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				
02/28/2020	\$ 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	2019/2						
Period							
B Owner	Instructions:  Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account covering the interest of this is the system's first filling. If not, enter the system's ID	ss of the cable syste on the last day of th unting period.	em. the accounting period should su	•			
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM						
	CEQUEL COMMUNICATIONS LLC						
				06279920192			
				062799 2019/2			
	3015 S SE LOOP 323						
	TYLER, TX 75701						
	INSTRUCTIONS: In line 1, give any business or trade names used to i	identify the busine	ess and operation of the sys	tem unless these			
С	names already appear in space B. In line 2, give the mailing address o						
System	1 IDENTIFICATION OF CABLE SYSTEM:						
	DIXIE/FAYETTE COUNTY						
	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 com	munity served below and re	alist on nage 1h			
Area	with all communities.	only the hot com	indinity solved below and re	onst on page 15			
Served	CITY OR TOWN	STATE					
First	CHARLESTON	wv					
Community	Below is a sample for reporting communities if you report multiple ch	annel line-ups in S	Space G.				
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#			
Sample	Alda	MD	A	1			
Campio	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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

**ACCOUNTING PERIOD: 2019/2** FORM SA3E. PAGE 1b. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 062799 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# **CHARLESTON** WV Α 1 **First** BARBOURSVILLE WV Α Community **BELLE CITY** WV Α **BOONE COUNTY** W۷ Α **BOONE/JULIAN** WV Α **BOONE/WHITESVILLE** WV Α 2 See instructions for wv **CABELL COUNTY** Α additional information on alphabetization. CEDAR GROVE WV Α 1 CHESAPEAKE W۷ Α WV **CHEYLAN** Α **CLAY COUNTY** WV 2 Α WV 1 **CLENDENIN** Α **CRABTREE** W۷ Α 1 **DANVILLE** WV Α WV В DIXIE/FAYETTE COUNTY 4 **DIXIE/NICHOLAS COUNTY** WV 2 Α **DUNBAR** WV Α 1 Add rows as necessary. **EAST BANK** WV Α 1 **EAST LYNN** WV Α **FAYETTE COUNTY** W۷ Α 3 **FAYETTE/JODIE** WV Α 3 **FORT GAY** WV Α 1 3 **GAULEY BRIDGE** WV Α **GLASGOW** WV Α 1 HANDLEY WV Α 2 **HURRICANE** W۷ Α 2 INDEPENDENT MTN WV Α INDORE WV Α 2 WV Α INSTITUTE KANAWHA COUNTY W۷ Α W۷ Α LAVALETTE LINCOLN COUNTY WV 1 Α LOUDENDALE WV 1 Α **MADISON** WV Α **MARMET** WV Α W۷ Α **MILL CREEK** 

WV

WV

W۷

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1 3

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**MILTON** 

**NICHOLAS COUNTY** 

MONTGOMERY FAYETTE COUNTY

NITRO KANAWHA COUNTY	WV	Α	1
POND GAP	WV	Α	2
PUTNAM COUNTY	WV	Α	1
ROBSON	WV	Α	3
SMITHERS	WV	Α	3
SOUTH CHARLESTON	WV	Α	1
ST. ALBANS	WV	Α	1
SYLVESTER	WV	Α	2
TOWN OF PRATT	WV	Α	2
WAYNE	WV	Α	1
WHITESVILLE	WV	Α	2

Name
LEGAL NAME OF OWNER OF CABLE SYSTEM:
SYSTEM ID#
CEQUEL COMMUNICATIONS LLC
062799

## 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.

BL	OCK 1		П	BLOCK 2			
	NO. OF		П		NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS	RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:							
<ul> <li>Service to first set</li> </ul>	52,047	\$ 34.99	)				
<ul> <li>Service to additional set(s)</li> </ul>							
<ul> <li>FM radio (if separate rate)</li> </ul>			""				
Motel, hotel							
Commercial	1,776	\$ 34.99	)				
Converter			""				
<ul> <li>Residential</li> </ul>			""				
Non-residential			""[				
					•	·····	

## 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			
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial			
Fire protection		Pay cable			
Burglar protection		Pay cable-add'l channel			
Installation: Residential		Fire protection			
First set	\$ 99.00	Burglar protection			
<ul> <li>Additional set(s)</li> </ul>	\$ 25.00	Other services:			
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect	\$ 40.00		
Converter		Disconnect			
		Outlet relocation	\$ 25.00		
		Move to new address	\$ 99.00		

	OWNER OF CABLE SY	/STEM:			SYSTEM ID#	Name		
	MMUNICATIO				062799	)		
	ITTERS: TELEVISIO							
		•	, -		ns and low power television stations) ed only on a part-time basis under	G		
FCC rules and reg	ulations in effect o	n June 24, 19	81, permitting t	he carriage of ce	rtain network programs [section:			
. , . ,	), 76.61(e)(2) and ı basis, as explaine			61(e)(2) and (4))];	; and (2) certain stations carried on a	Primary Transmitters		
Substitute Bas	Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program pasis under specific FCC rules, regulations, or authorizations							
				he Special Staten	nent and Program Log)—if the			
station was carr	ried only on a subs	stitute basis		·	<b>0</b>			
					titute basis and also on some othe of the general instructions located			
in the paper SA		laian Danat	roport originatio	n program condo	as such as LIDO ESDN ata Identifi			
		•		. •	es such as HBO, ESPN, etc. Identify ation. For example, report multi			
	ETA-2". Simulcast	streams mus	t be reported in	column 1 (list ea	ch stream separately; for example			
			-		ation for broadcasting over-the-air i			
,	cense. For exampl le system carried t		annel 4 in Was	hington, D.C. This	s may be different from the channe			
Column 3: Indi	cate in each case	whether the s			dependent station, or a noncommercia			
		,	*	,	icast), "I" (for independent), "I-M commercial educational multicast)			
or the meaning o	f these terms, see	page (v) of th	e general instru	ictions located in	the paper SA3 form			
					∕es". If not, enter "No". For an ex ne paper SA3 form			
Column 5: If yo	ou have entered "Y	'es" in columr	4, you must co	mplete column 5	, stating the basis on which you			
,	ed the distant stati station on a part-ti	•	0.	,	ntering "LAC" if your cable syster			
For the retransr	nission of a distan	t multicast str	eam that is not	subject to a royal	ty payment because it is the subjec			
•					ystem or an association representin ary transmitter, enter the designa			
ion "E" (exempt). I	For simulcasts, als	so enter "E". If	you carried the	channel on any	other basis, enter "O." For a furthe			
					ted in the paper SA3 form ity to which the station is licensed by th			
					th which the station is identifed			
Note: If you are ut	ilizing multiple cha	nnel line-ups,	use a separate	space G for each	h channel line-up.			
					·			
		CHANN	EL LINE-UP	AA	·	_		
1. CALL	2. B'CAST	CHANN 3. TYPE	EL LINE-UP 4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
1. CALL SIGN	CHANNEL	3. TYPE OF	1	5. BASIS OF CARRIAGE	6. LOCATION OF STATION			
SIGN	CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF		-		
SIGN WCHS-1	CHANNEL NUMBER 8	3. TYPE OF STATION N	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	CHARLESTON, WV	- - - -		
SIGN WCHS-1 WCHS-2	CHANNEL NUMBER 8 8.2	3. TYPE OF STATION N I-M	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV			
SIGN WCHS-1 WCHS-2 WCHS-3	CHANNEL NUMBER  8  8.2  8.3	3. TYPE OF STATION N I-M	4. DISTANT? (Yes or No) No No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV			
WCHS-1 WCHS-2 WCHS-3 WCHS-4	CHANNEL NUMBER  8  8.2  8.3  8.4	3. TYPE OF STATION N I-M I-M	4. DISTANT? (Yes or No) No No No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1	CHANNEL NUMBER  8 8.2 8.3 8.4 8	3. TYPE OF STATION N I-M I-M I-M N-M	4. DISTANT? (Yes or No) No No No No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8	3. TYPE OF STATION N I-M I-M I-M I-M I-M I-M I-M N-M	4. DISTANT? (Yes or No) No No No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29	3. TYPE OF STATION N I-M I-M N-M I-M I-M N-M	4. DISTANT? (Yes or No) No No No No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29	3. TYPE OF STATION N I-M I-M I-M I-M I-M I-M I-M N-M	4. DISTANT? (Yes or No)  No No No No No No No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29	3. TYPE OF STATION N I-M I-M N-M I-M I-M N-M	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13	3. TYPE OF STATION N I-M I-M N-M I I-M N-M I N-M I I-M N-M I I I-M N	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV HUNTINGTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2	3. TYPE OF STATION N I-M I-M I-M I-M N-M I I-M I-M I-M I-M I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV HUNTINGTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2	3. TYPE OF STATION N I-M I-M I-M N-M I I-M I-M I-M N-M I-M N-M I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3	3. TYPE OF STATION N I-M I-M I-M N-M I I-M N-M N-M N-M N-M I-M N-M N-M	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1 WQCW-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 13.3	3. TYPE OF STATION N I-M I-M N-M I I-M N N-M I I-M N I I-M N I I I-M I I I I I I I I I I I I I I I I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV PORTSMOUTH, OH	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-3 WOWK-4 WOWK-1 WOWK-1 WOWK-1 WOWK-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 13 30	3. TYPE OF STATION N I-M I-M I-M N-M I I-M N I-M I-M I-M I-M II I-M I-M I-M I-M I-M	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV PORTSMOUTH, OH	additional informat		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1 WQCW-1 WQCW-HD1 WSAZ-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 30 30 30	3. TYPE OF STATION  N I-M I-M I-M N-M I I-M N-M I-M N I-M N I-M N I-M N-M I-M N-M I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV PORTSMOUTH, OH HUNTINGTON, WV	additional informati		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1 WQCW-1 WQCW-HD1 WSAZ-1 WSAZ-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 30 30 30 3.2	3. TYPE OF STATION N I-M I-M I-M N-M I-M N-M I-M N I-M N I-M N I-M I-M N-M I-M I-M N-M I-M I-M N-M I-M I-M N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV PORTSMOUTH, OH PORTSMOUTH, OH HUNTINGTON, WV	additional informati		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1 WQCW-HD1 WSAZ-1 WSAZ-2 WSAZ-HD1 WTSF-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 30 30 30 3 3.2 3	3. TYPE OF STATION N I-M I-M I-M N-M I-M N-M I-M N I-M N I-M N I-M I-M N-M I-M I-M N-M I-M I-M N-M I-M I-M N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE (If Distant)	CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV PORTSMOUTH, OH PORTSMOUTH, OH HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV	additional informati		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-3 WOWK-4 WOWK-1 WQCW-1 WQCW-HD1 WSAZ-1 WSAZ-2 WSAZ-HD1 WTSF-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 13 30 30 30 3 3.2 3 61	3. TYPE OF STATION N I-M I-M I-M N-M I-M N-M I-M N I-M N I-M N I-M I-M N-M I-M I-M N-M I-M I-M N-M I-M I-M N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE (If Distant)	CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV PORTSMOUTH, OH HUNTINGTON, WV ASHLAND, KY	additional informati		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1 WQCW-1 WQCW-HD1 WSAZ-1 WSAZ-2 WSAZ-HD1 WTSF-1 WVAH-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.3 13.3 30 30 30 31 14 15 15 16 11	3. TYPE OF STATION  N I-M I-M I-M N-M I I-M N-M I-M N-M I-M N-M I I-M N-M I I-M I I-M I I-M I I-M I I I-M I I I I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE (If Distant)	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV ASHLAND, KY CHARLESTON, WV	additional informati		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1 WQCW-HD1 WSAZ-1 WSAZ-2 WSAZ-HD1 WTSF-1 WVAH-1 WVAH-2 WVAH-3	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 30 30 30 31 11 11.2	3. TYPE OF STATION  N I-M I-M N-M I-M N-M I-M N-M I-M I-M I-M N-M I I-M I-M I-M N-M I I-M I-M I-M I-M I I-M I-M I I-M II I-M II I-M II I-M II I-M II I-M II	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE (If Distant)	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV PORTSMOUTH, OH HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informati		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1 WGCW-HD1 WSAZ-1 WSAZ-1 WSAZ-1 WSAZ-HD1 WTSF-1 WVAH-1 WVAH-2 WVAH-3	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 30 30 30 1 11 11.1 11.2 11.3	3. TYPE OF STATION N I-M I-M N-M I I-M N-M I-M N-M I I-M I-M N-M I I-M I-M N-M I I-M I-M N-M I I-M I-M I-M I I-M I-M	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE (If Distant)	CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV PORTSMOUTH, OH HUNTINGTON, WV HUNTINGTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informati		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-3 WOWK-3 WOWK-HD1 WQCW-HD1 WSAZ-1 WSAZ-2 WSAZ-HD1 WTSF-1 WVAH-1 WVAH-2 WVAH-3 WVAH-HD1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 30 30 31 11 11.2 11.3	3. TYPE OF STATION  N I-M I-M I-M N-M I I-M N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE (If Distant)	CHARLESTON, WV HUNTINGTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informati		
WCHS-1 WCHS-2 WCHS-3 WCHS-4 WCHS-HD1 WLPX-1 WLPX-HD1 WOWK-1 WOWK-2 WOWK-3 WOWK-HD1 WQCW-1 WQCW-HD1 WSAZ-1 WSAZ-2 WSAZ-HD1 WTSF-1 WVAH-1 WVAH-2 WVAH-3 WVAH-HD1 WVPB-1	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.3 13.3 30 30 30 31 11 11.2 11.3 11 33	3. TYPE OF STATION  N I-M I-M I-M N-M I-M N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE (If Distant)	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV	additional informat		
	CHANNEL NUMBER  8 8.2 8.3 8.4 8 29 29 13 13.2 13.3 13.3 30 30 31 11 11 11.2 11.3 31 33.2	3. TYPE OF STATION  N I-M I-M I-M N-M I-M N-M I-M I-M I-M I-M I-M I-M I-M I-M I-M I	4. DISTANT? (Yes or No)  No	5. BASIS OF CARRIAGE (If Distant)	CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV CHARLESTON, WV HUNTINGTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV CHARLESTON, WV HUNTINGTON, WV HUNTINGTON, WV HUNTINGTON, WV	additional informat		

FORM SA3F\_PAGE 3 SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 062799 **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 [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 **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 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 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 ir 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 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 ex planation 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 systen 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 representing 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 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 2. B'CAST 3. TYPE 4 DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL CARRIAGE SIGN OF (Yes or No) NUMBER STATION (If Distant) WCHS-1 8 Ν No CHARLESTON, WV WCHS-HD1 8 N-M **CHARLESTON, WV** No WLPX-1 29 No CHARLESTON, WV 1 I-M WLPX-HD1 29 CHARLESTON, WV No 4 WOAY-1 N No OAK HILL, WV WOWK-1 13 N No **HUNTINGTON, WV** WOWK-HD1 13 N-M No **HUNTINGTON, WV** 30 WQCW-1 No PORTSMOUTH, OH I WQCW-HD1 30 I-M No PORTSMOUTH, OH WSAZ-1 3 N No HUNTINGTON, WV I-M No WSAZ-2 3.2 **HUNTINGTON, WV HUNTINGTON, WV** WSAZ-HD1 3 N-M No WTSF-1 61 ı Yes ASHLAND, KY WVNS-2 59.2 No LEWISBURG, WV

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

LEWISBURG, WV

**HUNTINGTON, WV** 

**HUNTINGTON, WV** 

HUNTINGTON, WV

**HUNTINGTON, WV** 

HINTON, WV

WVNS-HD2

WVPB-1

WVPB-2

WVPB-3

WZTS-1

WVPB-HD1

59.2

33

33.2

33.3

33

16

I-M

Ε

E-M

E-M

E-M

ı

No

No

No

No

No

No

ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **CEQUEL COMMUNICATIONS LLC** 062799 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** 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 AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SASE, PAGE 5.							PERIOD: 2019/2
LEGAL NAME OF OWNER OF CEQUEL COMMUNICA					S	062799	Name
SUBSTITUTE CARRIAG	_	-			on that your cable system	carried on a	
substitute basis during the a explanation of the programm form.	ccounting pe	eriod, under sp	ecific present and former F0	CC rules, regu	lations, or authorizations.	For a further	Substitute
1. SPECIAL STATEMEN	T CONCEF	RNING SUBS	TITUTE CARRIAGE				Carriage:
During the accounting per	riod, did you	ur cable systen	n carry, on a substitute bas	sis, any nonne	etwork television prograr	m	Special Statement and
broadcast by a distant sta		rest of this pa	ge blank. If vour answer is	"Yes." vou m	Yes		Program Log
log in block 2.	,	, , , , , , , , , , , , , , , , , , , ,	g	,, <b>,</b>			
2. LOG OF SUBSTITUTE							
In General: List each subsclear. If you need more spa	ace, please	attach addition	nal pages.			5	
period, was broadcast by a			vision program (substitute our cable svstem substitut			ition	
under certain FCC rules, re	egulations, c	or authorization	ns. See page (vi) of the ge	neral instructi	ons located in the paper		
SA3 form for futher informatitles, for example, "I Love I				r "basketball"	List specific program		
			er "Yes." Otherwise enter "	No."			
			asting the substitute progra				
the case of Mexican or Car			he community to which the community with which the				
Column 5: Give the mor	nth and day		stem carried the substitute		,	nth	
first. Example: for May 7 gi		a substituta nro	ogram was carried by your	cable system	List the times accurate	dv	
to the nearest five minutes.						i y	
stated as "6:00-6:30 p.m."	"D" : " !!	P 4 1	1.09.4.16				
to delete under FCC rules			n was substituted for progr uring the accounting perio			d	
gram was substituted for pr	•		0		•		
effect on October 19, 1976							
					N SUBSTITUTE	7. REASON	
		E PROGRAM	1		IAGE OCCURRED  6. TIMES	FOR	
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM — TO	DELETION	
					<u> </u>		
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ACCOUNTING PERIOD: 2019/2 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **CEQUEL COMMUNICATIONS LLC** 062799 PART-TIME CARRIAGE LOG 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 DATE **FROM** TO **FROM** TO

	AL NAME OF OWNER OF CABLE SYSTEM:  QUEL COMMUNICATIONS LLC	SYSTEM ID# 062799	Name					
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identifed in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s)								
IMP	Gross receipts from subscribers for secondary transmission service(s)  during the accounting period.  IMPORTANT: You must complete a statement in space P concerning gross receipts.  \$ 13,142,425.86 (Amount of gross receipts)							
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:  Complete block 1, showing your minimum fee.  Complete block 2, showing whether your system carried any distant television stations.  If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.  If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.								
bloc	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be $\mbox{k}$ 3 below.							
3 be	Y-11							
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	ld be entered on line						
	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.							
	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.	\$ 13,142,425.86						
	This is your minimum fee.	\$ 139,835.41						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the i space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule.	n 4, you must 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	\$ 4,938.19						
3	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00						
	Line 3. Add lines 1 and 2 and enter here	\$ 4,938.19						
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	\$ 139,835.41	Cable systems					
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> 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. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact					
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 140,560.41	appropriate form for submitting the					
	EFT Trace # or TRANSACTION ID #		additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form and the Excel instructions tal	. • ()						

		FURIVI SASE, PAGE 0.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 062799
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable syster to its subscribers and (2) the cable system's total number of activated channels, du	
Channels	Enter the total number of channels on which the cable     system carried television broadcast stations	25
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services	391
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Id we can contact about this statement of account.)	entify an individual
Be Contacted for Further Information	Name RODNEY HASKINS	Telephone (903) 579-3152
	Address 3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)	
	TYLER, TX 75701 (City, town, state, zip)	
	Email RODNEY.HASKINS@ALTICEUSA.COM	Fax (optional)
0	CERTIFICATION (This statement of account must be certifed and signed in accorda	nce with Copyright Office regulations.)
Certification	I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system	n as identifed in line 1 of space B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized in line 1 of space B and that the owner is not a corporation or partnership; or	agent of the owner of the cable system as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of in line 1 of space B.	f the legal entity identifed as owner of the cable system
	I have examined the statement of account and hereby declare under penalty of law that are true, complete, and correct to the best of my knowledge, information, and belief, and [18 U.S.C., Section 1001(1986)]	
	X /s/ Alan Dannenbaum	
	Enter an electronic signature on the line above using an "/s/" signa (e.g., /s/ John Smith). Before entering the first forward slash of the button, then type /s/ and your name. Pressing the "F" button will a	/s/ signature, place your cursor in the box and press the "F2"
	Typed or printed name: ALAN DANNENBAUM	
	Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)	
	Date: February 18, 2020	

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 the form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephon numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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 suffciency of the fling, a determination that would be made by a court of lav

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nome					
CEQUEL COMMUNICATIONS LLC	062799	Name					
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 gen paper SA3 form.	eral instructions in the	Concerning Gross Receipts Exclusion					
During the accounting period did the cable system exclude any amounts of gross receipts for smade by satellite carriers to satellite dish owners?	secondary transmissions						
X NO							
YES. Enter the total here and list the satellite carrier(s) below							
Name Mailing Address Mailing Address							
INTEREST ASSESSMENTS							
You must complete this worksheet for those royalty payments submitted as a result of a late payment for an explanation of interest assessment, see page (viii) of the general instructions in the page		Q					
Line 1 Enter the amount of late payment or underpayment		Interest Assessment					
Line 2 Multiply line 1 by the interest rate* and enter the sum here							
	xdays						
Line 3 Multiply line 2 by the number of days late and enter the sum here							
	x 0.00274						
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	¢						
Space L, (page 7)	(interest charge)						
* To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	further assistance please						
** 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 please list below the owner, address, first community served, accounting period, and ID number filing.							
Owner	11101111111111111111111111111111111111						
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: 2019/2

DSE SCHEDULE, PAGE 10.

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

The term "distant signal equivalent" (DSE) generally refers to the numerical 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 account (page 3), a distant station is:

• Independent: its type-value is	1.00
Network: its type-value is	0.25
• Noncommercial educational: its type-value is	0.25

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

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station 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 particular 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 a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

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

The Minimum FeeBase 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 station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or 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 in
  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; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

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

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

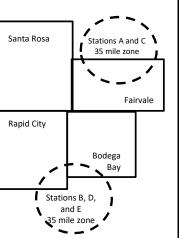
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

#### **EXAMPLE:**

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

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 Carrie	ed	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
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)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x .01064
 \$6 384 00

\$120,000.00
1.389
\$1,604.03
1,276.80
327.23
\$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)

DSE SCHEDULE. PAGI		= 0.40==1.4			6)	VOTEM ID#					
1	LEGAL NAME OF OWNER OF CABL				3	YSTEM ID#					
<u>-</u>	CEQUEL COMMUNICAT	TIONS LLC				062799					
	SUM OF DSEs OF CATEGORY "O" STATIONS:										
	• Add the DSEs of each station.										
	Enter the sum here and in line	1 of part 5 of thi	s schedule.	Į	1.00	ļ					
	Instructions:										
2	In the column headed "Call S	Sign": list the ca	ll signs of all distant stations	s identified by t	he letter "O" in column 5						
	of space G (page 3).  In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-										
				E as "1.0"; for	each network or noncom-						
Category "O"	mercial educational station, give the DSE as ".25."  CATEGORY "O" STATIONS: DSEs										
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	WTSF-1	1.000	O/ IEE OIOIY	DOL	CALL CICIT	DOL					
	W101-1	1.000									
Add rows as											
necessary.											
Remember to copy all											
formula into new											
rows.											
I				<u> </u>	.]	L					

Name		WNER OF CABLE SYSTEM:	•				s	YSTEM ID#
Name	CEQUEL CO	MMUNICATIONS LL	<u> </u>					062799
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should of Column 3 Column 4 be carried out Column 5 give the type-v Column 6	at the call sign of all dista : For each station, give the correspond with the information. : For each station, give the : Divide the figure in colu- at least to the third decirate in colu- : For each independent solution as ".25." : Multiply the figure in colu-	ne number of hour mation given in spectal number of the figure of the figure nal point. This is the figure of the "to the figure of the "to the figure of th	rs your cable systemace J. Calculate on fours that the state in column 3, and the "basis of carriagype-value" as "1.0." re in column 5, and the state of carriagype-value of the state of t	m carried the stati nly one DSE for ea ion broadcast ove give the result in one e value" for the state For each network	ion during the accounting ach station. er the air during the accord decimals in column 4. Thi	unting period. s figure must sational station, ess than the	
Capacity		C	CATEGORY LA	AC STATIONS:	COMPUTATION	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTEM	R 3. JRS ED BY	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	iΕ
			÷		=	x	=	
						X.		
			÷			<b>x</b> <b>x</b>		
			÷		=	x	E	
			÷		=	x		
			÷		=	x x		
	Add the DSEs of	OF CATEGORY LAC S of each station. m here and in line 2 of pa		ule,		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference broadcast of space I).     Column 2: For at your option.     Column 3: Eolumn 4: I	ct on October 19, 1976 (and or more live, nonnetwoner and the station give the This figure should correst and the number of days Divide the figure in column this is the station's DSE	itution for a progra as shown by the look programs durin number of live, no spond with the info in the calendar y in 2 by the figure i (For more informa	am that your systen etter "P" in column g that optional carr connetwork program ormation in space I ear: 365, except in n column 3, and gittion on rounding, s	n was permitted to 7 of space I); and iage (as shown by i s carried in substi- a leap year. we the result in co ee page (viii) of th	o delete under FCC rules the word "Yes" in column 2 itution for programs that v lumn 4. Round to no less ne general instructions in	of were deleted than the third	m).
	<u> </u>	SU	BSTITUTE-BA		S: COMPUTA	TION OF DSEs	T	
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=		÷		=
		÷ ÷		=		÷		=
		÷		=		÷		=
		÷		=		÷		=
	Add the DSEs of	OF SUBSTITUTE-BASI	S STATIONS:	ule,	▶	0.00		
5		R OF DSEs: Give the ame		es in parts 2, 3, and	4 of this schedule	and add them to provide t	he total	
Total Number	1. Number of	DSEs from part 2 •				•	1.00	
of DSEs		DSEs from part 3 •				•	0.00	
		DSEs from part 4 •			: •	-	0.00	
	TOTAL NUMBE	R OF DSEs						1.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/2

	OWNER OF CABLES						S'	YSTEM ID# 062799	Name
	ck A must be comp	oleted.							
,	"Yes," leave the re	mainder of pa	art 6 and part	7 of the DSE sched	dule blank and	l complete par	t 8, (page 16) of th	е	6
schedule. If your answer if	"No," complete blo	cks B and C	below.						
				TELEVISION M.					Computation of 3.75 Fee
effect on June 24,	1981?		•	ler markets as defi			CC rules and regu	lations in	
	plete part 8 of the plete blocks B and		O NOT COMP	PLETE THE REMA	INDER OF PA	ART 6 AND 7.			
X No—Comp	Diete blocks B and								
				RIAGE OF PERI					
Column 1: CALL SIGN	under FCC rules	and regulation	ons prior to Jur dule. (Note: Th	part 2, 3, and 4 of ne 25, 1981. For fu ne letter M below re Act of 2010.)	rther explanat	ion of permitte	d stations, see the		
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station pre	eles and regued pursuant to a selfined al educational station (76.6 r DSE sched ant to individuationally carries)	lations cited be of the FCC many distribution of the FCC many distribution (76.565) (see paragule). Lal waiver of Fed on a part-tin ithin grade-B of the other than the following that the following t	ne or substitute bas contour, [76.59(d)(5	se in effect on 3.57, 76.59(b) e)(1), 76.63(a) 63(a) referring estitution of grans sis prior to Jur	June 24, 1981, 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered st	6.63(a) referring to		
Column 3:	*( <b>Note:</b> For those this schedule to contain the schedule the schedul	e stations ide	ntified by the less DSE.)	parts 2, 3, and 4 cetter "F" in column  2. PERMITTED		1. CALL	2. PERMITTED	14 of 3. DSE	
SIGN WTSF-1	BASIS	1.00	SIGN	BASIS		SIGN	BASIS		
				•					
				•					
								1.00	
		Е	BLOCK C: CC	MPUTATION OF	F 3.75 FEE				
ine 1: Enter the	total number of	DSEs from	part 5 of this	schedule	***************************************		11-		
ine 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
				of DSEs subject 7 of this schedule		ate.	u-		
ine 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represer partially
ine 5: Multiply l	ine 4 by 0.0375 a	and enter su	m here				<u>x</u>		permited/ partially nonpermitted carriage?
ine 6: Enter tota	al number of DSE	Es from line	3						If yes, see par 9 instructions
ine 7: Multinly I	ine 6 by line 5 an	d enter here	e and on line	2, block 3, space	L (page 7)			0.00	

	OWNER OF CABLES							7STEM ID# 062799	Name
		BLOCK	A: TELEVIS	SION MARKETS	(CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE		2. PERMITTED BASIS	3. DSE	6
									Computation 6
								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

ACCOUNTING PERIOD: 2019/2

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **CEQUEL COMMUNICATIONS LLC** 062799 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Schedule for Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute -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)). Carriage 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 be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated 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 5. PRESENT 6. PERMITTED 4. BASIS OF SIGN DSE PERIOD CARRIAGE 7 Instructions: Block A must be completed. In block A: Computation 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. of the **Syndicated BLOCK A: MAJOR TELEVISION MARKET** Exclusivity Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? X No—Proceed to part 8 Yes—Complete blocks B and C . BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN CALL SIGN DSE DSE DSE DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA		TEM ID# 062799	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	,425.86	7
Section 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?      \( \text{Y} \) 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 DSE		
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	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	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
3b	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 figure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
Section	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?  Yes—Complete part 9 of this schedule.		
4a	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 DSE 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)		
	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		ME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 062799							
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  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.  F. Multiply line D by line E and enter here.  Enter here and on line 2, block 4, space L (page 7)  Syndicated Exclusivity Surcharge.  \$\$\\$\$\$								
Computation of Base Rate Fee	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5. In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. If your answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.									
	_	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS our 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 Section 2 Section 3	Enter the amount of gross receipts from space K (page 7).   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 <b>4.000 or less,</b> compute your base rate fee here and leave section 4 blank.								
		NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts (the amount in section 1).	0.00							

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2019/2

LECAL N	AME OF CAMIFE OF CARLE SYSTEM.	OVOTEM ID#	
	AME OF OWNER OF CABLE SYSTEM:  JEL COMMUNICATIONS LLC	SYSTEM ID# 062799	Name
Section 4	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1)  ▶\$		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 <b>&gt;</b>		
	D. Enter 0.00330 of gross receipts (the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your base rate fee Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee	0.00	
	Dage Nate 1 ce		
shall in	ETANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television bro stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multi Space G.		9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rat s from subscribers located within the station's local service area, from your system's total gross receipts. To ta	·	Computation
	clusion, you must:	me auvamage e.	of Base Rate Fee and
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dist or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Deter and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fe : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system	mine the number of se for each group.	Cundingtod
must a	If any portion of your cable system is located within the top 100 television market and the station is not exemple so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block are, if your cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and for Partially
Step 1	Identify a Subscriber Group for Partially Distant Stations  For each community served, determine the local service area of each wholly distant and each partially distant to that community.	it station you	Permitted Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers we the station's local service area. A subscriber located outside the local service area of a station is distant to the 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 disber group must consist entirely of subscribers who are distant to exactly the same complement of stations. No will have only one subscriber group when the distant stations it carried have local service areas that coincide	ote that a cable	
	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your ber groups.	· system's	
In each	section:		
• Give t	fy the communities/areas represented by each subscriber group.  the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant bers in the group.	to all of the	
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave fithis schedule; or,	e it in parts 2, 3,	
2) any	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave 6 of this schedule.	t in block B,	
• Add tl	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general paper SA3 form.	eral instructions	
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule or In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber grou or that group's complement of stations and total gross receipts from the subscribers in that group). You do no ctual calculations on the form.	p (that is, the total	

# SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 062799 **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 OWN						S	062799	Name
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	CH SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	Р		SECOND	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA SUBSCRIBER GROUP 1				COMMUNITY/ ARE	COMMUNITY/ AREA SUBSCRIBER GROUP 2			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
OALL SIGIN	DOL	OALL GIGIN	DOL	OALL SIGN	DOL	OALL SIGN	DOL	Base Rate Fee
						H		and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
						Н		Stations
								Otations
			<b></b>			H		
						-		
						H		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (	Group	<b>\$</b> 12,387	,887.52	Gross Receipts Sec	ond Group	\$ 2	290,422.34	
							<del></del>	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROUI	Р		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	SUBSC	RIBER GROUP 3		COMMUNITY/ ARE	A SUBSCI	RIBER GROUP 4		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WTSF-1 A	1.00			WTSF-1	A 1.00			
	*****							
	****							
					······		······	
						H		
						-		
			ļ			H		
	***************************************							
Total DSEs			1.00	Total DSEs			1.00	
	•					_	-	
Gross Receipts Third	Group	<u>\$ 449</u>	,221.32	Gross Receipts Fou	rth Group	\$	14,894.68	
Base Rate Fee Third	Group	\$ 4	,779.71	Base Rate Fee Fou	ırth Group	\$	158.48	
		e fees for each subscri	iber group a	as shown in the boxes	above.		4.000.40	
Enter here and in bloo	ск 3, line 1, s	pace L (page 7)				\$	4,938.19	

LEGAL NAME OF OWNE						S	YSTEM ID# 062799	Name
E	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	IP		SECOND	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA SUBSCRIBER GROUP 1				COMMUNITY/ AREA	SUBSC	RIBER GROUP 2		9 Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate I
								and
								Syndicate
								Exclusivi
								Surcharg
								for
								Partially
								Distant
								Stations
			ļ					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	s 12,387	,887.52	Gross Receipts Second	d Group	\$ 2	90,422.34	
·	·			·	·			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	SUBSC	RIBER GROUP 3		COMMUNITY/ AREA	SUBSC	RIBER GROUP 4		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$ 449	,221.32	Gross Receipts Fourth	Group	\$	14,894.68	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
				II				
<b>Base Rate Fee:</b> Add th Enter here and in block			riber group a	as shown in the boxes at	ove.	\$	0.00	

ACCOUNTING PERIOD: 2019/2

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