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

SA1-2E Short Form

Return completed workbook

STATEME	ENT OF ACCOUNT	FOR COPYRIGH	IT OFFICE USE ONLY	by email to:	
	ry Transmissions by	DATE RECEIVED	AMOUNT		
General instru	ms (Short Form) ctions are located of this workbook	9/1/2020	\$ ALLOCATION NUMBER	<u>coplicsoa@copyright.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150	
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY Period 1 = January 1 - June 30 Barcode Data Filing Period (optional	Period 2 = July 1 - December 31		
Accounting Period	20201		,		
В	Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent co	-	diary of another corporation, give the full cor	porate title	
Owner	List any other name or names under which	h the owner conducts the business of th	ne cable system.		
	If there were different owners during the single statement of account and royalty fe	e payment covering the entire account		ubmit a 063626	
	LEGAL NAME OF OWNER/MAILING	G ADDRESS OF CABLE SYSTEM			
	CEQUEL COMMUNICATIONS LLC				
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)			
	SUDDENLINK COMMUNICATIONS				
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM			
	3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite n	umber)			
	TYLER, TX 75701				
	(City, town, state, zip)				
С	INSTRUCTIONS: In line 1, give any busin names already appear in space B. In line				
System	IDENTIFICATION OF CABLE SYSTEM:				
	1 PICKAWAY CORRECTION				
	MAILING ADDRESS OF CABLE SYSTEM	:			
	2 (Number, street, rural route, apartment, or suite n	umber)			

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 sufficiency of the fling, a determination that would be made by a court of law.

(City, town, state, zip code)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID:
Humo	CEQUEL COMMUNICATIONS LLC	063620
	Instructions: List each separate community served by the cable system. A "c	
D	"a separate and distinct community or municipal entity (including unincorpo	
	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th	
	as the "first community." Please use it as the first community on all future fi	
Area	Note: Entities and properties such as hotels, apartments, condominiums, or	mobile home parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	STATE
First	ORIENT	ОН
Community	(PICKAWAY CORR)	
Rows as Necessary		
Rows as necessary		

	LEGAL NAME OF OWNER OF C								1-2E. PAGE
Name								51	06362
Е	SECONDARY TRANSMISSION								
	In General: The information in s system, that is, the retransmission								
Secondary	about other services (including p								
Transmission	last day of the accounting period	d (June 30 or D	ecembe	r 31, as the ca	ase may be	e).		0	
Service: Sub-	Number of Subscribers: Both	•					2		
scribers and	down by categories of secondar								
Rates	each category by counting the n separately for the particular server	•		0,0				charged	
	Rate: Give the standard rate of							ge 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 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	-		•					
	printed in block 1 (for example, t								
	with the number of subscribers a sufficient.	and rates, in the	e ngnt-n	and DIOCK. A l	wo- or thre	e-word descript	ion of the s	service is	
		OCK 1					BLOCK	(2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RATI
	Residential:	COBCONID	LIKU	TUTE	0,111		(IIOE	COBCONDENCO	1011
	Service to first set		0	_					
	Service to additional set(s)		Ŭ	0					
	• FM radio (if separate rate)		Ŭ	Ŭ.					
	Motel, hotel								
	Commercial		46	40.71					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA		SIONS: RATE	S				
-	In General: Space F calls for ra	te (not subscril	ber) info	mation with re	espect to a	all your cable sys	stem's serv	vices that were	
F	not covered in space E, that is, t								
Comisso	service for a single fee. There a		,		0		0()		
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		usually	billed. If ally to	ales ale ci	narged on a van	able pei-pi	lografii basis,	
ransmissions:	Block 1: Give the standard rate	te charged by t							
runsinissions.		• •			-	-			
Rates	Block 2: List any services that	separate charc	ge was n	nade or establ	ished. List	these other ser	vices in the	e form of a	
	listed in block 1 and for which a								
	-		de the ra				r		
	listed in block 1 and for which a brief (two- or three-word) descrip	ption and inclue BLO	CK 1	te for each.				BLOCK 2	1
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	ption and inclue	CK 1 CATEG	te for each. ORY OF SER		RATE	CATEGO	BLOCK 2 DRY OF SERVICE	E RATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	ption and inclue BLO	CK 1 CATEG Installa	te for each. ORY OF SER tion: Non-res			CATEGO		E RATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	ption and inclue BLO	CK 1 CATEG Installa • Mot	te for each. ORY OF SER tion: Non-res el, hotel			CATEGO		E RATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con	te for each. ORY OF SER tion: Non-res el, hotel mercial			CATEGO		E RATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay	te for each. ORY OF SER tion: Non-res el, hotel nmercial cable	idential		CATEGO		E RATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay	te for each. ORY OF SER tion: Non-res el, hotel nmercial cable cable	idential		CATEGO		ERATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire	te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection	idential		CATEGO		ERATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection	idential		CATEGO		ERATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection	idential		CATEGO		E RATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	te for each. ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection	idential		CATEGO		ERATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec	te for each. ORY OF SER tion: Non-res el, hotel mmercial cable cable-add'l ch protection glar protection ervices:	idential		CATEGO		ERATE
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	ption and inclue BLO	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec • Disc	te for each. ORY OF SER tion: Non-res el, hotel mmercial cable cable-add'l ch protection glar protection ervices: onnect	idential		CATEGO		ERATI

g Period: 2				
me	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
ine	CEQUEL COMMUNIC	ATIONS LLC		063626
	PRIMARY TRANSMITTERS:	TELEVISION		
3		entify every television station (including m during the accounting period, <i>except</i>	•	,
	5	in effect on June 24, 1981, permitting the 200 m^2		
ary itters:		e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph.	o1(e)(2) and (4))]; and (2) certain stat	ions carried on a
vision	Substitute Basis Stations	: With respect to any distant stations ca	arried by your cable system on a sub	stitute program
		ules, regulations, or authorizations: e in space G—but do list it in space I (th	he Special Statement and Program L	_oa)—if the
	station was carried only on	a substitute basis.		0,
		also in space I, if the station was carried on concerning substitute basis stations,		
	Column 1: List each station	n's call sign. <i>Do not</i> report origination p	program services such as HBO, ESP	N, etc. Identify each
	multicast stream associated "WETA-2" as the same on t	d with a station according to its over-the the form	e-air designation. For example, repo	rt multistream
	Column 2: Give the channel	el number the FCC assigned to the tele	evision station for broadcasting over t	the air in its community
	· · · · · · · · · · · · · · · · · · ·	RC is channel 4 in Washington, D.C. case whether the station is a network	station, an independent station, or a	noncommercial
	educational station, by ente	ering the letter "N" (for network), "N-M" ((for network multicast), "I" (for indepe	endent), "I-M"
		, "E" (for noncommercial educational), c erms, see page (iv) of the general instru		onal multicast).
	Column 4: Give the locatio	n of each station. For U.S. stations, list	the community to which the station i	
	FCC. For Mexican or Cana	dian stations, if any, give the name of the transme of the transmetric data and the	he community with which the station	is identified.
		2. B'CAST CHANNEL NUMBER		
	1. CALL SIGN	2. B CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	1. CALL SIGN W23BZ-1	23	3. TYPE OF STATION	4. LOCATION OF STATION COLUMBUS, OH
			3. TYPE OF STATION	
lecessary	W23BZ-1	23	I	COLUMBUS, OH
ecessary	W23BZ-1 WBNS-1	23 10	I	COLUMBUS, OH COLUMBUS, OH
cessary	W23BZ-1 WBNS-1 WCMH-1	23 10 4	I N N	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
ecessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2	23 10 4 4.2	I N N I-M	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
ecessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1	23 10 4 4.2 34	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
Vecessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1	23 10 4 4.2 34 6	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
s Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
s Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
ıs Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
is Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
s Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
is Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
ıs Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
ıs Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
ıs Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
ıs Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH
ıs Necessary	W23BZ-1 WBNS-1 WCMH-1 WCMH-2 WOSU-1 WSYX-1 WTTE-1	23 10 4 4.2 34 6 28	i N N i-M E	COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH COLUMBUS, OH

LEGAL NAME OF								SYSTEM 063
	t every radio s	tation ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of it for detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing	y the sys be recei t the Cc sign of e he static ion's sign g a check	I-Band FM Carriage: Under C tem whenever it is received a wed at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which th	t the system's he system's FM ante his point, see pa ed by the cable s	eadend, and (2 enna, during c ge (v) of the g system as a se	2) it can ertain st jeneral i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
Aexican or Can			the community with which the					
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
							·	
							·	
						1	+	

Accounting Perio	od: 2020/1						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	ATIONS L	LC					063626
	SUBSTITUTE CARRIAG				G			
1					-			
•	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the programm							
Carriage:					ne general in			
Special	1. SPECIAL STATEMEN	-						
Statement and	 During the accounting per 	riod, did you	ur cable syster	n carry, on a substitute ba	sis, any noni	network telev	vision prog	
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No	" leave the	rest of this na	age blank. If your answer is	"Ves " vouu	must comple	te the proc	
				ige blank. If your answer is	5 103, you i	indst compie	te the prog	jram
	log in block 2.		MC					
	2. LOG OF SUBSTITUTI In General: List each subs			ata lina. Lina abbraviation	- whorever p	oogiblo if the	ir moonin	a io
	clear. If you need more spa				s wherever p		in meaning	J 15
				vision program ("substitute	e program") t	hat. during th	ne account	ina
	period, was broadcast by a							
	under certain FCC rules, re	gulations, o	or authorizatio	ns. See page (v) of the ge	neral instruct	tions for furth	er informa	tion.
	Do not use general categor		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I L	ove Lucy"	or
	"NBA Basketball: 76ers vs.			۵/ ۳ <u>0</u> /۱	K I I			
				er "Yes." Otherwise enter ' asting the substitute progr				
				the community to which th		censed by th	e ECC or	in
	the case of Mexican or Car						010001,	
				stem carried the substitute			with the n	nonth
	first. Example: for May 7 gi							
				ogram was carried by you				ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:01	1:15 p.m. to 6	6:28:30 p.m.	should be	
	stated as "6:00–6:30 p.m."	or "D" if the	listed program	n waa aubatitutad far prog	romming the	t vour ovotor	NACO FOR	urad
	to delete under FCC rules			n was substituted for prog				
	was substituted for program							ogram
	effect on October 19, 1976		your oyotonn n			o ana rogalat		
								1
						N SUBSTIT		
	S	UBSTITUT	E PROGRAM	1	CARRI	AGE OCCU		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIN		DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	- TO	
							-	
							_	
							-	
						-		
							-	
							- 	
							-	
							-	
						_		
							-	
							-	
						_		
						_		
1					·			+

Accounting Period:	2020/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SI	STEM ID#
	CEQUEL COMMUNICATIONS LLC		063626
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans: (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	mission service amount, se	,310.00
	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 but less than or equal to 1 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(See page (vi) of the general instructions located in the paper SA1-2 form for more information.	\$263,80(
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00	his six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	1. Base amount under statutory formula		
	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
			0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	1
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID #		
	<u>Important:</u> Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2020/1							FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CEQUEL COMMUNICA							SYSTEM ID 06362
M Channels	CHANNELS Instructions: You must git to its subscribers, and (2) t 1. Enter the total number of system carried television 2. Enter the total number of on which the cable system and nonbroadcast service	the cable system's the cable system's the cable system's the original system of channels of activated channels of activated television the system of the sys	total number of th the cable ls b broadcast stati	activated channels	during the ad	ccounting period		8 24
N Individual to Be Contacted	INDIVIDUAL TO BE CON we can contact about this	statement of accour		TION IS NEEDED (Identify an in	dividual to whon		
for Further Information	Address 3015 S (Number, TYLEF	EY HASKINS SE LOOP 323 street, rural route, apart R, TX 75701		ber)			Telephone	(903) 579-3152
	(City, town	n, state, zip)	KINS@ALTIC	EUSA.COM		Fax (optional)	
O Certification	(Agent of owner in line 1 of sp	an corporation or p an corporation or p r other than corpor bace B and that the o ner) I am an officer (bace B. ment of account and rect to the best of m	one, <i>but only one</i> partnership) I an ration or partne owner is not a co (if a corporation) d hereby declare y knowledge, inf	e, of the boxes.) m the owner of the o rship) I am the duly prporation or partner) or a partner (if a pa under penalty of law	authorized ag ship; or artnership) of w that all state and are mad	as identified in lir gent of the owner the legal entity id ements of fact co de in good faith.	ne 1 of space r of the cable lentified as ow ntained hereir	system as identified mer of the cable system
		Typed or printed Title: (Title of o Date:	d name: AL	AN DANNENE GRAMMING	ure" (e.g., /s/			

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.

ounting Period: 2020/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
QUEL COMMUNICATIONS LLC	06362
 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? NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme

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 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 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.