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

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: 2020/1 Accounting Period Instructions Β Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo-Owner rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. 030834 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM **CEQUEL COMMUNICATIONS LLC** 03083420201 030834 2020/1 3015 S SE LOOP 323 **TYLER, TX 75701** INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these С names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. System IDENTIFICATION OF CABLE SYSTEM: 1 PAYSON 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 frst community served below and relist on page 1b with all communities. Area Served CITY OR TOWN STATE ΑZ PAYSON First Community Below is a sample for reporting communities if you report multiple channel line-ups in Space G CITY OR TOWN (SAMPLE) STATE SUB GRP# CH LINE UP Alda MD Α Sample Alliance MD в 2 Gering MD в 3 Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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 Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

FOR COPYRIGHT OFFICE USE ONLY

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

9/1/2020

# STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#			
CEQUEL COMMUNICATIONS LLC			030834			
<b>Instructions:</b> List each separate community served by the cable system. A "community" is the same as a "community unit" as defined 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 of system identification hereafter known as the "first community." Please use it as the first community on all future filings.						
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile h below the identified city or town.	ome parks should b	e reported in pare	ntheses			
If all communities receive the same complement of television broadcast stations (i.e. all communities with the channel line-up "A" in the appropriate column below or leave on a partially distant or partially permitted basis in the DSE Schedule, associate each designated by a number (based on your reporting from Part 9).	the column blank. I	f you report any s	tations			
When reporting the carriage of television broadcast stations on a community-by-com channel line-up designated by an alpha-letter(s) (based on your Space G reporting) a (based on your reporting from Part 9 of the DSE Schedule) in the appropriate column	and a subscriber gro					
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#			
PAYSON	AZ		1	First		
MESA DEL (GILA COUNTY)	AZ		2	Community		
OXBOW ESTATES (GILA COUNTY)	AZ		1			
ROUND VALLEY (GILA COUNTY)	AZ		1			
STAR VALLEY (GILA COUNTY)	AZ		2			
				See instructions for		
				additional information on alphabetization.		
				Add rows as necessary.		

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Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	YSTEM ID	
name	CEQUEL COMMUNICA	TIONS LLC							03083	
_	SECONDARY TRANSMISSION	N SERVICE: S	UBSCR	RIBERS AND F	RATES					
E	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								
Secondary	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the									
Transmission	last day of the accounting period						abla avatav	n brokon		
Service: Sub- scribers and	Number of Subscribers: Bot down by categories of secondar						-			
Rates	each category by counting the r									
	separately for the particular service	vice at the rate	indicat	ed-not the nu	mber of se	ets receiving ser	vice).	-		
	Rate: Give the standard rate of	-						-		
	unit in which it is generally billed					ard rate variation	ns within a	particular rate		
	category, but do not include dise Block 1: In the left-hand block					condary transmi	ission con	ico that cablo		
	systems most commonly provid			-		-				
	that applies to your system. Not	te: Where an i	ndividua	al or organizati	on is recei	ving service that	t falls unde	er different		
	categories, that person or entity									
	subscriber who pays extra for c						inder "Serv	vice to the		
	first set" and would be counted							<b>.</b>		
	Block 2: If your cable system	-	-	•						
	printed in block 1 (for example, with the number of subscribers					•	,	-		
	sufficient.		ic right-	hand block. A				301 100 13		
	BLOCK 1						BLOC			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RATE	
	Residential:									
	Service to first set		3,569	\$ 64.99						
	<ul> <li>Service to additional set(s)</li> </ul>									
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		75	\$ 64.99						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC				=9					
_	In General: Space F calls for ra					all your cable sy	stem's se	vices that were		
F	not covered in space E, that is,									
	service for a single fee. There a									
Services	furnished at cost or (2) services									
Other Than Secondary	amount of the charge and the us enter only the letters "PP" in the		s usuall	y billed. If any	rates are o	charged on a vai	riable per-	program basis,		
Fransmissions:			the cab	le svstem for e	each of the	applicable serv	rices listed			
Rates	<b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed. <b>Block 2:</b> 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) descri	ption and inclu	ide the i	rate for each.			1			
		BLO						BLOCK 2		
	CATEGORY OF SERVICE	RATE		GORY OF SEF		RATE	CATEGO	DRY OF SERVICE	RATE	
	Continuing Services:			ation: Non-res	sidential					
	• Pay cable	\$ 17.00		otel, hotel						
	Pay cable—add'l channel     Eire protection	\$ 19.00	-	mmercial						
	Fire protection     Burglar protection			y cable v cable add'l c	hannal					
	<ul> <li>Burglar protection</li> </ul>			y cable-add'l c e protection	nannel					
	Installation: Posidential	1		e protection rglar protectior	n					
	Installation: Residential	\$ 00.00		iyiai piutectiof						
	First set	\$ 99.00 \$ 25.00								
	<ul><li>First set</li><li>Additional set(s)</li></ul>	\$ 99.00 \$ 25.00	Other	services:		\$ 40.00				
	<ul> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>		Other • Re	services: connect		\$ 40.00				
	<ul><li>First set</li><li>Additional set(s)</li></ul>		Other • Re • Dis	services: connect sconnect						
	<ul> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>		Other • Re • Dis • Ou	services: connect	ress	\$ 40.00 \$ 25.00 \$ 99.00				

### ACCOUNTING PERIOD: 2020/1

LEGAL NAME OF OW					SYSTEM ID#	Namo
CEQUEL CON					030834	
PRIMARY TRANSMIT						
					and low power television stations) d only on a part-time basis under	G
					in network programs [sections nd (2) certain stations carried on a	Brimony
ubstitute program ba	asis, as explaine	d in the next p	paragraph.			Primary Transmitters
				carried by your ca	able system on a substitute program	Television
asis under specifc F Do not list the static				e Special Stateme	nt and Program Log)—if the	
station was carried			tion was carried	both on a substitu	ute basis and also on some other	
					the general instructions located	
in the paper SA3 f Column 1: List ea		sian. Do not r	eport origination	program services	s such as HBO, ESPN, etc. Identify	
each multicast stream	n associated with	n a station acc	cording to its ove	er-the-air designati	ion. For example, report multi-	
ast stream as "WET: VETA-simulcast).	A-2". Simulcast	streams must	be reported in c	olumn 1 (list each	stream separately; for example	
					on for broadcasting over-the-air in	
ts community of licer			annel 4 in Washi	ngton, D.C. This r	nay be different from the channel	
					pendent station, or a noncommercial	
for independent mul	ticast), "E" (for no	oncommercial	educational), or	"E-M" (for nonco	ast), "I" (for independent), "I-M" mmercial educational multicast).	
or the meaning of the <b>Column 4</b> : If the s					e paper SA3 form. s". If not, enter "No". For an ex-	
planation of local ser	vice area, see pa	age (v) of the	general instructi	ons located in the	paper SA3 form.	
					tating the basis on which your ering "LAC" if your cable system	
carried the distant sta	ation on a part-tir	ne basis beca	use of lack of a	ctivated channel c	apacity.	
					payment because it is the subject tem or an association representing	
he cable system and	d a primary transi	mitter or an as	ssociation repres	senting the primar	y transmitter, enter the designa-	
					ner basis, enter "O." For a further d in the paper SA3 form.	
Column 6: Give t	he location of ea	ch station. Fo	r U.S. stations, I	ist the community	to which the station is licensed by the	
FCC. For Mexican or Note: If you are utiliz				•	which the station is identifed. channel line-up.	
	a manapio ondi	•	EL LINE-UP		· ···	
			_			_
	2. B'CAST CHANNEI	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER		_		6. LOCATION OF STATION	-
SIGN	CHANNEL	3. TYPE OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION PHOENIX, AZ	
SIGN	CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)		
SIGN KAET-1 KAET-2	CHANNEL NUMBER 8	3. TYPE OF STATION E	4. DISTANT? (Yes or No) <b>Yes</b>	5. BASIS OF CARRIAGE (If Distant) <b>O</b>	PHOENIX, AZ	
SIGN KAET-1 KAET-2 KAET-3	CHANNEL NUMBER 8 8.2	3. TYPE OF STATION E E-M	4. DISTANT? (Yes or No) Yes Yes	5. BASIS OF CARRIAGE (If Distant) O O	PHOENIX, AZ PHOENIX, AZ	
1. CALL SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1	CHANNEL NUMBER 8 8.2 8.3	3. TYPE OF STATION E E-M E-M	4. DISTANT? (Yes or No) Yes Yes Yes	5. BASIS OF CARRIAGE (If Distant) 0 0 0	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1	CHANNEL NUMBER 8 8.2 8.3 8.3 8.4	3. TYPE OF STATION E.M E-M E-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 8	3. TYPE OF STATION E-M E-M E-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes Yes	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-1 KASW-HD1	CHANNEL NUMBER 8 8.2 8.3 8.4 8.4 8 61	3. TYPE OF STATION E-M E-M E-M I	4. DISTANT? (Yes or No) Yes Yes Yes Yes Yes No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-1 KASW-HD1 KAZT-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61	3. TYPE OF E E-M E-M E-M E-M I I-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-2	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7	3. TYPE OF STATION E-M E-M E-M I I I-M I	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-2 KAZT-HD1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7 7.2	3. TYPE OF STATION E-M E-M E-M I I-M I I-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-2 KAZT-HD1 KNXV-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-2 KAZT-HD1 KNXV-1 KNXV-HD1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 15	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M I-M N	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-2 KAZT-HD1 KNXV-1 KNXV-HD1 KNXV-HD1 KNXV-HD1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 15 15 15	3. TYPE OF STATION E-M E-M E-M I I-M I I-M I I-M N N-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-2 KAZT-HD1 KNXV-1 KNXV-HD1 KNXV-HD1 KPHO-1 KPHO-HD1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 7 15 15 15 5	3. TYPE OF STATION E-M E-M I I-M I-M I-M I-M N N-M N	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-1 KAZT-2 KAZT-HD1 KAZT-HD1 KNXV-1 KNXV-HD1 KPHO-1 KPHO-HD1 KPHO-HD1 KPNX-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7 7 7 7 15 15 15 5 5	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N N-M N-M N-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-1 KAZT-2 KAZT-HD1 KNXV-1 KNXV-HD1 KPHO-HD1 KPHO-HD1 KPNX-1 KPNX-HD1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7 7.2 7 15 15 15 5 5 5 12	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N N-M N-M N N-M N	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-1 KAZT-2 KAZT-HD1 KNXV-1 KNXV-1 KNXV-HD1 KPHO-HD1 KPNX-1 KPNX-HD1 KPNX-HD1 KSAZ-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 15 15 15 15 5 5 12 12 12	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N N-M N-M N-M N-M N-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ MESA, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-1 KAZT-2 KAZT-HD1 KNXV-1 KNXV-HD1 KPHO-1 KPHO-HD1 KPNX-1 KPNX-1 KPNX-1 KSAZ-1 KSAZ-HD1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 7 15 15 5 5 5 12 12 12 10	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M I-M N N-M N N-M N N-M I I	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN       KAET-1       KAET-2       KAET-3       KAET-4       KAET-HD1       KASW-1       KASW-101       KAZT-1       KNXV-HD1       KPHO-1       KPHO-1       KPNX-1       KPNX-1       KAZ-1       KSAZ-1       KSAZ-1       KAZ-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 15 15 5 5 5 12 12 12 12 10 10 10 39	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N-M N-M N-M N-M N-M I I-H I I I-H I I I I I I I I I I I I I	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-HD1 KASW-HD1 KAZT-1 KAZT-1 KAZT-1 KAZT-1 KAZT-1 KAZT-HD1 KPHO-HD1 KPHO-HD1 KPHO-HD1 KPNX-1 KPNX-1 KPNX-1 KAZ-1 KAZ-1 KTAZ-2	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7 7.2 7 15 15 5 5 5 12 12 12 12 10 10 10 39 39.2	3. TYPE OF STATION E-M E-M E-M I I-M I-M N N-M N N-M N N-M N N-M N N-M N I I I-M I I-M I I-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ	additional information
SIGN       KAET-1       KAET-2       KAET-3       KAET-4       KAET-HD1       KASW-1       KASW-HD1       KAZT-1       KPHO-HD1       KPNX-HD1       KPNX-HD1       KAZ-1       KAZ-1       KTAZ-1       KTAZ-HD1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7 7.2 7 15 15 15 15 5 5 12 12 12 10 10 10 39 39.2 39	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N N-M N N-M N N-M N N-M I I I-M I I I-M I I I-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ	additional information
SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-HD1 KASW-1 KASW-1D1 KASW-HD1 KAZT-1 KAZT-1 KAZT-2 KAZT-HD1 KPHO-1 KPHO-1 KPHO-1 KPNX-1 KPNX-1 KPNX-1 KPNX-1 KSAZ-1 KSAZ-1 KSAZ-1 KSAZ-1 KTAZ-1 KTAZ-2 KTAZ-HD1 KTVK-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 15 15 5 5 12 12 12 12 10 10 10 10 39 39.2 39 3	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N-M N-M N-M N-M N-M N N-M I I I-M I I I-M I I I-M I I I-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ	additional information
SIGN       KAET-1       KAET-2       KAET-3       KAET-4       KAET-4       KASW-1       KASW-1       KASW-HD1       KAZT-1        KAZT-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 15 15 5 5 12 12 12 12 10 10 10 39 39.2 39 3 3 3	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N N-M N N-M N N-M I I I-M I I-M I I-M I I-M I I-M	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ	additional information
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SIGN KAET-1 KAET-2 KAET-3 KAET-4 KAET-4 KASW-1 KASW-1 KASW-HD1 KAZT-1 KAZT-2 KAZT-HD1 KNXV-1 KNXV-HD1 KPHO-1 KPHO-1 KPHO-1 KPHO-1 KPHO-1 KNXV-HD1 KSAZ-1 KSAZ-1 KSAZ-1 KSAZ-1 KTAZ-2 KTAZ-2 KTAZ-1 KTAZ-2 KTAZ-1 KTAZ-1 KTAZ-1 KTAZ-2 KTAZ-1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 15 15 5 5 12 12 12 12 12 10 10 10 10 39 39.2 39 39.2 39 33 33 33 33	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N-M N-M N-M N-M N N-M I I-M I I-M I I-M I I-M I I-M I I-M I I I I I I I I I I I I I	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ	additional information
SIGN       KAET-1       KAET-2       KAET-3       KAET-4       KAET-HD1       KASW-HD1       KAZT-1       KAZT-10       KTAZ-HD1       KTAZ-1       KTAZ-1       KTAZ-1       KTAZ-1       KTAZ-1       KTAZ-1       KTAZ-1       KTAZ-10       KTAZ-10       KTVK-11       KTVK-101       KTVW-101       KTVW-1D1       KTVW-1D1	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7 7.2 7 15 15 15 5 12 12 12 10 10 10 39 39.2 39 39.2 39 33 33 33 33 45	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N-M N-M N N-M N N-M I I-M I I-M I I I-M I I I I I I I I I I I I I	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ	additional information
SIGN       KAET-1       KAET-2       KAET-3       KAET-4       KAET-4       KASW-1       KASW-1       KASW-1       KAZT-1       KNXV-HD1       KPHO-1       KPNX-HD1       KAZ-1       KSAZ-1       KSAZ-1       KAZ-1       KTAZ-2       KTAZ-1       KTX-HD1       KTVK-101       KTVK-101       KTVW-101	CHANNEL NUMBER 8 8.2 8.3 8.4 8 61 61 61 7 7.2 7 15 15 5 5 12 12 12 12 12 10 10 10 10 39 39.2 39 39.2 39 33 33 33 33	3. TYPE OF STATION E-M E-M E-M I I-M I-M I-M N-M N-M N-M N-M N N-M I I-M I I-M I I-M I I-M I I-M I I-M I I I I I I I I I I I I I	4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No No No No	5. BASIS OF CARRIAGE (If Distant) O O O O	PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PHOENIX, AZ PRESCOTT, AZ PRESCOTT, AZ PRESCOTT, AZ PHOENIX, AZ	additional information

Name	LEGAL NAME OF							SYSTEM ID# 030834			
H Primary Transmitters: Radio	<ul> <li>all-band basis whose signals were "generally receivable" by your cable system during the accounting period.</li> <li>Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, 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.</li> <li>Column 1: Identify the call sign of each station carried.</li> <li>Column 2: State whether the station is AM or FM.</li> <li>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.</li> <li>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).</li> </ul>										
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION			
	1							<u> </u>			

FORM SA3E. PAGE 5.					ACCOUNTING	PERIOD: 2020/1	
LEGAL NAME OF OWNER OF CABLE SYS				S	030834	Name	
	onnetwork televisio period, under speci	on program broadcast by a fic present and former FC	a distant statio C rules, regu	lations, or authorizations.	For a further	Substitute	
explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form.         1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE         • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?         Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.         2. LOG OF SUBSTITUTE PROGRAMS         In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.         Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."         Column 3: Give the call sign of the station broadcasting the substitute program.         Column 4: Give the broadcast station's location (the community with which the station is identified).         Column 5: Give the month and day when your system carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6101:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m."         Column 7: Enter							
	TE PROGRAM 3. STATION'S			EN SUBSTITUTE IAGE OCCURRED 6. TIMES	7. REASON FOR DELETION		
1. TITLE OF PROGRAM		4. STATION'S LOCATION	AND DAY	FROM       —       TO			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#CEQUEL COMMUNICATIONS LLC030834									
J Part-Time Carriage Log	<ul> <li>PART-TIME CARRIAGE LOG</li> <li>In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part- time 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.</li> <li>Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.</li> <li>Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc- curred during the accounting period.</li> <li>Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."</li> <li>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."</li> <li>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."</li> </ul>									
			DATE	S AND HOURS	OF F	PART-TIME CAF	RIAGE			
	CALL SIGN	WHEN	I CARRIAGE OCC			CALL SIGN	WHEN	I CARRIAGE O		
		DATE	HOU FROM	RS TO			DATE	HC FROM	DURS	то
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FORM	SA3E. PAGE 7.		
_	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CE	QUEL COMMUNICATIONS LLC	030834	
Inst all a (as i page	OSS RECEIPTS         ructions: The figure you give in this space determines the form you fle and the amount y mounts (gross receipts) paid to your cable system by subscribers for the system's secon dentifed in space E) during the accounting period. For a further explanation of how to core (vii) of the general instructions.         Gross receipts from subscribers for secondary transmission service(s) during the accounting period.         ORTANT: You must complete a statement in space P concerning gross receipts.	dary transmission service	K Gross Receipts
Instru • Con • Con • If yo fee f • If yo	<b>'RIGHT ROYALTY FEE</b> <b>ctions</b> : Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the amo from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable part pompanying this form and attach the schedule to your statement of account.		L Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.	entered on line 1 of	
3 be			
-	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	d be entered on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	is 1.064 percent of the	
	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.	<u> </u>	
	This is your minimum fee.	\$ 14,619.24	
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 columr "Yes" in this block.         • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule.	n 4, you must check d?	
Block 3	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	\$ 1,354.39	
0	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	\$ 1,354.39	
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, which over is larger.	\$ 14,619.24	Coble overterme
	whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	0.00	Cable systems submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact
	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	\$ 15,344.24	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		

ACCOUNTING PERIO	JD: 2020/1	FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	030834
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	tations
Channels	1. Enter the total number of channels on which the cable	
	system carried television broadcast stations	29
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	355
	and nonbroadcast services	335
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)	
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)	
-	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regul	ations.)
Ο		
Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
	(Ourses other than comparation or partnership) I am the ourses of the cable system as identified in line 1 of appendix	h or
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space E	, or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable s in line 1 of space B and that the owner is not a corporation or partnership; or	ystem as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	er of the cable system
	<ul> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.</li> <li>[18 U.S.C., Section 1001(1986)]</li> </ul>	herein
	X /s/ Alan Dannenbaum	
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus comp	
1	Typed or printed name: ALAN DANNENBAUM	
	Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)	
	Date: August 25, 2020	
-	Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information ess your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name	

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 t completed record of statements of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of lay

FORM SA3E, F	PAGE9
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 030834	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS		
The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyr lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the ca service of providing secondary transmissions of primary broadcast transmitters, the scribers and amounts collected from subscribers receiving secondary transmissions	ight Act by adding the fol- able system for the basic system shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the g paper SA3 form.	- -	Concerning Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for made by satellite carriers to satellite dish owners?	or secondary transmissions	
X NO YES. Enter the total here and list the satellite carrier(s) below		
Name Name Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late For an explanation of interest assessment, see page (viii) of the general instructions in the p		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	×	
	x <mark></mark> days	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,	•	
space L, (page 7)	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. F contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	or further assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day l	ate.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to please list below the owner, address, first community served, accounting period, and ID nun filing.		
Owner Address		
First community served Accounting period		
ID number		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the pers	onally 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 filing, a determination that would be made by a court of law.

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following: 1) A station actually carried within any portion of a cable system prior

to June 25, 1981, pursuant to the former FCC rules.

2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial 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.

# DSE SCHEDULE. PAGE 11.

# 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.

 Identify the communities/areas represented by each subscriber group.
 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.

5. Calculate a separate base rate fee for each subscriber group, using (1) 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

		Distant Stations Carried		Identification	of Subscriber	Groups		
In most cases	under current FCC	STATION	DSE	CITY	OUTSIDE LO	DCAL	GRO	SS RECEIPTS
rules, all of Fairvale would be within		A (independent)	1.0		SERVICE AF	REA OF	FROM SUBSCRIBERS	
the local servic	e area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B	, C, D ,E		\$310,000.00
A and C and al	I of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A an	nd C		100,000.00
dega Bay wou	ld be within the local	D (part-time)	0.139	Bodega Bay	Stations A an	nd C		70,000.00
service areas of	of stations B, D, and E.	E (network)	0.25	Fairvale	Stations B, D	, and E		120,000.00
		TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
	1>	Minimum Fee Total Gross	Receipts		\$600,000.00			
Santa Rosa	Stations A and C		•		x .01064			
	35 mile zone				\$6,384.00			
		First Subscriber Group		Second Subso	riber Group		Third Subscriber Group	
	· · ·	(Santa Rosa)		(Rapid City and	l Bodega Bay)		(Fairvale)	
	Fairvale							
		Gross receipts	\$310,000.00	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
Rapid City		DSEs	2.472	DSEs		1.083	DSEs	1.389
		Base rate fee	\$6,497.20	Base rate fee		\$1,907.71	Base rate fee	\$1,604.03
	Bodega	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
<del> </del>	Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
<i>i</i> +		Base rate fee	\$6,497.20	Base rate fee	-	\$1,907.71	Base rate fee	\$1,604.03
Station	ns B, D,	Total Base Rate Fee: \$6,4	197 20 + \$1 907 7	71 + \$1 604 03 =	\$10 008 94			
l an		In this example, the cable s				3 line 1 (nage	7)	
<b>3</b> 5 mil	e zone	in uns example, uie cable s	system would ent		SPACE L, DIOCK	o, me i (page	')	

### DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM IC						
1	CEQUEL COMMUNICATIONS LLC 030834						
	SUM OF DSEs OF CATEGOR	Y "O" STATION	NS:				
	Add the DSEs of each station		1.00				
	Enter the sum here and in line	1 of part 5 of this	s schedule.		1.00		
2	Instructions:	tion "I list the se	Il signs of all distant stations	identified by	the letter "O" in column F		
L	In the column headed "Call S of space G (page 3).	sign <sup>a</sup> : list the ca	il signs of all distant stations	s identified by	the letter O in column 5		
Computation	In the column headed "DSE"			E as "1.0"; for	each network or noncom-		
of DSEs for	mercial educational station, give	e the DSE as ".2					
Category "O"			CATEGORY "O" STATION			DOF	
Stations	CALL SIGN KAET-1	DSE 0.250	CALL SIGN	DSE	CALL SIGN	DSE	
	KAET-2	0.250					
	KAET-3	0.250					
	KAET-4	0.250					
		0.230					
Add rows as							
necessary.							
Remember to copy							
all formula into new							
rows.							
					(B)(B	B	

	L	lannan lan lan lan lan lan lan lan lan l	

Name		OWNER OF CABLE SYSTEM:	с				DSE SCHEDU S	VSTEM ID# 030834
<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station on rounding, see page (viii) of the general instructions in the paper SA3 form. CATEGORY LAC STATIONS: COMPUTATION OF DSES							
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	URS C ED BY S	UMBER OF HOURS TATION ON AIR	4. BASIS OF CARRIAG VALUE		6. DS	E
			÷ ÷ ÷ ÷			x x x x x x x x x x		
<b>4</b> Computation of DSEs for Substitute- Basis Stations	Add the DSEs Enter the su Instructions: Column 1: Giv • Was carried tions in effe • Broadcast o space I). Column 2: at your option. Column 3: Column 4:	ect on October 19, 1976 of one or more live, nonnetw For each station give the This figure should corre Enter the number of days Divide the figure in colum	bart 5 of this schedul tation listed in space titution for a program (as shown by the let york programs during a number of live, nor spond with the infor s in the calendar yea nn 2 by the figure in	I (page 5, the Log n that your system ter "P" in column 7 that optional carri- network programs mation in space I. ar: 365, except in a column 3, and giv	g of Substitute Pr was permitted tr of space I); and age (as shown by s carried in subst a leap year. e the result in co	o delete under FCC rules	and regular- : of were deleted s than the third	m).
	1. CALL SIGN	2. NUMBER OF	JBSTITUTE-BAS 3. NUMBER OF DAYS	GIS STATIONS 4. DSE	S: COMPUTA 1. CALL SIGN	TION OF DSEs 2. NUMBER OF	3. NUMBER OF DAYS	4. DSE
			IN YEAR + + + + + + + + + + + + +			PROGRAMS + + + + + + + + + + + + + + + + + + +	IN YEAR	
	Add the DSEs	oF SUBSTITUTE-BAS of each station. Im here and in line 3 of p		e,		0.00		
5 Total Number of DSEs	number of DSE 1. Number o 2. Number o 3. Number o	s applicable to your syster f DSEs from part 2 ● f DSEs from part 3 ● f DSEs from part 4 ●		s in parts 2, 3, and	4 of this schedule	e and add them to provide t	the total 1.00 0.00 0.00	4.00
	TOTAL NUMBE	IN OF DOES				<b>^</b>	L	1.00

LEGAL NAME OF C	WNER OF CABLE S						S	YSTEM ID# 030834	Name
In block A: • If your answer if schedule.	ck A must be comp "Yes," leave the re "No," complete blo	mainder of pa	below.			l complete par	t 8, (page 16) of th	e	6 Computation of
ls the cable system	m located wholly o			FELEVISION M		tion 76 5 of Fi	C rules and requ	lations in	3.75 Fee
effect on June 24,		schedule—D					CC rules and regu		
		BLOO	CK B: CARR	RIAGE OF PERI	MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	of distant sta and regulatio e DSE Scheo	ations listed in ns prior to Jun dule. (Note: Th	part 2, 3, and 4 of e 25, 1981. For fur e letter M below re	this schedule ther explanati	that your syste	d stations, see the	-	
Column 2: BASIS OF PERMITTED CARRIAGE	<ul> <li>(Note the FCC ru</li> <li>A Stations carrie 76.61(b)(c)]</li> <li>B Specialty static</li> <li>C Noncommeric</li> <li>D Grandfathered instructions fo</li> <li>E Carried pursua *F A station pre</li> </ul>	les and regul ed pursuant to on as defined al educationa I station (76.6 r DSE schedu ant to individu viously carried IHF station wi	ations cited be o the FCC mar in 76.5(kk) (70 I station [76.59 5) (see paragr ule). Ial waiver of FC d on a part-tim ithin grade-B c	e or substitute bas ontour, [76.59(d)(5	e in effect on 5.57, 76.59(b), )(1), 76.63(a) 3(a) referring stitution of gra is prior to Jun	June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered st e 25, 1981	6.63(a) referring to .61(e)(1) ations in the		
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 o etter "F" in column 2			orksheet on page <sup>-</sup>	14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
			I		I			0.00	
		E		MPUTATION OF	F 3.75 FEE				
Line 1: Enter the	e total number of	DSEs from p	part 5 of this s	schedule					
Line 2: Enter the	e sum of permitte	d DSEs from	n block B abo	ve			m		
Line 3: Subtract (If zero, I	line 2 from line 1 eave lines 4–7 b					ate.			
Line 4: Enter gro	oss receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted
Line 6: Enter tot	al number of DSI	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 ar	nd enter here	e and on line	2, block 3, space	L (page 7)			0.00	

DSE SCHEDULE. PAGE 13.

LEGAL NAME OF OWNER OF CABLE SYSTEM:     SYSTEM ID#       CEQUEL COMMUNICATIONS LLC     030834									
1. CALL	2. PERMITTED		1. CALL	2. PERMITTED		1. CALL	2. PERMITTED	3. DSE	6
SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		Computation
									3.75 Fee
	•••••	•••••••••••••••••••	• • •	•••	*	rt	•••••••••••••••••••••••••••••••••••••••		1

	-					DSE SCHEDULE. PAGE 14.
Name	LEGAL NAME OF OWN					SYSTEM ID#
	CEQUEL COM	MUNICATIONS L	LC			030834
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the F A—Part-time sp 76.59 B—Late-night p 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compar in block	or to June 25, 1981, call sign for each dis the DSE for this stat the accounting perio the basis of carriage CC rules and regulat ecialty programming (d)(1),76.61(e)(1), or rogramming: Carriage (e)(3)). arriage under certain rail instructions in the the station's DSE fo e the DSE figures lis (B, column 3 of part	under former FCC rules g tant station identifed by the ion for a single accounting and year in which the ac- on which the station was ions cited below pertain for carriage, on a part-time 76.63 (referring to 76.61 e under FCC rules, section FCC rules, regulations, paper SA3 form. the current accounting paper SA3 form. the in columns 2 and 5 a 6 for this station.	governing part-time and he letter "F" in column 2 ing period, occurring bet carriage and DSE occur is carried by listing one to those in effect on Jur e basis, of specialty pro- ((e)(1)). ons 76.59(d)(3), 76.61( or authorizations. For fu period as computed in p ind list the smaller of the	2 of part 6 of the DSE schedu ween January 1, 1978 and J rred (e.g., 1981/1). of the following letters:	ule. une 30, 1981. sections (vi) of the dule. e should be entered
	1. CALL	PERMITTED DS 2. PRIOR	E FOR STATIONS CAR	4. BASIS OF	E AND SUBSTITUTE BASIS 5. PRESENT	6. PERMITTED
	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE
	Instructions: Block A					
7	In block A:	a must be completed				
Computation	If your answer is	"Yes," complete blo	cks B and C, below.			
of the	If your answer is	"No," leave blocks E	and C blank and comple	ete part 8 of the DSE so	hedule.	
Syndicated			BLOCK A: MAJO	R TELEVISION MA	RKET	
Exclusivity						
Surcharge			top 100 major television m		on 76.5 of FCC rules in effect	June 24, 1981?
	Yes—Complete	e blocks B and C .		X No—Procee	ed to part 8	
	BLOCK B: C	arriage of VHF/Grad	e B Contour Stations	BL	OCK C: Computation of Exe	mpt DSEs
	Is any station listed in	•		,	isted in block B of part 7 carr	,
	or in part, over the ca		de B contour, in whole	to former FCC rul	e cable system prior to March e 76.159)	131, 1972? (Telef
	I	-	propriate permitted DSE	Yes—List ea	ch station below with its approp	riate permitted DSE
		and proceed to part 8.			ero and proceed to part 8.	
			1	_		
	CALL SIGN	DSE C	ALL SIGN DSE	CALL SIGN	DSE CALL S	IGN DSE
		тс	TAL DSEs 0.0	0	TOTAL	DSEs 0.00

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 030834	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,373,989.14	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?     Yes—Complete part 9 of this schedule.     X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)       \$         C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here       •		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)	_	
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

### ACCOUNTING PERIOD: 2020/1

ACCOUNTING PERIOD	. 2020/1	DSE SCHEDULE. PAGE 16								
Name		IE OF OWNER OF CABLE SYSTEM: SYSTEM ID# CEQUEL COMMUNICATIONS LLC 030834								
	CEQUEL COMMUNICATIONS LLC									
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.								
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)								
Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1)								
Surcharge		C. Multiply line B by 3.000 and enter here								
		D. Enter 0.00089 of gross receipts (the amount in section 1)								
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here								
		F. Multiply line D by line E and enter here								
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)								
		Syndicated Exclusivity Surcharge								
8	You m 6 was • In blo	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.								
Computation	-	r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.								
of Base Rate Fee	-	• 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.								
Dase Nate i ee		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers								
		cated 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								
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?								
		Yes—Complete part 9 of this schedule. No—Complete the following sections.								
	0 "	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE								
	Section 1	Enter the amount of gross receipts from space K (page 7)								
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.								
	2	(If block A of part 6 was checked "Yes,"								
		use the total number of DSEs from part 5.)								
	Section 3	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)								
		B. Enter 0.00701 of gross receipts (the amount in section 1)								
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here								
		D. Multiply line B by line C and enter here.								
		E. Add lines A, and D. This is your base rate fee. Enter here								
		and in block 3, line 1, space L (page 7) Base Rate Fee								
	1	μαστικάτοι σοι								

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Manaa
CEQI	JEL COMMUNICATIONS LLC 030834	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.	
4		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) ► \$	
	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	
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) <b>⋟_\$</b>	
	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 S 0.00	
	<b>TANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals	
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of clusion, you must:	of
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same	Base Rate Fee and
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
-	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you	for Partially
must a	lso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Distant Stations, and
	er, if your cable system is wholly located outside all major television markets, complete block A only.	for Partially
	For each community served, determine the local service area of each wholly distant and each partially distant station you	Permitted Stations
carried	to that community.	
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by	
	ne token, the station is distant to the subscriber.) : Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each	
subscr	iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's iber groups.	
	n section:	
	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 to all of the	
	bers in the group.	
• lf:		
, .	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, of this schedule; or,	
2) any	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions a paper SA3 form.	
• Comp	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding	
DSEs 1	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show ctual calculations on the form.	

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY	YSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	030834
	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. <b>Step 3:</b> 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.	e
	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.	

CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     Call SIGN     DSE       CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     Base Rate F     Surcharge     Surcharge     Surcharge       otal DSEs     0.00     Total DSEs     1.00     Susce Rate F     Surcharge     Surcharge       CALL SIGN     DSE     1.246,697.13     Surcharge     Surcharge     Surcharge       Stations     1.246,697.13     Susce Rate Fee Second Group     S     1.354.39       THIRD SUBSCRIBER GROUP     COMMUNITY/AREA     0     COMMUNITY/AREA     0       CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE       CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     0.00       CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     0.00       CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     0.00       CALL SIGN     DSE     CALL SIGN     DSE     CALL SIGN     DSE     0.00       Cold DSEs     0.00     Gross Receipts Fourth Group     0.000     0.00	LEGAL NAME OF OWNE							S	VSTEM ID# 030834	Name
COMMUNITY/AREA       SUBSCRIBER GROUP 1       COMMUNITY/AREA       SUBSCRIBER GROUP 2       9         CALL SIGN       DSE       100       Subscripts First Group       \$       1,246,697,13       Gross Receipts Second Group       \$       1,27,292,01       Subscripts Group       \$       1,354,39       Subscripts Group       Subscripts Group       COMMUNITY/AREA       OC       OC       OC       OC       OC       OC       Subscripts Group       CALL SIGN       DSE	E	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR	EACH	SUBSCRIE	BER GROUP		
CALL SIGN       DSE       Call SIGN	FIRST SUBSCRIBER GROUP								•	
CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DSE           Main         Main         Main         Main         0.25         Main         San Fare Fare Fare Fare Fare Fare Fare Fare	COMMUNITY/ AREA	SUBSC	CRIBER GROUP 1		COMMUNITY/ AREA SUBSC		SUBSCR	RIBER GROUP 2		-
Image: Second Group       Image: Second Group<	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE	
main       KAET-2       M       0.25       m       Synchester         Synchester       KAET-3       M       0.25       m       Synchester         KAET-4       M       0.25       m       Synchester       Synchester         KAET-4       M       0.25       m       Synchester       Synchester         Grad       M       M       M       M       Synchester       Synchester         Grad       DSE       O.00       Total DSEs       1.00       Synchester       Synchester         Synchester       Synchester       Synchester       Synchester       Synchester       Synchester         Grad       Synchester       Synchester       Synchester       Synchester       Synchester         Grad       Synchester       Synchester       Synchester       Synchester       Synchester         Synch						С				Base Rate Fe
KAET-3       M       0.25       Syndicates         KAET-4       M       0.25       Syndicates         Surcharge       or       Surcharge       for         Surcharge       or       Surcharge       for         Oral DSEs       0.00       Total DSEs       1.00         Gross Receipts First Group       \$       1.246,697.13       Gross Receipts Second Group       \$         THIRO SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Cotal DSEs       0.00       Total DSEs       0.00       0.00       Sorte Receipts First Group       \$       1.354.33         THIRO SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         COLL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       0.00         Stress Broceipts Third Group       \$       0.00       Gross Receipts Fourth Group       \$       0.00         Stress Receipts Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00 <tr< td=""><td></td><td></td><td>-</td><td></td><td></td><td>М</td><td>0.25</td><td></td><td></td><td>and</td></tr<>			-			М	0.25			and
KAET-4       M       0.25       Exclusivity         Surcharge       0       0       Surcharge         row       1.246,697.13       Gross Receipts Second Group       \$       1.27,292.01         sase Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       1.354.39         row       7       Pourtri SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       0.00       Sors Receipts Fourth Group       \$       0.00         Group Sea Receipts Third Group       \$       0.00       Sors Receipts Fourth Group       \$       0.00         Group Sea Receipts Third Group       \$       0.00       Base Rate Fee Fourth Group       \$       0.00         Base			-			М	••••••••••••••••••	-		Syndicated
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Stations			-							Partially
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Stross Receipts First Group       \$       1,246,697.13       Gross Receipts Second Group       \$       127,292.01         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       1,354.39         THIRD SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       D       D       D       D       D       D       D       D       D       D       D       D <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Stations</td>			-							Stations
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Stross Receipts First Group       \$       1,246,697.13       Gross Receipts Second Group       \$       127,292.01         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       1,354.39         THIRD SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       D       D       D       D       D       D       D       D       D       D       D       D <td></td> <td></td> <td>[</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>			[							
Stross Receipts First Group       \$       1,246,697.13       Gross Receipts Second Group       \$       127,292.01         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       1,354.39         THIRD SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       D       D       D       D       D       D       D       D       D       D       D       D <td></td> <td></td> <td>]</td> <td></td> <td>]</td> <td></td> <td></td> <td></td> <td></td> <td></td>			]		]					
Stross Receipts First Group       \$       1,246,697.13       Gross Receipts Second Group       \$       127,292.01         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       1,354.39         THIRD SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       D       D       D       D       D       D       D       D       D       D       D       D <td></td> <td></td> <td></td> <td>[</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>				[						
Stross Receipts First Group       \$       1,246,697.13       Gross Receipts Second Group       \$       127,292.01         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       1,354.39         THIRD SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       D       D       D       D       D       D       D       D       D       D       D       D <td></td>										
Stross Receipts First Group       \$       1,246,697.13       Gross Receipts Second Group       \$       127,292.01         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       1,354.39         THIRD SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       D       D       D       D       D       D       D       D       D       D       D       D <td></td>										
Stross Receipts First Group       \$       1,246,697.13       Gross Receipts Second Group       \$       127,292.01         Base Rate Fee First Group       \$       0.00       Base Rate Fee Second Group       \$       1,354.39         THIRD SUBSCRIBER GROUP       FOURTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community / AREA       D       D       D       D       D       D       D       D       D       D       D       D       D       D <td>Total DSEs</td> <td></td> <td></td> <td>0.00</td> <td>Total DSEs</td> <td></td> <td></td> <td>•</td> <td>1.00</td> <td></td>	Total DSEs			0.00	Total DSEs			•	1.00	
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COMMUNITY/ AREA       O       COMMUNITY/ AREA       O         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Community       Annotation       Community (AREA       Community (AREA       DSE       DSE         Community       Annotation       Community (AREA       Community (AREA       Community (AREA       DSE         Community       Annotation       Community (AREA       Community (AREA       Community (AREA       DSE         Community       Annotation       Community (AREA       Community (AREA       Community (AREA       Community (AREA       DSE         Community       Annotation       Community (AREA       Community (AREA       Community (AREA       Community (AREA       DSE         Community       Annotation       Community (AREA       Community (AREA       Community (AREA       Community (AREA       Community	<b>Base Rate Fee</b> First Gr	roup	\$	0.00	Base Rate Fee	e Secono	d Group	\$	1,354.39	
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE         Call SIGN       DSE       Call SIGN       DSE       Call SIGN       DSE         Cotal DSEs       0.000       Total DSEs       0.000       Sross Receipts Fourth Group       \$       0.000         Base Rate Fee Third Group       \$       0.000       Base Rate Fee Fourth Group       \$       0.000		THIRD	SUBSCRIBER GROU	P			FOURTH	SUBSCRIBER GROL	JP	
Image: State Fee       Image: State Fee <td< td=""><td>COMMUNITY/ AREA</td><td></td><td></td><td>0</td><td>COMMUNITY/</td><td>AREA</td><td></td><td></td><td>0</td><td></td></td<>	COMMUNITY/ AREA			0	COMMUNITY/	AREA			0	
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE	
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00										
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00										
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00										
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00										
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00								-		
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00			-							
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00			-							
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00										
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00										
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00								-		
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00				<b>.</b>			. <b>.</b>			
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00								-		
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00										
Gross Receipts Third Group       \$       0.00         Gross Receipts Third Group       \$       0.00         Gross Receipts Fourth Group       \$       0.00										
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Total DSEs			0.00	Total DSEs		1 1		0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00 Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth Group \$ 0.00		0.00				
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.			<u> </u>			e i ourul	Croup	<u>*</u>		
	Base Rate Fee Third Group		\$	0.00	Base Rate Fee Fourth Group		Group	\$ 0.00		
					11					
				ber group a	as shown in the b	ooxes ab	ove.	\$	1,354.39	

FORM SA3E.	PAGE 19	
	17.02 10.	

LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#CEQUEL COMMUNICATIONS LLC030834						Name		
E	BLOCK A:	COMPUTATION OF	BASERA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
		SUBSCRIBER GROU				SUBSCRIBER GROU	P	
COMMUNITY/ AREA	SUBSCRIBER GROUP 1		COMMUNITY/ AREA	SUBSCRIBER GROUP 2			9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DGL	CALL SIGN	DSL	CALL SIGN	DSL		DSL	Base Rate Fee
		-						
							····	and Sundicated
		-						Syndicated
								Exclusivity
								Surcharge
		-						for
		-						Partially
		-						Distant
								Stations
		[]		1	T			
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First Group \$ 1,246,697.13			,697.13	Gross Receipts Second Group \$ 127,292.01			27,292.01	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Second	0.00			
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
		-						
		-						
		-						
		-						
		0.00				0.00		
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourth Group \$		0.00			
<b>Base Rate Fee:</b> Add th Enter here and in block			riber group	as shown in the boxes at	oove.	¢	0.00	
	,	pade - (page /)				¥	0.00	

### ACCOUNTING PERIOD: 2020/1

LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#					
CEQUEL COMMUNICATIONS LLC	030834					
BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP					
If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:	arket any portion of your cable system is located in as defined					
<ul> <li>First 50 major television market</li> <li>Second 50 major television market</li> <li>INSTRUCTIONS:</li> <li>Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.</li> <li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.</li> <li>Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.</li> </ul>						
FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP					
Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs         Line 2: Enter the Exempt DSEs         Line 3: Subtract line 2 from line 1         and enter here. This is the         total number of DSEs for         this subscriber group         subject to the surcharge         computation					
Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation					
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page	each subscriber group as shown e 7)					
	CEQUEL COMMUNICATIONS LLC  BLOCK B: COMPUTATION OF SYNDICATED EXCLUS If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market and Syndicated Exclusivity Surcharge. Indicate which major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comm this schedule. Step 2: In line 3, give the total DSEs by subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.  FIRST SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation					