<u>г </u>
	CATEGORY OF SERVICE	SUBSCRIBE	RS	RATE	CAT	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential:								
	Service to first set	1	,107	34.99					
	Service to additional set(s)	2	2,214	0					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		43	34.99					
	Converter								
	Residential								
	Non-residential								
F Services Other Than Secondary Fransmissions: 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.								
		BLOC	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	1 1		ORY OF SER		RATE	CATEGO	ORY OF SERVICE	RATE
	Continuing Services:			tion: Non-res	idential				
	• Pay cable	19.00		el, hotel					
	Pay cable—add'l channel Fire protection	19.00	• Con	mercial					<u> </u>
	Burglar protection			cable-add'l ch	annel				
	Installation: Residential			protection					
	First set	99.00		lar protection					
	Additional set(s)			ervices:					
	• FM radio (if separate rate)	20.00		onnect		40.00			
	Converter		 Disc 	onnect					
	• Converter			onnect et relocation		25.00			

	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM			
Name				020			
	PRIMARY TRANSMITTERS:						
-	In General: In space G, identify every television station (including translator stations and low power television stations)						
G	carried by your cable syste	m during the accounting period, except	t (1) stations carried only on a par	t-time basis under			
Primary	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						
Transmitters:		as explained in the next paragraph.	(e)(2) and (4))], and (2) certain s				
Television		s: With respect to any distant stations c	arried by your cable system on a s	substitute program			
		ules, regulations, or authorizations: e in space G—but do list it in space I (t	he Special Statement and Program	m Log)—if the			
	station was carried only or						
		also in space I, if the station was carrie on concerning substitute basis stations,					
	Column 1: List each statio	n's call sign. Do not report origination p	program services such as HBO, E	SPN, etc. Identify each			
	multicast stream associate "WETA-2" as the same on	d with a station according to its over-the the form	e-air designation. For example, re	eport multistream			
	Column 2: Give the chann	el number the FCC assigned to the tele	evision station for broadcasting ov	er the air in its community			
		VRC is channel 4 in Washington, D.C. h case whether the station is a network	station an independent station o				
		ering the letter "N" (for network), "N-M"					
	(for independent multicast)	, "E" (for noncommercial educational), o	or "E-M" (for noncommercial education				
		erms, see page (iv) of the general instru on of each station. For U.S. stations, list		on is licensed by the			
		adian stations, if any, give the name of t					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION			
	KAIT-1	8	N	JONESBORO, AR			
	KAIT-2	8.2	N-M	JONESBORO, AR			
d Rows as Necessary	KAIT-3	8.3	I-M	JONESBORO, AR			
u nows as necessary	KAIT-HD1	8	N-M	JONESBORO, AR			
		-					
	KAIT-HD2	8.2	<u>N-M</u>	JONESBORO, AR			
	KAIT-HD3	8.3	I-M	JONESBORO, AR			
	KATV-1	7	N	LITTLE ROCK, AR			
	KJNB-1	39	I-M	JONESBORO, AR			
	KJNB-2	39.2	Ν	JONESBORO, AR			
	KJNB-3	39.3	N-M	JONESBORO, AR			
	KJNB-HD1	39	I-M	JONESBORO, AR			
	KJNB-HD2	27.2	N-M	JONESBORO, AR			
	KTEJ-1	19	E	1			
				JONESBORO, AR			
	KTEJ-2	19.2	E-M	JONESBORO, AR			
	KTEJ-3	19.3	E-M	JONESBORO, AR			
	KTEJ-4	19.4	E-M	JONESBORO, AR			
	KTEJ-HD1	19	E-M	JONESBORO, AR			
	KVTJ-1	48	I	JONESBORO, AR			
	KVTJ-HD1	48	I-M	JONESBORO, AR			
	WKNO-1	10	E	MEMPHIS, TN			
	WREG-1	3	N	MEMPHIS, TN			
	WREG-HD1	3	N-M	MEMPHIS, TN			

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE			
Name				02			
				02			
	PRIMARY TRANSMITTERS:						
G			g translator stations and low power tele				
U		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			.61(e)(2) and (4))]; and (2) certain station				
ansmitters:	substitute program basis, a	is explained in the next paragraph.					
Television		1 2	carried by your cable system on a subs	stitute program			
		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the			
	station was carried only of		the Special Statement and Program Lo				
			ed both on a substitute basis and also	on some other			
			s, see page (v) of the general instruction				
			program services such as HBO, ESPN				
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream			
			levision station for broadcasting over th	ne air in its community			
		/RC is channel 4 in Washington, D.C.		·····			
	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a				
			' (for network multicast), "I" (for indepen				
			or "E-M" (for noncommercial education	nal multicast).			
		erms, see page (iv) of the general inst		- line and low the s			
			st the community to which the station is the community with which the station i				
	FCC. For Mexican or Cana	dian stations, il any, give the name of	the community with which the station i	s identified.			
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION			

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Name				02	
				02	
	PRIMARY TRANSMITTERS:				
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			ed both on a substitute basis and also	on some other	
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			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
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			levision station for broadcasting over th	ne air in its community	
		/RC is channel 4 in Washington, D.C.		·····	
	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a i		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
	FCC. For Mexican or Cana	dian stations, il any, give the name of	the community with which the station i	s 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	
Name				02	
				02	
	PRIMARY TRANSMITTERS:				
G			g translator stations and low power tele		
U	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	[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				
ansmitters:	substitute program basis, a	is explained in the next paragraph.			
Television		1 2	carried by your cable system on a subs	stitute program	
		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
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			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
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	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
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			or "E-M" (for noncommercial education	nal multicast).	
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			st the community to which the station is the community with which the station i		
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	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
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			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
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		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
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	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
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			st the community to which the station is the community with which the station i		
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Name				02	
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Television		1 2	carried by your cable system on a subs	stitute program	
		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
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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		
U	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				
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ansmitters:	substitute program basis, a	is explained in the next paragraph.			
Television		1 2	carried by your cable system on a subs	stitute program	
		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
		/RC is channel 4 in Washington, D.C.		·····	
	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
	FCC. For Mexican or Cana	dian stations, il any, give the name of	the community with which the station i	s 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	
Name				02	
				02	
	PRIMARY TRANSMITTERS:				
G			g translator stations and low power tele		
U	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	[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				
ansmitters:	substitute program basis, a	is explained in the next paragraph.			
Television		1 2	carried by your cable system on a subs	stitute program	
		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
		/RC is channel 4 in Washington, D.C.		·····	
	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
	FCC. For Mexican or Cana	dian stations, il any, give the name of	the community with which the station i	s 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	
Name				02	
				02	
	PRIMARY TRANSMITTERS:				
G			g translator stations and low power tele		
U	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	[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				
ansmitters:	substitute program basis, a	is explained in the next paragraph.			
Television		1 2	carried by your cable system on a subs	stitute program	
		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
		/RC is channel 4 in Washington, D.C.		·····	
	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
	FCC. For Mexican or Cana	dian stations, il any, give the name of	the community with which the station i	s identified.	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION	

Name	LEGAL NAME OF OWNER O	E CABLE SYSTEM		SYSTE
				02
				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			
U	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			
Primary				
ansmitters:	substitute program basis, as explained in the next paragraph.			
Television		, ,	carried by your cable system on a subs	stitute 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.			
	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
	•••••••••••••••••••••••••••••••••••••••			ļ

	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE	
Name				02	
				02	
	PRIMARY TRANSMITTERS:				
G			g translator stations and low power tele		
U	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	[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				
ansmitters:	substitute program basis, a	is explained in the next paragraph.			
Television		1 2	carried by your cable system on a subs	stitute program	
		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
		/RC is channel 4 in Washington, D.C.		·····	
	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
	FCC. For Mexican or Cana	dian stations, il any, give the name of	the community with which the station i	s 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	
Name				02	
				02	
	PRIMARY TRANSMITTERS:				
G			g translator stations and low power tele		
U	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				
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ansmitters:	substitute program basis, a	is explained in the next paragraph.			
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		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
		/RC is channel 4 in Washington, D.C.		·····	
	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
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			st the community to which the station is the community with which the station i		
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Name				02	
				02	
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G			g translator stations and low power tele		
U	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	[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				
ansmitters:	substitute program basis, a	is explained in the next paragraph.			
Television		1 2	carried by your cable system on a subs	stitute program	
		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
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	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
	FCC. For Mexican or Cana	dian stations, il any, give the name of	the community with which the station i	s identified.	
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Name				02	
				02	
	PRIMARY TRANSMITTERS:				
G			g translator stations and low power tele		
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ansmitters:	substitute program basis, a	is explained in the next paragraph.			
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		ules, regulations, or authorizations:	the Special Statement and Program L	and) if the	
	station was carried only of		the Special Statement and Program Lo		
			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
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	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
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Name				02	
				02	
	PRIMARY TRANSMITTERS:				
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Name				02	
				02	
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE	
Name				02	
				02	
	PRIMARY TRANSMITTERS:				
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			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE	
Name				02	
				02	
	PRIMARY TRANSMITTERS:				
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			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
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	LEGAL NAME OF OWNER C	E CABLE SYSTEM		SYSTE	
Name				02	
				02	
	PRIMARY TRANSMITTERS:				
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			ed both on a substitute basis and also	on some other	
			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
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			s, see page (v) of the general instruction		
			program services such as HBO, ESPN		
	"WETA-2" as the same on		ne-air designation. For example, repor	t multistream	
			levision station for broadcasting over th	ne air in its community	
		/RC is channel 4 in Washington, D.C.		·····	
	Column 3: Indicate in eac	n case whether the station is a networ	k station, an independent station, or a		
			' (for network multicast), "I" (for indepen		
			or "E-M" (for noncommercial education	nal multicast).	
		erms, see page (iv) of the general inst		- line and low the s	
			st the community to which the station is the community with which the station i		
	FCC. For Mexican or Cana	dian stations, il any, give the name of	the community with which the station i	s identified.	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION	

	LEGAL NAME OF OWNER O	E CABLE SYSTEM		SYSTE
Name				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:	substitute program basis, a	is explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	the Special Statement and Program L	ag) if the
	station was carried only on		the Special Statement and Frogram E	
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on			industican
			levision station for broadcasting over the	ne air in its community
		/RC is channel 4 in Washington, D.C.		
			k station, an independent station, or a (for network multicast), "I" (for indepen	
			or "E-M" (for noncommercial educatio	
		erms, see page (iv) of the general inst		na matteast).
			st the community to which the station is	s licensed by the
	FCC. For Mexican or Cana	dian stations, if any, give the name of	the community with which the station i	s identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
				4
				k

News	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM II
Name	CEQUEL COMMUNIC	ATIONS LLC		02093
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary ansmitters:	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e	n during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting	g translator stations and low power tele of (1) stations carried only on a part-tin the carriage of certain network program .61(e)(2) and (4))]; and (2) certain station	ne basis under ms [sections
Television	Substitute Basis Stations basis under specific FCC ru • Do not list the station here station was carried only on	: With respect to any distant stations (iles, regulations, or authorizations: e in space G—but do list it in space I (a substitute basis.	carried by your cable system on a subs (the Special Statement and Program Li ed both on a substitute basis and also	og)—if the
	basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t	In concerning substitute basis stations r's call sign. <i>Do not</i> report origination d with a station according to its over-the he form.	s, see page (v) of the general instruction program services such as HBO, ESPN ne-air designation. For example, repor levision station for broadcasting over th	ons. N, etc. Identify each t multistream
	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 location	RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis	k station, an independent station, or a i ' (for network multicast), "I" (for indepen or "E-M" (for noncommercial educatio	noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

EGAL NAME OI								SYSTEM II 0209
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cal					н
eceivable if (1) in the basis of for detailed info aper SA1-2 fo Column 1: lo Column 2: S) it is carried b monitoring, to ormation abou rm. dentify the cal State whether	y the sys be recein at the Co I sign of the statio	I-Band FM Carriage: Under stem whenever it is received a ived at the headend, with the opyright Office regulations on each station carried. on is AM or FM.	at the system's he system's FM ante this point, see pa	eadend, and (2 enna, during c ge (v) of the g	2) it can ertain st leneral i	be expected, ated intervals. nstructions in the.	Primary Transmitters Radio
ignal, indicate Column 4: C	this by placing Give the station	g a checl n's locati	nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	ne station is licen	sed by the FC			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
CALL SIGN		5/D	LOCATION OF STATION	CALL SIGN		5/D	LOCATION OF STATION	
		+						

Accounting Perio	od: 2019/1						FOR	VI SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF							SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LI	LC					020937
	SUBSTITUTE CARRIAGI	E: SPECIA		NT AND PROGRAM LO	G			
I I	In General: In space I, identi	fv everv no	nnetwork televis	<i>sion program</i> , broadcast by	a distant stat	ion. that your ca	able 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 pa	aper SA1-	2 form.
Carriage:	1. SPECIAL STATEMEN		NING SUBST	TITUTE CARRIAGE				
Special	 During the accounting per 	iod, did you	r cable system	carry, on a substitute basi	s, any nonnet	twork television	n program	1
Statement and Program Log	broadcast by a distant stat	tion?					YES	× NO
Frogram Log	Note: If your answer is "No'	' loovo tho	root of this pag	o blank. If your anowar in '			-	
	-	, leave the	rest of this pag	e Diarik. Il your answer is	res, you mu	ist complete th	e program	11
	log in block 2. 2. LOG OF SUBSTITUTE		Me					
	In General: List each subst			te line. Use abbreviations	wherever pos	sible if their m	eaning is	
	clear. If you need more spa						ourning io	
				sion program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor	gulations, o ies like "mo	r authorizations vies" or "baske	s. See page (v) of the gene thall " List specific program	titles for ex	ample "I I ove	liormation	l.
	"NBA Basketball: 76ers vs.						2009 0.	
				r "Yes." Otherwise enter "N				
				sting the substitute progra		need by the EC	C or in	
	the case of Mexican or Can			e community to which the			C or, in	
	Column 5: Give the mon	ith and day	when your sys	tem carried the substitute	program. Use	numerals, with	n the mon	th
	first. Example: for May 7 giv	/e "5/7."			-			
				gram was carried by your				у
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	i program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. shou	ild be	
		er "R" if the	listed program	was substituted for progra	mming that y	our system wa	s required	d
	to delete under FCC rules a	ind regulation	ons in effect du	ring the accounting period	; enter the let	ter "P" if the list	ted progra	
	was substituted for program		our system wa	s permitted to delete unde	r FCC rules a	nd regulations	in	
	effect on October 19, 1976.							
					WHE	N SUBSTITU	TE	
	S	UBSTITUT	E PROGRAM	1	CARRI	AGE OCCUR	RED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIME FROM —	ES TO	DELETION
							-	
						_		
						_		
						··		
						_		
						_		
						_		
						_		
1		1	1					

Accounting Period:	2019/1	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 020937
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Entra all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmise (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ssion 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 \$20 • 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	63,800
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for th 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 \$137,10	
	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 \$527,6	600)
	1. Enter the amount of gross receipts from space K \$ 342,973.91	
	2. Base amount under statutory formula \$ 263,800.00	
	3. Subtract line 2 from line 1	
	4. Multiply line 3 by .01	791.74
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	\$ 2,110.74
	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)	2,110.74
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	\$ 2,130.74
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for m	

Name CEQUEL COMMUNICATIONS LLC M CHANNELS Instructions: You must pier (1) the number of channels on which the cable system carried television broadcast stations to be subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Frafe the total number of channels on which the cable system carried television broadcast stations	ounting Period: 20	119/1	FORM SA1-2E. PAGE
M Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its autocholes, and (2) the cable system's total number of activated channels during the accounting period. 2 1: Each the total number of activated channels on which the cable or number of activated channels during the accounting period. 452 N Instructions: You must give (1) the number of activated channels on which the cable or number of activated channels on which the cable or number of activated channels on which the cable or number of activated channels on which the cable or number of activated stations. 452 N Instructions: You must give (1) the number of activated channels on which the cable or number of activated channels on which the cable or number of activated channels on which the cable or number of account. 452 N Instruction: You must give (1) the statement of account. 452 N Instruction: You must give (1) the statement of account. 452 N Instruction: You must give (1) the statement of account. 100 Marce SARAH BOCUE Telephone (193) 579-3121 Information 3015 SS EE LOOP 323 Telephone (193) 579-3121 Unity You must give (1) the statement of account must be cathing and socordance with Copyright Office regulations) 1 Co 1 1 SARAH BOCUE Fear (194 Gaute 194 Gaute 194 Gaute 194 Gaute 194 Gaute 194 Gaut	Nome		SYSTEM ID 02093
and nonbroadcast services 432 N Individual to Be Contracted for Further information Name SARAH BOGUE Telephone (903) 579-3121 Contracted for Further Telephone (903) 579-3121 Telephone (903) 579-3121 O Types of the statement of account nust be certified and signed in accordance with Copyright Office regulations) Certification • I. the undersigned. hereby certify that (Check one, but only one, of the boxes.) Image: One of owner other than corporation or partnership) I am the owner of the cable system as identified in in 1 of space 8. Certification • I. the undersigned. hereby certify that (Check one, but only one, of the boxes.) Image: One owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in in 1 of space 8. • I. how examined the statement of account and the reversion or a partner of (a partner) I am an officer (f a corporation) or a partner in the 1 of space 8. • I. how examined the statement of account and hereiny idealmant and partner (is a partner) I am an officer (f a corporation) or a partner (is a partner) I am an officer (re signature using an 'f/4 signa	M Channels	Instructions: You must give (1) the number of channels on which the cable system carried television broad 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	22
Individual to be Contacted for Further Information Name SARAH BOGUE Telephone (903) 579-3121 Address 3015 S SE LOOP 323 Universe direction (1908), appendixed, or auto number: (City, town, state, ap) Telephone (903) 579-3121 Contacted for Further Information CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) Certification - 1. the undersigned, hereby certify that (Check one, but only one, of the boxes.) - 0 - 1. the undersigned, hereby certify that (Check one, but only one of the cable system as identified in line 1 of space B; or in line 1 of space B and that the owner is not a corporation or partnership) are the duly authorized agent of the coule of spatner of the cable system as identified in line 1 of space B. - 1 have examined the statement of account and hereby declare under penalty of the legal entity identified as owner of the cable system as identified in line 1 of space B. - 1 have examined the statement of account and hereby declare under penalty of the legal entity identified as owner of the cable system as identified in line 1 of space B. - 1 have examined the statement of account and hereby declare under penalty of the legal entity identified and in line 1 of space B. - 1 have examined the statement of account and hereby declare under penalty of taw that all statements. If u. S.C. Sector 1001(1960) - 2 yeed or printed name: X /s/ Alan Dannenbaum - 1 have examined the statement of space B and that the owner is on the line		-	452
Information Address SuffSSSELOOP 323 Untribute: tiesef: fund tooks, apartment, or suite number) TYLER, TX 75701 C(by, town, stills, r/p) Email SARAH.BOGUE@ALTICEUSA.COM Fax (optional) Corr fifeAtion Certification Certification (During of the statement of account must be certified and signed in accordance with Copyright Office regulations) I the undersigned, hereby outly that (Check one, <i>but only one</i> , of the boxes.) (Owner other than corporation or partnership) I am the outly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B. (Officer or partnership) I an an officer (f a corporation or partnership) of the legal entity identified as owner of the cable system in line 1 of space B. (Officer or partnership) I an an officer (f a corporation, and belief, and are made in good faith. (I autor corporation 1001(1966)) (I autor corporation agent are in the inter signature on the line above to certify this statement. Enter signature (e.g., fs/ John Smith) Typed or printed name: (LAN DANNENBAUM Title: SUP, PROGRAMMING (The or effetal partnership)	dividual to		om
[Number, struet, rural route, spatiment, or subte number] PC Email SARAH BOGUE@ALTICEUSA.COM Fax (optional) Certification		Name SARAH BOGUE	Telephone (903) 579-3121
TYLER, TX 75701 (City, row, state, sig) Email SARAH.BOGUE@ALTICEUSA.COM Pax (optional) Pax (optional			
Email SARAH BOGUE@ALTICEUSA.COM Fax (optional) Construction Certification Certification Certification Construction Certification Certification Certification Certification Construction Certification Certification Certification Certification Certification Construction Certification Cerification Certification		TYLER, TX 75701	
Certification Certification Certification It we undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or (Fortier or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. (Fortier or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. (Fortier or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. (Fortier or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. (Subsci C, Section 1001(1986)) 			
P Certification • 1, 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 B; or Owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or Officer or partner) I am an officer (if a corporation) or a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. • 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. I'B US.C., Section 1001(1986) Mark and are made in good faith. Typed or printed name: ALAN DANNENBEAUM Typed or printed name: Pupper Orgonamined in corporation held in corporation or pathership). Title: SVP, PROGRAMMING Title: SVP, PROGRAMMING		Email SARAH.BOGUE@ALTICEUSA.COM Fax (optiona	al)
Vertification • 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 B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system 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 the rowner of the tests of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] V /s/ Alan Dannenbaum 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: LAN DANNENBAUM Title: SVP. PROCRAMMINE Title: SVP. PROCRAMMINE	-	ERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office	e regulations)
 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified 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 of the cable system 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 two, 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)] Mercer A. S. Section 1001(1986) Mercer A. S. Section 1001 (1986) Mercer A. S. Section 1001 (1986) Mercer A. S. Section 1001 (1986)<	_	I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
 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 of the cable system 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)] Marcine A. S. Section 1001(1986) Marcine A. S. Section 1001(1986) Marcine A. S. Section 1001(1986) There 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: S.P. PROGRAMMINE (Title of official position held in corporation or partnership) 		(Owner other than corporation or partnership) I am the owner of the cable system as identified in lir	e 1 of space B; or
 (officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B. 1 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)] Marcine A. S. S. Section 1001(1986) Marcine A. S. Section 1001(1986) <l< td=""><td></td><td></td><td>of the cable system as identified</td></l<>			of the cable system as identified
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)]			entified as owner of the cable system
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)] Image: Subscript of the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] Image: Subscript of the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] Image: Subscript of the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] Image: Subscript of the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] Image: Subscript of the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] Image: Subscript of the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] Image: Subscript of the faith of			
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)		are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	tained herein
Typed or printed name: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)		X /s/ Alan Dannenbaum	
Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)			ement.
(Title of official position held in corporation or partnership)		Typed or printed name: ALAN DANNENBAUM	
Date: 08/18/2019		Date: 08/18/20	019

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

unting Period: 2019/1	FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
UEL COMMUNICATIONS LLC	0209
 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	
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 Assessme
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
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