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

SA1-2E Short Form

STATEME		OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	Return completed workbook by email to:
		nsmissions by	DATE RECEIVED	AMOUNT	-
Cable System General instruct in the first tab of	ctions a	re located	9/1/2020	\$ ALLOCATION NUMBER	coplicsoa@copyright.gov For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCOL	JNTING PERIOD COVERED E	BY THIS STATEMENT: (YY	YY/(Period))	
	2	020/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		20201	Barcode Data Filing Period (optional	- see instructions)	
Accounting Period					
	lr	nstructions:			
В	G			liary of another corporation, give the full cor	porate title
Owner	U	ist any other name or names under which	the owner conducts the business of th	e cable system.	
		there were different owners during the a ingle statement of account and royalty fee		ne last day of the accounting period should song period.	ubmit a
	с	heck here if this is the system's first filing	. If not, enter the system's ID number a	ssigned by the Licensing Division.	004413
	_	LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
	c	EQUEL COMMUNICATIONS LLC			
	E	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)		
		UDDENLINK COMMUNICATIONS			
		MAILING ADDRESS OF OWNER OF (3015 S SE LOOP 323	CABLE SYSTEM		
	1)	Number, street, rural route, apartment, or suite nu	ımber)		
		TYLER, TX 75701 Dity, town, state, zip)			
С				tify the business and operation of the	
			2, give the mailing address of the	system, if different from the address	, given in space B.
System		DENTIFICATION OF CABLE SYSTEM: NEWPORT, AR			
		AILING ADDRESS OF CABLE SYSTEM:			

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

(Number, street, rural route, apartment, or suite number)

2

(City, town, state, zip code)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	CEQUEL COMMUNICATIONS LLC	004413
D	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated con discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis	nmunities within unincorporated areas and including single,
	as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho	
Area Served	identified city.	
	CITY OR TOWN	STATE
First	NEWPORT	AR
Community	CAMPBELL STATION	AR
	DIAZ	AR
dd Rows as Necessary	JACKSON COUNTY	AR
		AR
	TUCKERMAN	AR

	1						FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					TEM ID
	CEQUEL COMMUNICAT	TIONS LLC						00441
-	SECONDARY TRANSMISSION	I SERVICE: SU	JBSCRIBERS AN	ID RATES				
E	In General: The information in s							
Secondary	system, that is, the retransmission about other services (including provide the services)							
Transmission	last day of the accounting period	, , ,	,	,				
Service: Sub-	Number of Subscribers: Both					ble system	ı, broken	
scribers and	down by categories of secondar	•	-	•	•			
Rates	each category by counting the n		, , ,	•	•		s charged	
	separately for the particular serv Rate: Give the standard rate of						de and the	
	unit in which it is generally billed	-					-	
	category, but do not include disc							
	Block 1: In the left-hand block			-	•			
	systems most commonly provide						0,	
	that applies to your system. Not categories, that person or entity							
	subscriber who pays extra for ca							
	first set" and would be counted of							
	Block 2: If your cable system	has rate categ	ories for seconda	ry transmissior	n service that are	different	from those	
	printed in block 1 (for example, t							
	with the number of subscribers a sufficient.	and rates, in the	e right-hand block	a. A two- or three	ee-word descript	ion of the	service is	
		OCK 1				BLOCK	< 2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		CAT	EGORY OF SEF		NO. OF SUBSCRIBERS	RATI
	Residential:	SOBOCINID				(VIOL	ODBOCKIBEIKO	
	Service to first set		1,783 34	99				
	Service to additional set(s)		.,,					
	• FM radio (if separate rate)							
	Motel, hotel							
	Commercial		93 45	95				
	Converter			.30				
	Residential							
	Non-residential							
	SERVICES OTHER THAN SEC		NSMISSIONS: F	ATES				
F	In General: Space F calls for ra	•	,	•	• •			
Г	not covered in space E, that is, t							
Services	service for a single fee. There al furnished at cost or (2) services	•		•		0 (,	
Other Than	amount of the charge and the ur							
Secondary	enter only the letters "PP" in the	rate column.			0		5 ,	
ransmissions:	Block 1: Give the standard rate							
Rates	Block 2: List any services that	• •		-	-			
	listed in block 1 and for which a brief (two- or three-word) description		•		t these other ser	vices in th	e iorm of a	
				л.		1		
		BLO		050 405	DATE	0.475.0	BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE	CATEGORY OF Installation: Nor	-	RATE	CATEG	ORY OF SERVICE	RATE
	• Pay cable	17.00	• Motel, hotel	i-residential				
			Commercial					
	Pay cable—add'l channel Eiro protoction	19.00	-					
	Fire protection		Pay cable	ما ما ما				
	•Burglar protection		Pay cable-ad Fire protection					
	Installation: Residential	00.00	Fire protectio					
	• First set	99.00	Burglar prote	CuON				
	Additional act/a)	25.00	Other services:					
	Additional set(s)		Derry		40.00			
	• FM radio (if separate rate)		Reconnect		40.00			
			Disconnect					
	• FM radio (if separate rate)				40.00 25.00 99.00			

by your cable system di es and regulations in ef (2) and (4), 76.61(e)(2) te program basis, as ex- ute Basis Stations: Wi der specific FCC rules, i list the station here in vas carried <i>only</i> on a size e station here, and also or further information or or further ineach case onal station, by entering opendent multicast), "E" meaning of these terms of these terms of the set terms of the s	ELEVISION fy every television station (including during the accounting period, <i>except</i> effect on June 24, 1981, permitting th 2) and (4), or 76.63 (referring to 76.6 xplained in the next paragraph. <i>V</i> ith respect to any distant stations ca s, regulations, or authorizations: a space G—but do list it in space I (the substitute basis. b in space I, if the station was carried concerning substitute basis stations, call sign. <i>Do not</i> report origination p ith a station according to its over-the	At (1) stations carried only on a particle (1) stations carried only on a particle carriage of certain network proson (2) and (4))]; and (2) certain station (2) certain station (2) certain station (2) certain state by your cable system on a state by your cable system on a substitute basis and a see page (v) of the general instruprogram services such as HBO, E e-air designation. For example, resultion station for broadcasting over station, an independent station, or (for network multicast), "I" (for ind or "E-M" (for noncommercial educe uctions in the paper SA1-2 form. It the community to which the station the community with which the station of 8. TYPE OF STATION N I-M I-M	art-time basis under rograms [sections a stations carried on a a substitute program am Log)—if the also on some other ructions. ESPN, etc. Identify each report multistream over the air in its community or a noncommercial dependent), "I-M" icational multicast). tion is licensed by the
Y TRANSMITTERS: TEI ral: In space G, identify, by your cable system dues and regulations in ef ((2) and (4), 76.61(e)(2) the program basis, as expected and the set of the station set of the station here in the station here in the station here in the station here, and also or further information can the station here, and also or further information can the station here, and also or further information can the station here, and also or further information can the station here, and also or further information can the station here, and also or further information can the station here, and also or further information can the station here, and also or further information can the station here in the set of the station here in the set of the station here in the set of the station information can the station, by entering pendent multicast), "E" meaning of these terms of the set erms of the set of the station of or Mexican or Canadian CALL SIGN 2 I -1 -2 -3 -4 -3	ELEVISION fy every television station (including fiftect on June 24, 1981, permitting tf 2) and (4), or 76.63 (referring to 76.6 xplained in the next paragraph. (ith respect to any distant stations or xplained in the next paragraph. (ith respect to any distant stations or xplained in the next paragraph. (ith respect to any distant stations or xplained in the next paragraph. (ith respect to any distant stations or xplained in the next paragraph. (ith respect to any distant stations or xplained in the next paragraph. (ith respect to any distant stations or any distant stations or authorizations: a space G—but do list it in space I (th substitute basis. b in space I, if the station was carried concerning substitute basis stations, call sign. <i>Do not</i> report origination p ith a station according to its over-the form. The provide the FCC assigned to the telee is channel 4 in Washington, D.C. Is whether the station is a network g the letter "N" (for network), "N-M" (" (for noncommercial educational), o s, see page (iv) of the general instru f each station. For U.S. stations, list n stations, if any, give the name of th 2. B'CAST CHANNEL NUMBER 8 4 4.2 4.3	At (1) stations carried only on a particle (1) stations carried only on a particle carriage of certain network proson (2) and (4))]; and (2) certain station (2) certain station (2) certain station (2) certain state by your cable system on a state by your cable system on a substitute basis and a see page (v) of the general instruprogram services such as HBO, E e-air designation. For example, resultion station for broadcasting over station, an independent station, or (for network multicast), "I" (for ind or "E-M" (for noncommercial educe uctions in the paper SA1-2 form. It the community to which the station the community with which the station of 8. TYPE OF STATION N I-M I-M	art-time basis under rograms [sections a stations carried on a a substitute program am Log)—if the also on some other ructions. ESPN, etc. Identify each report multistream over the air in its community or a noncommercial dependent), "I-M" iccational multicast). tion is licensed by the ation is identified. 4. LOCATION OF STATION JONESBORO, AR JONESBORO, AR LITTLE ROCK, AR LITTLE ROCK, AR
by your cable system di es and regulations in ef (2) and (4), 76.61(e)(2) te program basis, as ex- ute Basis Stations: Wi der specific FCC rules, i list the station here in vas carried <i>only</i> on a size e station here, and also or further information or or further ineach case onal station, by entering opendent multicast), "E" meaning of these terms of these terms of the set terms of the s	Auring the accounting period, except effect on June 24, 1981, permitting th 2) and (4), or 76.63 (referring to 76.6 xplained in the next paragraph. <i>Vith</i> respect to any distant stations cas , regulations, or authorizations: a space G—but do list it in space I (the substitute basis. b in space I, if the station was carried concerning substitute basis stations, call sign. <i>Do not</i> report origination p ith a station according to its over-the form. Bumber the FCC assigned to the tele C is channel 4 in Washington, D.C. Isse whether the station is a network g the letter "N" (for network), "N-M" (" (for noncommercial educational), of s, see page (iv) of the general instru- f each station. For U.S. stations, list in stations, if any, give the name of the 8 8 4 4.2 4.3	At (1) stations carried only on a particle (1) stations carried only on a particle carriage of certain network proson (2) and (4))]; and (2) certain station (2) certain station (2) certain station (2) certain state by your cable system on a state by your cable system on a substitute basis and a see page (v) of the general instruprogram services such as HBO, E e-air designation. For example, resultion station for broadcasting over station, an independent station, or (for network multicast), "I" (for ind or "E-M" (for noncommercial educe uctions in the paper SA1-2 form. It the community to which the station the community with which the station of 8. TYPE OF STATION N I-M I-M	art-time basis under rograms [sections a stations carried on a a substitute program am Log)—if the also on some other ructions. ESPN, etc. Identify each report multistream over the air in its community or a noncommercial dependent), "I-M" iccational multicast). tion is licensed by the ation is identified. 4. LOCATION OF STATION JONESBORO, AR JONESBORO, AR LITTLE ROCK, AR LITTLE ROCK, AR
HD1 -1 -2 -3 -HD1 -1	8 8 4 4.2 4.3	N N-M N I-M I-M	JONESBORO, AR JONESBORO, AR LITTLE ROCK, AR LITTLE ROCK, AR
HD1 -1 -2 -3 -HD1 -1	8 8 4 4.2 4.3	N N-M N I-M I-M	JONESBORO, AR JONESBORO, AR LITTLE ROCK, AR LITTLE ROCK, AR
HD1 -1 -2 -3 -HD1 -1	8 4 4.2 4.3	N-M N I-M I-M	JONESBORO, AR LITTLE ROCK, AR LITTLE ROCK, AR
-1 -2 -3 -HD1 -1	4 4.2 4.3	N I-M I-M	LITTLE ROCK, AR LITTLE ROCK, AR
-2 -3 -HD1 -1	4.2 4.3	I-M I-M	LITTLE ROCK, AR
-3 -HD1 -1	4.3	I-M	
-HD1 -1			
.1	1	N-M	LITTLE ROCK, AR
	42		LITTLE ROCK, AR
-2	42.2	I-M	LITTLE ROCK, AR
- HD1	42	I-M	LITTLE ROCK, AR
-1	38	I	PINE BLUFF, AR
-HD1	38	I-M	PINE BLUFF, AR
1	7	N	LITTLE ROCK, AR
2	7.2	I-M	LITTLE ROCK, AR
3	7.3	I-M	LITTLE ROCK, AR
4	7.4	I-M	LITTLE ROCK, AR
HD1	7	N-M	LITTLE ROCK, AR
-1	36	l	LITTLE ROCK, AR
1	16	I	LITTLE ROCK, AR
HD1	16	I-M	LITTLE ROCK, AR
1	19	Е	JONESBORO, AR
2	19.2	E-M	JONESBORO, AR
3	19.3	E-M	JONESBORO, AR
4	19.4	E-M	JONESBORO, AR
-4 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1	4 HD1 1 1 HD1 1 2 3	4 7.4 HD1 7 1 36 1 16 HD1 16 1 19 2 19.2 3 19.3	4 7.4 I-M HD1 7 N-M 1 36 I 1 16 I HD1 16 I-M 1 19 E 2 19.2 E-M 3 19.3 E-M

unting Period	: 2020/1			FORM SA1-2E.
Name	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:		SYSTE
Name	CEQUEL COMMUNIC	CATIONS LLC		00
	PRIMARY TRANSMITTERS	: TELEVISION		
<u>^</u>	• • •	dentify every television station (including tr	•	,
G		em during the accounting period, except		
Primary		s in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61		
Transmitters:	substitute program basis,	as explained in the next paragraph.		
Television		s: With respect to any distant stations car	ried by your cable system on a s	ubstitute program
		rules, regulations, or authorizations: ere in space G—but do list it in space I (the	e Special Statement and Progran	n Log)—if the
	station was carried only o	n a substitute basis.	·	0,
		I also in space I, if the station was carried		
		ion concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pr		
	multicast stream associate	ed with a station according to its over-the-		
	"WETA-2" as the same or	ո the form. nel number the FCC assigned to the telev	ision station for broadcasting over	ar the air in its community
		WRC is channel 4 in Washington, D.C.	ISION Station for broadcasting ove	
	Column 3: Indicate in eac	ch case whether the station is a network s	•	
		tering the letter "N" (for network), "N-M" (for t), "E" (for noncommercial educational), or		
		terms, see page (iv) of the general instruc	,	nional municast).
		ion of each station. For U.S. stations, list t	-	
	FCC. For Mexican or Can	adian stations, if any, give the name of the	e community with which the station	on is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KTHV-1	11	Ν	LITTLE ROCK, AR
	KTHV-3	11.3	I-M	LITTLE ROCK, AR
	KTHV-3 KTHV-4	11.3 11.4	I-M I-M	
				LITTLE ROCK, AR
	KTHV-4	11.4	I-M	LITTLE ROCK, AR LITTLE ROCK, AR

CEQUEL CO	MMUNICA							SYSTEM 0044
	every radio s	station ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recein to the Co sign of e the static ion's sign g a chech n's location	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which th	t the system's he system's FM ante this point, see pa ed by the cable s he station is licen:	eadend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	?) it can ertain st eneral ii eparate :	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
		-	the community with which the	1		C/D		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
·····						·		

Accounting Perio	od: 2020/1						FORM	VI SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	ATIONS L	LC					004413
	SUBSTITUTE CARRIAG			NT AND PROGRAM I O	G			
I I	In General: In space I, ident	-	-			tion that you	r cable eve	tem carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN				Ŭ			
Special	During the accounting per	-			sis anv non	network telev	rision nroa	ram
Statement and		-		frouny, on a substitute be	515, any 11611			
Program Log	broadcast by a distant sta	lion?					YES	× NO
	Note: If your answer is "No	", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you ı	must comple	te the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs				s wherever p	ossible, if the	eir meaning	g is
	clear. If you need more spa			vision program ("substitute	nrogram") t	hat during th		ina
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general catego		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I L	ove Lucy"	or
	"NBA Basketball: 76ers vs.				(NI_ 2			
				er "Yes." Otherwise enter " casting the substitute prog				
				the community to which th		censed by th	e FCC or.	in
	the case of Mexican or Car						,	
			when your sy	stem carried the substitute	e program. U	se numerals,	with the n	nonth
	first. Example: for May 7 gi							
	to the nearest five minutes.			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."		a program car	ned by a system norm 0.0	i. i5 p.iii. to c	.20.30 p.m.		
		er "R" if the	listed prograr	n was substituted for prog	ramming that	t your system	n was <i>requ</i>	iired
	to delete under FCC rules							
	was substituted for program		your system w	as permitted to delete und	ler FCC rules	s and regulat	ions in	
	effect on October 19, 1976							
					WHE	N SUBSTIT	UTE	
	s	UBSTITUT	E PROGRAM	1		AGE OCCU		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TI	/IES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	- то	
						_		
						_		
							-	
						_		
						_		
							-	
						_		
						_		
1				I				1

Accounting Period:	2020/1			FORM	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:				SYSTEM ID#
	CEQUEL COMMUNICATIONS LLC				004413
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file a all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explana page (vii) of the general instructions located in the paper SA1-2 form Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross	system's s tion of how	secondary trans to compute this	mission servi s amount, se \$5	
_	COPYRIGHT ROYALTY FEE				
L Copyright Royalty Fee	 Instructions: To compute the royalty fee you owe Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions located in the paper SA1-2 form for more in) but less t	han \$527,60(\$263,80(
	BLOCK 1: GROSS RECEIPTS OF \$13	7,100 OR	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalt accounting period is \$52.00	y fee that y	ou must pay for t	this six-month	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add li	nes 1 and 2	2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	SS (but mo	ore than \$137,1	00)	
	1. Base amount under statutory formula	\$	263,800.00	_	
	2. Enter amount of gross receipts from space K				
	3. Subtract line 2 from line 1			-	
	4. Enter the amount of gross receipts from space K			-	
	5. Enter the amount from line 3				-
	6. Subtract line 5 from line 4				-
	7. Multiply line 6 by .005 (enter figure here)				-
	8. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	o. Interest charge. Enter the amount norm line 4, space Q, page 0				0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines	7 and 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$26	3,800 (but	less than \$527	,600)	
	1. Enter the amount of gross receipts from space K	\$	518,500.17		
	2. Base amount under statutory formula	\$	263,800.00	<u>.</u>	
	3. Subtract line 2 from line 1	\$	254,700.17	-	
	4. Multiply line 3 by .01		\$	2,547.00	-
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)		\$	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8			0.00	-
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4	1, 5, and 6 .		\$	3,866.00
	FILING FEE AND TOTAL REMITTANCE DU	JE			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		. \$	3,866.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		\$	20.00	-
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	3,886.00
	EFT Trace # or TRANSACTION ID #			Ι	
	Important: Your remittance must be in the form of an electronic payn See page i of the general instructions in the paper SA1-2 form and the				

Accounting Period:	2020/1	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 004413
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services .	<u> </u>
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	· <u></u>
for Further Information	Name RODNEY HASKINS Telephone	(903) 579-3152
O Certification	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 certified and signed in accordance with Copyright Office regulations) • I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space	
	 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as or in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained here are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	wner of the cable system
	Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	-
	Typed or printed name: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)	
	Date: 8/14/2020	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on 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 sufficiency of the fling, a determination that would be made by a court of law.

unting Period: 2020/1	FORM SA1-2E. PAG
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
QUEL COMMUNICATIONS LLC	0044
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below. 	P Special Statement Concerning Gross Receipts Exclusio
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	•
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
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