This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

Return completed workbook

STATEM	ENT C	OF ACCOUNT	FOR COPYRIG	IT OFFICE USE ONLY	by email to:		
for Seconda	ary Trai	nsmissions by	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov		
Cable Syste General instru in the first tab	ictions a	are located	9/1/2020	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150		
Δ							
A		2020/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31			
Accounting Period		20201	Barcode Data Filing Period (optiona	- see instructions)			
B Owner		of the subsidiary, not that of the parent co List any other name or names under which	rporation. I the owner conducts the business of t accounting period, only the owner on 1	he last day of the accounting period should s			
		Check here if this is the system's first filing	. If not, enter the system's ID number	assigned by the Licensing Division.	002741		
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM				
		CEQUEL COMMUNICATIONS LLC					
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT				
		SUDDENLINK COMMUNICATIONS					
	I	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM				
		3015 S SE LOOP 323					
	•	Number, street, rural route, apartment, or suite no TYLER, TX 75701 (City, town, state, zip)	inder)				
С		, O		tify the business and operation of the	5		
			2, give the mailing address of th	e system, if different from the address	s given in space B.		
System	1 1						
	_	HENRIETTA, TX MAILING ADDRESS OF CABLE SYSTEM					
		Number, street, rural route, apartment, or suite ni					
	0	City, town, state, zip code)					

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

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	002741
D	Instructions: List each separate community served by the cable system. A "co "a separate and distinct community or municipal entity (including unincorpor- discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community tha	mmunity" is the same as a "community unit" as defined in FCC rules: ated communities within unincorporated areas and including single, t you list will serve as a form of system identification hereafter knowr
	as the "first community." Please use it as the first community on all future fili Note: Entities and properties such as hotels, apartments, condominiums, or n	
Area Served	identified city.	
	CITY OR TOWN	STATE
First	HENRIETTA	TX
Community		
Rows as Necessary		

							FORM SA1	-2E. PAGE
Name								00274
	CEQUEL COMMUNICA	HONS LLC						
-	SECONDARY TRANSMISSION	I SERVICE: SL	JBSCRIBER	S AND RATES				
E	In General: The information in s	•		-	•			
<u> </u>	system, that is, the retransmissi							
Secondary Transmission	about other services (including particular about other services (including particular about the services (including par					nose existi	ng on the	
Service: Sub-	Number of Subscribers: Bot					ble system,	broken	
scribers and	down by categories of secondar					•		
Rates	each category by counting the n						charged	
	separately for the particular server Rate: Give the standard rate of						o and the	
	unit in which it is generally billed	-				-		
	category, but do not include disc	· ·	,	•		o within a p		
	Block 1: In the left-hand block				econdary transmis	sion servic	e that cable	
	systems most commonly provide							
	that applies to your system. Not			-	-			
	categories, that person or entity subscriber who pays extra for ca					•		
	first set" and would be counted of							
	Block 2: If your cable system					different fr	om those	
	printed in block 1 (for example, t							
	with the number of subscribers a	and rates, in the	e right-hand l	block. A two- or th	ree-word descript	ion of the s	ervice is	
	sufficient.	OCK 1				BLOCK	2	
		NO. OF					NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS R	ATE CA	TEGORY OF SEF	RVICE	SUBSCRIBERS	RAT
	Residential:		50	24.00				
	Service to first set		58	34.99				
	Service to additional set(s)							
	• FM radio (if separate rate)							
	Motel, hotel							
	Commercial		11	45.95				
	Converter							
	Residential							
	Non-residential							
	SERVICES OTHER THAN SEC							
_	In General: Space F calls for ra				all vour cable sv	stem's servi	ces that were	
F	not covered in space E, that is, t							
	service for a single fee. There a	•		•		• • • •		
Services	furnished at cost or (2) services							
Other Than Secondary	amount of the charge and the un enter only the letters "PP" in the		usually billed	d. If any rates are	charged on a vari	able per-pro	ogram basis,	
ransmissions:	Block 1: Give the standard ra		he cable sys	tem for each of th	e applicable servi	ces listed.		
Rates	Block 2: List any services that	• •			• •			
	listed in block 1 and for which a				ist these other ser	vices in the	form of a	
	brief (two- or three-word) descrip	ption and inclue	de the rate fo	r each.				
		BLO	CK 1				BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEGORY	OF SERVICE	RATE	CATEGO	RY OF SERVICE	RATE
	Continuing Services:		Installation	Non-residential				
	• Pay cable	17.00	 Motel, he 	otel				
	 Pay cable—add'l channel 	19.00	 Commer 	cial				
	 Fire protection 		 Pay cabl 	е				
	 Burglar protection 		• Pay cabl	e-add'l channel				
	Installation: Residential		 Fire prot 	ection				
	• First set	99.00	• Burglar p	protection				
	 Additional set(s) 	25.00	Other servi	ces:				[
	• FM radio (if separate rate)		 Reconne 	ect	40.00			I
	i in idale (il copulate idae)							
	• Converter		Disconne	ect				
	, , ,		• Disconne • Outlet re		25.00			
	, , ,		• Outlet re		25.00 99.00			

counting Period:	2020/1			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
	CEQUEL COMMUNIC	ATIONS LLC		002741
G Primary ransmitters: Television	carried by your cable systel FCC rules and regulations i 76.59(d)(2) and (4), 76.61(6 substitute program basis, a Substitute Basis Stations basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further information Column 1: List each station multicast stream associated "WETA-2" as the same on a Column 2: Give the channel of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these to Column 4: Give the location	entify every television station (including m during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting t e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations c ules, regulations, or authorizations: e in space G—but do list it in space I (t a substitute basis. also in space I, if the station was carrie on concerning substitute basis stations n's call sign. <i>Do not</i> report origination d with a station according to its over-the	t (1) stations carried only on a part-the carriage of certain network progra 51(e)(2) and (4))]; and (2) certain state arried by your cable system on a sub- the Special Statement and Program d both on a substitute basis and also see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep- por "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station	ime basis under ams [sections tions carried on a postitute program Log)—if the p on some other ions. PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	K44FI-1	44	E	WICHITA FALLS, TX
	KAUZ-1	6	Ν	WICHITA FALLS, TX
as Necessary	KAUZ-2	6.2	I-M	WICHITA FALLS, TX
	KFDX-1	3	N	WICHITA FALLS, TX
	KJBO-1	3	l	WICHITA FALLS, TX
	KJTL-1	18	l	WICHITA FALLS, TX
	KSWO-1	7	Ν	LAWTON, OK
	KSWO-2	7.2	I-M	LAWTON, OK

LEGAL NAME OF								SYSTEM 002
	every radio s	tation ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Co sign of e he static ion's sign g a check n's locatio	I-Band FM Carriage: Under C item whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which th	t the system's he system's FM ante this point, see pa ed by the cable s he station is licen	eadend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can sertain st general in eparate s	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
		-		1		e/D		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
						 		
						<u> </u>		
						·		
						<u> </u>		
						<u> </u>		
						<u> </u>		
						J		

Accounting Perio	od: 2020/1						FOR	M SA1-2E. PAGE 5.
News	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS L	LC					002741
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LO	G			
	In General: In space I, ident	ifv everv no	nnetwork televi	<i>ision program.</i> broadcast b	v a <i>distant</i> sta	tion. that vo	ur cable svs	tem carried on a
	substitute basis during the a							
Substitute	explanation of the programm	ning that mu	st be included	in this log, see page (v) of	the general in:	structions in	the paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE				
Special Statement and	 During the accounting per 	riod, did you	ur cable syster	m carry, on a substitute ba	asis, any noni	network tele	evision prog	ram
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No	" leave the	rest of this na	ae blank lf vour answer i		must compl	-	
	-	, leave life	rest of this pa	ige blatik. It your answer t	s res, your	nusi compi	ete tile proj	yrann
	log in block 2. 2. LOG OF SUBSTITUTI		MS					
	In General: List each subs			ate line. Use abbreviation	s wherever p	ossible. if th	neir meanin	a is
	clear. If you need more spa					,		5
				vision program ("substitut				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general categor							
	"NBA Basketball: 76ers vs.			P9.		, -	,	
				er "Yes." Otherwise enter				
				asting the substitute prog the community to which th			- - - - -	·
	the case of Mexican or Car							111
				stem carried the substitut			s, with the r	nonth
	first. Example: for May 7 gi							
	to the nearest five minutes.			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."	Example.	a program can	ned by a system norm 0.0	1. 15 p.m. to t	.20.30 p.m	. Should be	
		er "R" if the	listed program	n was substituted for prog	ramming that	t your syste	m was <i>requ</i>	iired
	to delete under FCC rules							ogram
	was substituted for programe ffect on October 19, 1976	•	your system w	as permitted to delete une	der FCC rules	s and regula	ations in	
		•			- 1			-
						N SUBSTI		
	S		E PROGRAM	1		AGE OCC		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	-	IMES — TO	DELETION
		100 01 110	0,122 01011					
							_	
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Accounting Period:	2020/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	S	/STEM ID# 002741
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmers (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	mission service amount, se	966.62
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$ Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$ Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(See page (vi) of the general instructions located in the paper SA1-2 form for more information.	\$263,80(
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00	his six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2020/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 002741
M Channels	 CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations . 2. Enter the total number of activated channels on which the cable system carried television broadcast stations . and nonbroadcast services . 	8 stations
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name RODNEY HASKINS	elephone (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)	nulations)
O Certification	 I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of in line 1 of space B and that the owner is not a corporation or partnership; or 	
	 X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity iden in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact conta are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	X /s/ Alan Dannenbaum Enter an electronic signature on the line above to certify this statement Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	nt.
	Typed or printed name: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)	
	Date: 8/14/2020	

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ounting Period: 2020/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
QUEL COMMUNICATIONS LLC	00274
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
	_
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
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