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.

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
8/28/2019	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:								
Accounting	2019/1								
Period									
B Owner	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 corpo rate title of the subsidiary, not that of the parent corporation 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 submi a single statement of account and royalty fee payment covering the entire accounting perioa 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								
				00791220191					
				007912 2019/1					
				2010/1					
	3015 S SE LOOP 323								
	TYLER, TX 75701								
С	INSTRUCTIONS: In line 1, give any business or trade names used to ic names already appear in space B. In line 2, give the mailing address of								
System	IDENTIFICATION OF CABLE SYSTEM:	<u> </u>							
Cyclem	PARKERSBURG								
	MAILING ADDRESS OF CABLE SYSTEM:								
	2 (Number, street, rural route, apartment, or suite number)								
	(City, town, state, zip code)								
D	Instructions: For complete space D instructions, see page 1b. Identify	only the fret comp	nunity convod bolow and rol	ist on page 1h					
_		offiny the first confin	numity served below and rei	St off page 1b					
Area Served	with all communities. CITY OR TOWN	STATE							
		WV							
First Community	nunity								
•	Below is a sample for reporting communities if you report multiple cha	Innel line-ups in S	pace G. CH LINE UP	SUB GRP#					
	Alda	MD	A CH LINE UP	50B GRP#					
Sample	Alliance	MD	В	2					
	Gering	MD	В	3					

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and 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.

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 007912 **CEQUEL COMMUNICATIONS LLC** Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. CITY OR TOWN STATE CH LINE UP SUB GRP# **PARKERSBURG** WV В **First ADDISON** W۷ Ε Community BELMONT WV 5 **BELPRE** WV В 4 **BOAZ** WV В 4 **CHESHIRE** OH See instructions for **CHESHIRE VILLAGE** OH additional information on alphabetization. DAVISVILLE В 4 **ELIZABETH** W۷ D 6 **GALLIPOLIS** E OH **GALLIPOLIS TOWNSHIP** OH Ε Add rows as necessary. E **HARTFORD** WV **HENDERSON** WV JACKSON COUNTY W۷ Ε В **MARIETTA** OH 4 **MARIETTA TOWNSHIP** В OH WV **MASON** Ε **MASON COUNTY** W۷ E **MIDDLEPORT** W۷ **NEW HAVEN** WV **NEW MARTINSVILLE** WV Α В **NORTH HILLS** W۷ 4 **PADEN** WV Α **PLEASANTS COUNTY** WV C 5 **POMEROY** OH Ε PT. PLEASANT W۷ Ε RACINE OH **RAVENSWOOD** WV Ε **RENO** OH В 4 Ε **RIPLEY** WV **ROANE COUNTY** 8 WV E RUTLAND OH 2 SISTERVILLE W۷ Α **SPENCER** WV 8 **SPRINGFIELD** OH E ST. MARY'S W۷

OH

W۷

W۷

WV

WV

Ε

A

В

В

Α В 3

4

VIENNA

WAVERLY

SYRACUSE

TYLER COUNTY

WETZEL COUNTY

WILLIAMSTOWN

WIRT COUNTY	WV	D	6
WOOD COUNTY	WV	В	4

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CEQUEL COMMUNICATIONS LLC

SYSTEM ID#

007912

Ε

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLOCK 1					BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE		CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	
Residential:								
Service to first set	38,629	\$	34.99					
 Service to additional set(s) 	69,225		0					
FM radio (if separate rate)								
Motel, hotel								
Commercial	1,004	\$	34.99					
Converter								
Residential								
Non-residential								
1	I			7		1	T	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2			
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE
Continuing Services:		Installation: Non-residential		
• Pay cable	\$ 19.00	Motel, hotel		
 Pay cable—add'l channel 		Commercial		
Fire protection		Pay cable		
 Burglar protection 		 Pay cable-add'l channel 		
Installation: Residential		Fire protection		
First set	\$ 99.00	Burglar protection		
 Additional set(s) 	\$ 25.00	Other services:		
 FM radio (if separate rate) 		Reconnect	\$ 40.00	
Converter		Disconnect		
		Outlet relocation	\$ 25.00	
		 Move to new address 	\$ 99.00	

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN					SYSTEM ID#	Namo		
CEQUEL COMI					007912			
carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base basis under specific FC 10 December 11 December 12 December 12 December 13 December 14 December 15 December 16 December 16 December 17 December 17 December 17 December 18 Dece	G, identify even system during the ions in effect on 6.61(e)(2) and (6.61(e)(2) and (6.61(e)(2	y television st he accounting in June 24, 19 4), or 76.63 (in the next respect to any ations, or authors, or authors, or authors, or authors, or authors, in a station acceptable in a station acceptable in a station acceptable in a station. Whether the station, whether the station, whether the station acceptable (v) of the the local service in column on during the me basis becar multicast strain or before Jumitter or an acceptable (v), see page (v) ch station. For	period, except 81, permitting the referring to 76.6 paragraph. A distant stations orizations: tit in space I (the stion was carried the basis station to the period of the reported in the referring to the reported in the re	(1) stations carried ecarriage of cert 1(e)(2) and (4))]; as carried by your of the Special Statement of both on a substitute, see page (v) of the seed of the see	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your stering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing try transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the	Primary Transmitters: Television		
FCC. For Mexican or 0 Note: If you are utilizir				•	h which the station is identifed. channel line-up.			
		CHANN	EL LINE-UP	AA		-		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
WNPB-1	24	E	No	,	MORGANTOWN, WV			
WNPB-2	24.2	E-M	No		MORGANTOWN, WV	See instructions for		
WNPB-3	24.3	E-M	No		MORGANTOWN, WV	additional information on alphabetization.		
WNPB-HD1	24	E-M	No		MORGANTOWN, WV	on alphabetization.		
WPGH-1	53	I	Yes	0	PITTSBURGH, PA			
WTAE-1	4	N	Yes	0	PITTSBURGH, PA			
WTOV-1	9	N	No		STEUBENVILLE, OH			
WTOV-2	9.2	I	No		STEUBENVILLE, OH			
WTOV-3	9.3	I-M	No		STEUBENVILLE, OH			
WTOV-HD1	9	N-M	No		STEUBENVILLE, OH			
WTOV-HD2	9.2	I-M	No		STEUBENVILLE, OH			
WTRF-1	7	N	No		WHEELING, WV			
WTRF-2	7.2	I-M	No		WHEELING, WV			
WTRF-3	7.3	N-M	No		WHEELING, WV			
WTRF-HD1	7	N-M	No		WHEELING, WV			

G

Primary

Transmitters: Television

Form SA3E Long Form (Rev. 05-17)

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **CEQUEL COMMUNICATIONS LLC** 007912 PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program

basis under specifc 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 located in the paper SA3 form.

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 multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has 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. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: 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 identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

	CHANNEL LINE-UP AB								
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
WBNS-1	10	N	Yes	0	COLUMBUS, OH				
WCHS-1	8	N	No		CHARLESTON, WV				
WCHS-HD1	8	N-M	No		CHARLESTON, WV				
WIYE-1	47	N	No		PARKERSBURG, WV				
WIYE-2	47.2	I-M	No		PARKERSBURG, WV				
WIYE-HD1	47	N-M	No		PARKERSBURG, WV				
WOUB-1	20	E	No		ATHENS, OH				
WOUB-HD1	20	E-M	No		ATHENS, OH				
WOVA-1	22	I	No		PARKERSBURG, WV				
WOVA-2	22.2	I-M	No		PARKERSBURG, WV				
WOVA-HD1	22	I-M	No		PARKERSBURG, WV				
WOVA-HD2	22.2	I-M	No		PARKERSBURG, WV				
WOWK-1	13	N	No		HUNTINGTON, WV				
WOWK-2	13.2	I-M	No		HUNTINGTON, WV				
WOWK-3	13.3	I-M	No		HUNTINGTON, WV				
WOWK-HD1	13	N-M	No		HUNTINGTON, WV				
WSAZ-1	3	N	No		HUNTINGTON, WV				
WSYX-1	6	N	Yes	0	COLUMBUS, OH				
WTAP-1	15	N	No		PARKERSBURG, WV				
WTAP-2	15.2	I-M	No		PARKERSBURG, WV				
WTAP-HD1	15	N-M	No		PARKERSBURG, WV				
WVPB-1	33	E	Yes	0	HUNTINGTON, WV				
WVPB-2	33.2	E-M	Yes	0	HUNTINGTON, WV				
WVPB-3	33.3	E-M	Yes	0	HUNTINGTON, WV				
WVPB-HD1	33	E-M	Yes	E	HUNTINGTON, WV				

ACCOUNTING FORM SA3E, PAGE 3.					
LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007912	Name			
PRIMARY TRANSMITTERS: TELEVISION					
In General: In space G, identify every television station (including translator stations and low power carried by your cable system during the accounting period, except (1) stations carried only on a part-FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs.	time basis under	G			
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 st substitute program basis, as explained in the next paragraph.	tations carried on a	Primary Transmitters:			
Substitute Basis Stations: With respect to any distant stations carried by your cable system on basis under specific FCC rules, regulations, or authorizations:	a substitute program	Television			
 Do not list the station here in space G—but do list it in space I (the Special Statement and Program station was carried only on a substitute basis. 	Log)—if the				
 List the station here, and also in space I, if the station was carried both on a substitute basis and al basis. For further information concerning substitute basis stations, see page (v) of the general ins in the paper SA3 form. 					

Column 2: Give the channel number the FCC has 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. This may be different from the channel on which your cable system carried the station.

WETA-simulcast).

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 multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately: for example

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia 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 (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: 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 **Note:** If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

	CHANNEL LINE-UP AC								
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
WCHS-1	8	N	No		CHARLESTON, WV				
WCHS-HD1	8	N-M	No		CHARLESTON, WV				
WIYE-1	47	N	No		PARKERSBURG, WV				
WIYE-2	47.2	I-M	No		PARKERSBURG, WV				
WIYE-HD1	47	N-M	No		PARKERSBURG, WV				
WNPB-1	24	E	Yes	0	MORGANTOWN, WV				
WNPB-2	24.2	E-M	Yes	0	MORGANTOWN, WV				
WNPB-3	24.3	E-M	Yes	0	MORGANTOWN, WV				
WNPB-HD1	24	E-M	Yes	E	MORGANTOWN, WV				
WOVA-1	22	I	No		PARKERSBURG, WV				
WOVA-2	22.2	I-M	No		PARKERSBURG, WV				
WOVA-HD1	22	I-M	No		PARKERSBURG, WV				
WOVA-HD2	22.2	I-M	No		PARKERSBURG, WV				
WOWK-1	13	N	Yes	0	HUNTINGTON, WV				
WOWK-2	13.2	I-M	Yes	0	HUNTINGTON, WV				
WOWK-3	13.3	I-M	Yes	0	HUNTINGTON, WV				
WOWK-HD1	13	N-M	Yes	E	HUNTINGTON, WV				
WSAZ-1	3	N	Yes	0	HUNTINGTON, WV				
WTAP-1	15	N	No		PARKERSBURG, WV				
WTAP-2	15.2	I-M	No		PARKERSBURG, WV				
WTAP-HD1	15	N-M	No		PARKERSBURG, WV				

G

Primary

Transmitters:

Television

PRIMARY TRANSMITTERS: TELEVISION

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CEQUEL COMMUNICATIONS LLC

Name

Name

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 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 ε substitute program basis, as explained in the next paragraph

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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 multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air i its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommerci 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 (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the

Column 6: 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 Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WBNS-1	10	N	Yes	0	COLUMBUS, OH
WCHS-1	8	N	No		CHARLESTON, WV
WCHS-2	8.2	I-M	No		CHARLESTON, WV
WCHS-3	8.3	I-M	No		CHARLESTON, WV
WCHS-4	8.4	I-M	No		CHARLESTON, WV
WCHS-HD1	8	N-M	No		CHARLESTON, WV
WLPX-1	29	ı	No		CHARLESTON, WV
WLPX-HD1	29	I-M	No		CHARLESTON, WV
WOUB-1	20	E	No		ATHENS, OH
WOWK-1	13	N	No		HUNTINGTON, WV
WOWK-2	13.2	I-M	No		HUNTINGTON, WV
WOWK-3	13.3	I-M	No		HUNTINGTON, WV
WOWK-HD1	13	N-M	No		HUNTINGTON, WV
WQCW-1	30	I	No		PORTSMOUTH, OH
WQCW-HD1	30	I-M	No		PORTSMOUTH, OH
WSAZ-1	3	N	No		HUNTINGTON, WV
WSAZ-2	3.2	I-M	No		HUNTINGTON, WV
WSAZ-HD1	3	N-M	No		HUNTINGTON, WV
WTAP-1	15	N	No		PARKERSBURG, WV
WTSF-1	61	I	No		ASHLAND, KY
WVAH-1	11	I	No		CHARLESTON, WV
WVAH-2	11.2	I-M	No		CHARLESTON, WV
WVAH-3	11.3	I-M	No		CHARLESTON, WV
WVAH-HD1	11	I-M	No		CHARLESTON, WV
WVPB-1	33	E	Yes	0	HUNTINGTON, WV
WVPB-2	33.2	E-M	Yes	0	HUNTINGTON, WV
WVPB-3	33.3	E-M	Yes	0	HUNTINGTON, WV
WVPB-HD1	33	E-M	Yes	Е	HUNTINGTON, WV

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007912 **CEQUEL COMMUNICATIONS LLC** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 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 ε Primary substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television pasis under specifc 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form

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 multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air i its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia 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 (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subjec of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by th FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

	CHANNEL LINE-UP AE							
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
WBNS-1	10	N	Yes	0	COLUMBUS, OH			
WCHS-1	8	N	No		CHARLESTON, WV			
WCHS-2	8.2	I-M	No		CHARLESTON, WV			
WCHS-3	8.3	I-M	No		CHARLESTON, WV			
WCHS-4	8.4	I-M	No		CHARLESTON, WV			
WCHS-HD1	8	N-M	No		CHARLESTON, WV			
WJOS-1	58	ı	No		POMEROY, OH			
WLPX-1	29	I	No		CHARLESTON, WV			
WLPX-HD1	29	I-M	No		CHARLESTON, WV			
WOUB-1	20	E	No		ATHENS, OH			
WOWK-1	13	N	No		HUNTINGTON, WV			
WOWK-2	13.2	I-M	No		HUNTINGTON, WV			
WOWK-3	13.3	I-M	No		HUNTINGTON, WV			
WOWK-HD1	13	N-M	No		HUNTINGTON, WV			
WQCW-1	30	ı	No		PORTSMOUTH, OH			
WQCW-HD1	30	I-M	No		PORTSMOUTH, OH			
WSAZ-1	3	N	No		HUNTINGTON, WV			
WSAZ-2	3.2	I-M	No		HUNTINGTON, WV			
WSAZ-HD1	3	N-M	No		HUNTINGTON, WV			
WTAP-1	15	N	No		PARKERSBURG, WV			
WTSF-1	61	I	No		ASHLAND, KY			
WVAH-1	11	ı	No		CHARLESTON, WV			
WVAH-2	11.2	I-M	No		CHARLESTON, WV			
WVAH-3	11.3	I-M	No		CHARLESTON, WV			
WVAH-HD1	11	I-M	No		CHARLESTON, WV			
WVPB-1	33	Е	No		HUNTINGTON, WV			
WVPB-2	33.2	E-M	No		HUNTINGTON, WV			
WVPB-3	33.3	E-M	No		HUNTINGTON, WV			
WVPB-HD1	33	E-M	No		HUNTINGTON, WV			

G

Primary

Transmitters:

Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CEQUEL COMMUNICATIONS LLC

PRIMARY TRANSMITTERS: TELEVISION

Name

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc 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 othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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 multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air i its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommerci 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 (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable syster carried the distant station on a part-time basis because of lack of activated channel capacity

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the

Column 6: 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 Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AF	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WCHS-1	8	N	No		CHARLESTON, WV
WCHS-2	8.2	I-M	No		CHARLESTON, WV
WCHS-3	8.3	I-M	No		CHARLESTON, WV
WCHS-4	8.4	I-M	No		CHARLESTON, WV
WCHS-HD1	8	N-M	No		CHARLESTON, WV
WJOS-1	58	I	No		POMEROY, OH
WLPX-1	29	I	No		CHARLESTON, WV
WLPX-HD1	29	I-M	No		CHARLESTON, WV
WOUB-1	20	E	Yes	0	ATHENS, OH
WOWK-1	13	N	No		HUNTINGTON, WV
WOWK-2	13.2	I-M	No		HUNTINGTON, WV
WOWK-3	13.3	I-M	No		HUNTINGTON, WV
WOWK-HD1	13	N-M	No		HUNTINGTON, WV
WQCW-1	30	I	No		PORTSMOUTH, OH
WQCW-HD1	30	I-M	No		PORTSMOUTH, OH
WSAZ-1	3	N	No		HUNTINGTON, WV
WSAZ-2	3.2	I-M	No		HUNTINGTON, WV
WSAZ-HD1	3	N-M	No		HUNTINGTON, WV
WTAP-1	15	N	No		PARKERSBURG, WV
WTSF-1	61	I	No		ASHLAND, KY
WVAH-1	11	I	No		CHARLESTON, WV
WVAH-2	11.2	I-M	No		CHARLESTON, WV
WVAH-3	11.3	I-M	No		CHARLESTON, WV
WVAH-HD1	11	I-M	No		CHARLESTON, WV
WVPB-1	33	E	No		HUNTINGTON, WV
WVPB-2	33.2	E-M	No		HUNTINGTON, WV
WVPB-3	33.3	E-M	No		HUNTINGTON, WV
WVPB-HD1	33	E-M	No		HUNTINGTON, WV

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007912 **CEQUEL COMMUNICATIONS LLC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

FORM SA3E. PAGE 5.						ACCOUNTING	PERIOD: 2019/1					
LEGAL NAME OF OWNER OF	CABLE SYST	EM:			;	SYSTEM ID#	Nome					
CEQUEL COMMUNICA	TIONS LI	_C				007912	Name					
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	IT AND PROGRAM LOG				<u> </u>					
In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.												
1. SPECIAL STATEMENT				J			Carriage:					
During the accounting per broadcast by a distant state		r cable system	carry, on a substitute basi	s, any nonnet	twork television progran	n X No	Special Statement and Program Log					
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is '	Yes," you mu	ist complete the prograi	m	og. aog					
log in block 2.	DDOODA	МО										
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	citute prograce, please a of every nor distant statis gulations, o tion. Do no Lucy" or "NE n was broad sign of the sadcast static adian static atth and day ye "5/7." es when the Example: a er "R" if the and regulatic ogramming	m on a separa attach additional network televiton and that your authorization at use general of the Basketball: Ideast live, enterestation broadca on's location (thins, if any, the when your system substitute program carrillisted program ons in effect du	al pages. ision program (substitute pur cable system substitute pur cable system substitute pur cable system substitute pur cable system substitute programs. See page (vi) of the generategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programs are community to which the community with which the community with which the stem carried the substitute purposed by a system from 6:01:10 was substituted for programs.	rogram) that, of for the program of the program of the program of the program. Use the program of the program o	during the accounting ramming of another stans located in the paper List specific program need by the FCC or, in tified). numerals, with the mor List the times accurate 8:30 p.m. should be our system was require ter "P" if the listed pro	nth ly						
S	UBSTITUT	E PROGRAM	1		EN SUBSTITUTE	7. REASON						
TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	FOR DELETION						
	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO							
					<u> </u>							
					<u> </u>							
					<u> </u>							
					_							
					_							
					_							
					_							
												

ACCOUNTING PERIOD: 2019/1 FORM SA3E, PAGE 6. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007912 **CEQUEL COMMUNICATIONS LLC PART-TIME CARRIAGE LOG** J In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for parttime carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.-12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN HOURS HOURS** DATE **FROM** TO DATE **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM: QUEL COMMUNICATIONS LLC			SYS	O07912	Name
Install all a	OSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount amounts (gross receipts) paid to your cable system by subscribers for the system's seccidentifed in space E) during the accounting period. For a further explanation of how to de (vii) of the general instructions.	ondary	transmiss	sion service		K Gross Receipts
IMF	Gross receipts from subscribers for secondary transmission service(s) during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.		\$ (Amount o	9,246,7 f gross receipts		
• Cor • Cor • If your fee • If you	YRIGHT ROYALTY FEE Juctions: Use the blocks in this space L to determine the royalty fee you owe: Implete block 1, showing your minimum fee. Implete block 2, showing whether your system carried any distant television stations. In system did not carry any distant television stations, leave block 3 blank. Enter the air from block 1 on line 1 of block 4, and calculate the total royalty fee. In system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.					Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b ${\rm ck}$ 3 below.	e enter	ed on line	e 1 of		
	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.	entered	d on line 2	2 in block		
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be	entered o	on line		
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.		64 perce	nt of the	707 72	
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.		\$	9,246,7	01.13	
	This is your minimum fee.	\$		98,3	885.82	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting peri X Yes—Complete the DSE schedule. No—Leave block 3 below blank and the space of	nn 4, yo iod?	ou must o	check		
Block	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	96,5	508.27	
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero				0.00	
	Line 3. Add lines 1 and 2 and enter here	\$		96,5	508.27	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger		\$	98,3	385.82	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter				0.00	submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)				0.00	deposits under Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE		\$	7	725.00	additional fees. Division for the appropriate
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		99,1	110.82	form for submitting the
	EFT Trace # or TRANSACTION ID #]			additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to	•	• .,			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007912										
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast station to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	ns										
Channels	Enter the total number of channels on which the cable system carried television broadcast stations	55										
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	397										
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)											
Be Contacted 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)											
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulation	S.										
Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or											
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable syster in line 1 of space B and that the owner is not a corporation or partnership; or	n as identified										
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of in line 1 of space B.	the cable system										
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained here 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)]	in										
	X /s/ Alan Dannenbaum											
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the b "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compa											
	Typed or printed name: ALAN DANNENBAUM											
	Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)											
	Date: August 18, 2019											

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC 007912	Namo
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 in the paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below.	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address	- - -
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q
For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
Line 3 Multiply line 2 by the number of days late and enter the sum here	_
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	-
contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing.	
Owner Address	
First community served Accounting period ID number	

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

ACCOUNTING PERIOD: 2019/1

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerica value given by the Copyright Act to each distant television station carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3E (LONG FORM)

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

Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that be all the control of the control of the control of the BOT.	

Note that local stations are not counted at all in computing DSEs.

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number or hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, ir whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable systems fling SA3E (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)] in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

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

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

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

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

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

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

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distant—that is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable.
 First DSE 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
 - 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule; or

If any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule.

4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

- Calculate a separate base rate fee for each subscriber group, using
 the rates given above;
 the total number of DSEs for that group's complement of stations;
 and
 the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

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

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

EXAMPLE:

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

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



	Distant Stations Carried		Identification o		
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
nin	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
s	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
)-	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
	TOTAL DSFs	2 472		TOTAL GROSS RECEIPTS	\$600,000,00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

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

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

ACCOUNTING PERIOD: 2019/1

1	LEGAL NAME OF OWNER OF CABLE				S	YSTEM ID#					
•	CEQUEL COMMUNICAT	IONS LLC				007912					
	SUM OF DSEs OF CATEGOR		NS:								
	Add the DSEs of each station										
	Enter the sum here and in line		6.00								
	Instructions:										
2	In the column headed "Call S	Sign": list the ca	II signs of all distant stations	identified by	the letter "O" in column 5						
Computation	of space G (page 3). In the column headed "DSE"	'• for each inden	endent station, dive the DSF	as "1 0"· for	each network or noncom-						
of DSEs for	mercial educational station, giv			2 43 1.0 , 101	cach fictwork of fioricom						
Category "O"	, ,		CATEGORY "O" STATION	IS: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	WBNS-1	0.250									
	WNPB-1	0.250									
	WNPB-2	0.250									
	WNPB-3	0.250									
	WOUB-1	0.250									
Add rows as	WOWK-1	0.250									
necessary.	WOWK-2	1.000									
Remember to copy	WOWK-3	1.000									
all formula into new	WPGH-1	1.000									
rows.	WSAZ-1	0.250									
	WSYX-1	0.250									
	WTAE-1	0.250									
	WVPB-1	0.250									
	WVPB-2	0.250									
	WVPB-3	0.250									
	WW 1 B-3	0.230									
											
											
											
						ł					
						ł					
											
											
						ļ					
1				ļ		<u> </u>					
						<u> </u>					
1						<u> </u>					
						<u> </u>					
1						<u> </u>					
											
1						<u> </u>					
						<u> </u>					
1						<u> </u>					

Name		DWNER OF CABLE SYSTEM: DMMUNICATIONS LL	С				S	6YSTEM ID# 007912			
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.										
Capacity		C	ATEGORY	LAC STATIONS:	COMPUTAT	ION OF DSEs					
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEN	R JRS ED BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAC VALUE	F 5. TYPE GE VALU		SE			
			÷			x	<u>=</u>				
				:		х х					
			÷		=	X	=				
			÷	:	_	x					
							= =				
			÷	:		x	=				
	SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule, 0.00										
Computation of DSEs for Substitute-Basis Stations	 space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted 										
	1			BASIS STATION			T	T			
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAYS IN YEAR	S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE			
		÷		=			÷ -	=			
		÷		=			.	=			
		÷		=			÷	=			
		÷		=			÷ -				
	÷ = SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule,										
5		ER OF DSEs: Give the am sapplicable to your system		poxes in parts 2, 3, and	4 of this schedul	le and add them to provide	e the tota				
Total Number	1. Number o	f DSEs from part 2●				>	6.00				
of DSEs		f DSEs from part 3 ●				<u> </u>	0.00				
	3. Number o	f DSEs from part 4 ●				>	0.00				
	TOTAL NUMBE	R OF DSEs					-	6.00			

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/1

LEGAL NAME OF C							S'	YSTEM ID# 007912	Name
Instructions: Bloc In block A: • If your answer if schedule. • If your answer if	"Yes," leave the re	emainder of _l		7 of the DSE sche	edule blank aı	nd complete pa	art 8, (page 16) of	f the	6
			BLOCK A: T	ELEVISION M.	ARKETS				Computation of 3.75 Fee
<u> </u>		schedule—I						gulations in	3.75 Fee
		BLO	CK B: CARR	IAGE OF PERI	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	of distant st and regulati ne DSE Sche	ations listed in ons prior to Jur dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below r	f this schedule	e that your sys	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC r. A Stations carrier 76.61(b)(c)] B Specialty static C Noncommeric D Grandfather for instructions for E Carried pursua *F A station pre	ed pursuant on as define al education d station (76. or DSE scheo ant to individ viously carrie JHF station v	ulations cited be to the FCC ma d in 76.5(kk) (7 al station [76.5: 65) (see parag dule). ual waiver of F ed on a part-tim vithin grade-B o	6.59(d)(1), 76.61(9(c), 76.61(d), 76. raph regarding su CC rules (76.7) ne or substitute ba contour, [76.59(d)(ose in effect of 76.57, 76.59(b) re)(1), 76.63(a) 63(a) referring bstitution of g	n June 24, 198 a), 76.61(b)(c), a) referring to 7 g to 76.61(d) irandfathered s une 25, 198	76.63(a) referring 76.61(e)(1 stations in the		
Column 3:	*(Note: For those this schedule to	e stations ide determine the	entified by the le e DSE.)	parts 2, 3, and 4 etter "F" in column	1 2, you must	complete the v	T	T	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
WBNS-1	D	0.25	WOWK-2	M	1.00	WVPB-1	C	0.25	
WNPB-1	C	0.25	WOWK-3	M	1.00	WVPB-2	M	0.25	
WNPB-2	M	0.25	WPGH-1	A	1.00	WVPB-3	M	0.25	
WNPB-3	M		WSAZ-1		0.25				
WOUB-1	C		WSYX-1	D	0.25	-	-		
WOWK-1	D	0.25	WTAF-1	D	0.25	-	†		
WOWK-1		0.20	WIAL-I		0.20				
								6.00	
		В	LOCK C: CO	MPUTATION OF	F 3.75 FEE				
	total number of								
Line 3: Subtract	line 2 from line 1 eave lines 4–7 b	. This is the	e total number	of DSEs subjec		rate.			
Line 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375	and enter s	um here				x		permited/ partially nonpermitted carriage?
Line 6: Enter tota	al number of DSI	Es from line	: 3						If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter hei	e and on line	2, block 3, spac	e L (page 7)			0.00	

	CEQUEL COMMUNICATIONS LLC 007912										
				JED)	(CONTINU	ION MARKETS	A: TELEVIS	BLOCK			
6	3. DSE		2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	3. DSE	2. PERMITTED BASIS	1. CALL SIGN	
Computation 3.75 Fee											
											••••
			ļ								
											•••
											•••
											•••
										••••••	•••
											•••
											•••
											•••
											•••
											••••
											•••
											•••
											
	•••••										

Name	CEQUEL COM								S	48TEM ID# 007912		
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage Carriage Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i. column 1: List the call sign for each distant station identified by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1 Column 3: Indicate the basis of carriage on which the station was carried by listing one of the following letters (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should in block B, column 3 of part 6 of this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the design statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. F												
		PERMITT	ED DSE FOR STA	TIONS CARRI	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS			٦	
	1. CALL SIGN		OR 3. AC				5. PF		6. P	ERMITTED DSE		
											ī	
7 Computation of the	Instructions: Block A must be completed. In block A: If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.											
Syndicated			BLOC	K A: MAJOR	TI	ELEVISION MARK	ET					
Exclusivity	_										_	
Surcharge	Is any portion of the or	cable system v	vithin a top 100 maj	or television mar	ke	t as defned by section 7	6.5 of FCC	rules in effect J	une 24,	1981?		
	Yes—Complete	blocks B and	IC.			X No—Proceed to	part 8					
	BLOCK B: Ca	arriage of VHI	F/Grade B Contou	Stations		BLOCK	C: Compu	tation of Exem	pt DSE	i		
	Is any station listed in commercial VHF stati or in part, over the ca	on that places				Was any station listed nity served by the cab to former FCC rule 76	le system p					
	Yes—List each s X No—Enter zero a		th its appropriate per part 8.	mitted DSE		Yes—List each st X No—Enter zero a			ate permi	tted DSE		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	in I	DSE		
							 					
			-				 					
			-									
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00		

LEGAL NA	AME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007912	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	00.012	
Section			7
1 Section	Enter the amount of gross receipts from space K (page 7)	9,246,787.73	1
2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge.		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section 4a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name									
	(CEQUEL COMMUNICATIONS LLC							
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.							
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$							
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$							
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here.							
		D. Enter 0.00089 of gross receipts (the amount in section 1)							
		E. Subtract 4.000 from the total DSEs (the figure on line C in							
		section 2) and enter here							
		F. Multiply line D by line E and enter here							
		Enter here and on line 2, block 4, space L (page 7)	A of part B below bers s "local						
		Syndicated Exclusivity Surcharge	<u></u> .						
8 Computation of Base Rate Fee	You me 6 was 6 In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of particle decked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. but answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below. but answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. but answer is "Yes" (that is, if you carried one or "Yes" (that	ow						
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS							
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?							
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the following sections.								
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶ _ \$							
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.).							
	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.								
		A. Enter 0.01064 of gross receipts (the amount in section 1)							
	B. Enter 0.00701 of gross receipts (the amount in section 1)								
	C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here								
		D. Multiply line B by line C and enter here	_						
		E. Add lines A, and D. This is your base rate fee. Enter here							
		and in block 3, line 1, space L (page 7) Base Rate Fee	0.00						
		ρασο παιο του	<u> </u>						

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/1

	AME OF OWNER OF CABLE SYSTEM: JEL COMMUNICATIONS LLC	SYSTEM ID# 007912	Name
	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1) **State		8
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$		Computation of Base Rate Fee
	C. Multiply line B by 3.000 and enter here		Duod Nato i oo
	D. Enter 0.00330 of gross receipts (the amount in section 1) \$ \bigseleft\{ \bigseleft\} \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\{ \bigseleft\} \bigseleft\} \bigs		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here \$		
	G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ \$	0.00	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadce be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple chann G.		9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fe from subscribers located within the station's local service area, from your system's total gross receipts. To take a on, you must:		Computation of
First: D station DSEs a	bivide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	Base Rate Fee and Syndicated Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
	For each community served, determine the local service area of each wholly distant and each partially distant state that community.	tion you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were to the station's local service area. A subscriber located outside the local service area of a station is distant to that state token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Der group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
groups.	ting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system.	stem's subscriber	
• Identif	y the communities/areas represented by each subscriber group.		
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to a bers in the group.	I of the	
1) your	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it f this schedule; or,	in parts 2, 3,	
2) any į	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in l 6 of this schedule.	olock B,	
•	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	ate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general paper SA3 form.	instructions	
page. I	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the n making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the that group's complement of stations and total gross receipts from the subscribers in that group). You do not ne	nat is, the total	

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

actual calculations on the form.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007912 **CEQUEL COMMUNICATIONS LLC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF								S	YSTEM ID# 007912	Name
	Bl	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR	EACH	SUBSCRI	BER GROUP		
		FIRST	SUBSCRIBER GRO	UP			SECOND	SUBSCRIBER GROU	JP	•
COMMUNITY/ A	REA	SUBSC	RIBER GROUP 1		COMMUNITY/ AREA SUBSCRIBER GROUP 2					9 Computation
CALL SIGN		DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE	of
WPGH-1	Α	1.00	OF ILL STORY	DOL	WPGH-1	D	1.00	OF ILL OF OTH	DOL	Base Rate Fee
					WTAE-1	D	0.25			and
•••••			-							Syndicated
•••••	•••••									Exclusivity
										Surcharge
	•••••									for
•••••				•••••••••••••••••••••••••••••••••••••••						Partially
								_		Distant
				***************************************						Stations

				***************************************			1			
							T			
							T			
Total DSEs		•		1.00	Total DSEs		•		1.25	
Gross Receipts	First G	roup	\$ 608	3,973.49	Gross Receipts	Secon	d Group	\$	96,572.95	
Base Rate Fee	First Gr	roup	\$	5,479.48	Base Rate Fee	Secon	d Group	\$	1,196.78	
					<u> </u>			,		
			SUBSCRIBER GRO					SUBSCRIBER GROU	JP	
COMMUNITY/ A	REA	SUBSC	RIBER GROUP 3	3	COMMUNITY/	AREA	SUBSCF	RIBER GROUP 4		
CALL SIGN		DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE	
WPGH-1	D	1.00			WBNS-1	D	0.25			
WTAE-1	D	0.25			WSYX-1	D	0.25			
					WVPB-1	С	0.25			
					WVPB-2	М	0.25			
					WVPB-3	M	0.25			
							.			
		. <mark>.</mark>								
		. <mark>.</mark>								
		<mark>.</mark>								
		<mark>.</mark>								
Total DSEs				1.25	Total DSEs				1.25	
Gross Receipts	Third G	Group	\$ 14	1,986.93	Gross Receipts	Fourth	Group	\$ 6,0	66,796.35	
Base Rate Fee	Third G	Group	\$	185.73	Base Rate Fee	Fourth	Group	\$	75,182.77	
			e fees for each subso	criber group	as shown in the b	oxes a	bove.		20.500.07	
Enter here and i	n block	3, line 1, s	space L (page 7)					\$	96,508.27	

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA SUBSCRIBER GROUP 6 COMMUNITY/ AREA SUBSCRIBER GROUP 6 COMPUTATION COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP 6 COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP OF BASE RATE FEES FOR EACH
SUBSCRIBER GROUP 5 COMMUNITY/ AREA SUBSCRIBER GROUP 6 GN DSE CALL SIGN DSE WBNS-1 D 0.25 Base Rate I
Computati
GN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Of Base Rate I C 0.25
······································
······································
M 0.25
M 0.25 WVPB-2 M 0.25 Syndicate
2 M 1.00 Surcharg
3 M 1.00 for
D 0.25 Partially
Distant
Stations Stations
······································
eipts First Group \$ 250,963.97 Gross Receipts Second Group \$ 120,343.01
Fee First Group \$ 6,628.59 Base Rate Fee Second Group \$ 1,280.45
SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP
ITY/ AREA SUBSCRIBER GROUP 7 COMMUNITY/ AREA SUBSCRIBER GROUP 8
GN DSE CALL SIGN DSE CALL SIGN DSE
D 0.25 WOUB-1 C 0.25
······································
······································
0.25 Total DSEs
S Total DSES
S 0.25 Total DSEs 0.25 Gross Receipts Fourth Group \$ 200,901.08

LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC 007912								Name
В				TE FEES FOR EACH				
		SUBSCRIBER GROU	JP			SUBSCRIBER GROU	Р	Ω
COMMUNITY/ AREA		RIBER GROUP 1		COMMUNITY/ AREA SUBSCRIBER GROUP 2				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
		_						Surcharge
								for
								Partially
								Distant
		_						Stations
							<mark></mark>	
							<u></u>	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 608,	973.49	Gross Receipts Second Group		\$ 96,572.95		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA	SUBSC	RIBER GROUP 3		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
OALL GIGIT	DOL	O/ LE GIGIT	DOL	O/ ILL GIGIT	DOL	O'NEE O'O'N	BOL	
							<u> </u>	
							<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Froun	s 14	986.93	Gross Receipts Fourth	Group	s 6.06	6,796.35	
C.000 Receipts Tillu C	J. 04p	· 149,		Oroso recorpts i outili	Oroup	* 0,00	7,7 55.55	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
D D-4- 5	- 1		-11		h	ļ		
Enter here and in block			noer group	as shown in the boxes a	.9vou	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC 007912								Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIFTH	SUBSCRIBER GROU	JP		SIXTH	SUBSCRIBER GROU	Р	^
COMMUNITY/ AREA		RIBER GROUP 5		COMMUNITY/ AREA SUBSCRIBER GROUP 6				9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
							<u></u>	Partially
							<mark></mark>	Distant
								Stations
							<u></u>	
							<u></u>	
							<u></u>	
	·						<u></u>	
	•						<u></u>	
Total DSEs	_	Ц	0.00	Total DSEs	<u> </u>	<u> </u>	0.00	
Gross Receipts First G	roup	\$ 250,	963.97	Gross Receipts Second Group		\$ 120,343.01		
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
!	SEVENTH	SUBSCRIBER GROU	IP		EIGHTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA	SUBSC	RIBER GROUP 7		COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u></u>	
							<u></u>	
	<u>.</u>						<mark></mark>	
	<u></u>						<mark></mark>	
								
Total DSEs			0.00	Total DSEs	ı		0.00	
Gross Receipts Third Group \$ 1,887,249.95			Gross Receipts Fourth Group \$ 200,901.08					
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
ne base rate	te			Base Rate Fee Fourth		\$	0.00	

ACCOUNTING PERIOD: 2019/1

FORM SA3E. PAGE 20.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CEQUEL COMMUNICATIONS LLC 007912 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

ACCOUNTING PERIOD: 2019/1

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CEQUEL COMMUNICATIONS LLC 007912 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and **Syndicated** this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. FIFTH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Second Group SEVENTH SUBSCRIBER GROUP EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE Third Group Fourth Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown