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.

STATEMENT OF ACCOUNT

## SA1-2E Short Form

by email to:

Cable Systems (Short Form)       contraction       contraction       contraction       contraction       contraction       contraction       For additional information, contract the LS. Copyright and the contraction of the conter of the contraction of the contraction of the conth
General instructions are located in the first tab of this workbook       03/02/21 <ul> <li>ALLOCATION NUMBER</li> <li>Context the U.S. Copyright ALLOCATION NUMBER</li> <li>Context the U.S. Copyright ALLOCATION NUMBER</li> </ul> context the U.S. Copyright Originate: Learning Dursion dt: Tel: (202) 707-8150           Accounting Period         Period 1 = January 1 - June 30         Period 2 = July 1 - December 31           20202         Barcode Data Filing Period (optional - see instructions)         Instructions:           Given the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.         Instructions:         [002913]         [002913]         [002913]           Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.         [002913]         [
In the first tab of this workbook
A       ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))         2020/2       Period 1 = January 1 - June 30       Period 2 = July 1 - December 31         2020/2       Period 1 = January 1 - June 30       Period 2 = July 1 - December 31         2020/2       Barcode Data Filing Period (optional - see instructions)         Accounting Period       Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate 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.       D02913         Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.       D02913         LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM       CEQUEL COMMUNICATIONS LLC
Accounting Period       Period 1 = January 1 - June 30       Period 2 = July 1 - December 31         2020/2       Barcode Data Filing Period (optional - see instructions)         Accounting Period       Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate 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.       002913         LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM       CeQUEL COMMUNICATIONS LLC
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Accounting Period
Accounting Period
Accounting Period
Period         Instructions:         Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.         Owner       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.         Obscience       Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.         Image: LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM         CEQUEL COMMUNICATIONS LLC
B       Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.         Cowner       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.         Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.       002913         LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM       EQUEL COMMUNICATIONS LLC
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CEQUEL COMMUNICATIONS LLC
CEQUEL COMMUNICATIONS LLC
BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
SUDDENLINK COMMUNICATIONS
MAILING ADDRESS OF OWNER OF CABLE SYSTEM
3027 S SE LOOP 323
(Number, street, rural route, apartment, or suite number) TYLER, TX 75701
(City, town, stale, zip)
C INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these 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:
<sup>1</sup> CHARLESTON, AR
MAILING ADDRESS OF CABLE SYSTEM:
2 [Number, street, rural route, apartment, or suite number]
(City, town, state, zip code)
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this

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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.

Return completed workbook

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Numo	CEQUEL COMMUNICATIONS LLC	002913
	Instructions: List each separate community served by the cable system. A "co	
D	"a separate and distinct community or municipal entity (including unincorpo	
D	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	nobile home parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	STATE
First	CHARLESTON	AR
ommunity		
ws as Necessary		

	1						FORM SA1	-		
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					TEM ID		
	CEQUEL COMMUNICA	TIONS LLC						00291		
-	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCRIBE	RS AND RATES						
E	In General: The information in s									
0	system, that is, the retransmission									
Secondary Transmission	about other services (including particular about other services (including particular about the accounting period	<i>,</i> , ,	,		,	lnose exist	ing on the			
Service: Sub-	Number of Subscribers: Bot					ble system	ı, broken			
scribers and	down by categories of secondar	-				•				
Rates	each category by counting the n			• • •			s charged			
	separately for the particular service at the rate indicated—not the number of sets receiving service). <b>Rate:</b> Give the standard rate charged for each category of service. Include both the amount of the charge and the									
	<b>Rate:</b> Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate									
	category, but do not include disc	• •	,	•		o within a				
	Block 1: In the left-hand block	t in space E, th	e form lists	the categories of	secondary transmis	sion servi	ce that cable			
	systems most commonly provide									
	that applies to your system. Not									
	categories, that person or entity subscriber who pays extra for ca									
	first set" and would be counted of									
	Block 2: If your cable system					different f	rom those			
	printed in block 1 (for example, t				,	,,	, 0			
	with the number of subscribers a	and rates, in th	e right-hand	block. A two- or	three-word descript	ion of the s	service is			
-	sufficient.	BLOCK 2								
		NO. OF				NO. OF				
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS I	RATE C	CATEGORY OF SEF	RVICE	SUBSCRIBERS	RATE		
			62							
	Service to first set		63	34.99						
	Service to additional set(s)									
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		11	45.95						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC		Nemiseio							
_	In General: Space F calls for ra				to all your cable sys	stem's serv	vices that were			
F	not covered in space E, that is, t		,	•						
	service for a single fee. There a	•		•		• • •	,			
Services	furnished at cost or (2) services									
Other Than Secondary	amount of the charge and the un enter only the letters "PP" in the		usually bille	ed. If any rates ar	re charged on a vari	able per-p	rogram basis,			
ransmissions:	Block 1: Give the standard ra		he cable sy	stem for each of	the applicable servi	ces listed.				
Rates	Block 2: List any services that									
	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) descrip	ption and inclue	de the rate f	or each.						
		BLO	CK 1				BLOCK 2			
	CATEGORY OF SERVICE	RATE	CATEGOR	Y OF SERVICE	RATE	CATEGO	ORY OF SERVICE	RATE		
	Continuing Services:		Installatior	1: Non-residenti	al					
	• Pay cable	17.00	• Motel, h	otel						
	<ul> <li>Pay cable—add'l channel</li> </ul>	19.00	<ul> <li>Comme</li> </ul>	rcial						
	<ul> <li>Fire protection</li> </ul>		<ul> <li>Pay cab</li> </ul>	ole						
	<ul> <li>Burglar protection</li> </ul>		• Pay cab	le-add'l channel						
	Installation: Residential		<ul> <li>Fire pro</li> </ul>	tection						
	• First set	99.00	• Burglar	protection						
	<ul> <li>Additional set(s)</li> </ul>	25.00	Other serv	ices:				[		
	• FM radio (if separate rate)		<ul> <li>Reconn</li> </ul>	ect	40.00			Ī		
	- 1 W Taulo (II Separate Tate)			001						
	• Converter		<ul> <li>Disconr</li> </ul>							
			• Disconr • Outlet n	nect	25.00					
			• Outlet r	nect	25.00 99.00					

arried by your cable syste CC rules and regulations 6.59(d)(2) and (4), 76.61( ubstitute program basis, a <b>ubstitute Basis Stations</b> asis under specific FCC m Do <i>not</i> list the station here tation was carried <i>only</i> or List the station here, and asis. For further informatic <b>olumn 1:</b> List each statio nulticast stream associate WETA-2" as the same on <b>olumn 2:</b> Give the chann f license. For example, W <b>olumn 3:</b> Indicate in eact ducational station, by ente or independent multicast) or the meaning of these to <b>olumn 4:</b> Give the location	CATIONS LLC         TELEVISION         entify every television station (including em during the accounting period, except in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.6 as explained in the next paragraph.         s: With respect to any distant stations ca ules, regulations, or authorizations: re in space G—but do list it in space I (th n a substitute basis.         also in space I, if the station was carried on concerning substitute basis stations, on's call sign. Do not report origination p of with a station according to its over-the	t (1) stations carried only on a pa ne carriage of certain network pro (1(e)(2) and (4))]; and (2) certain s arried by your cable system on a ne Special Statement and Progra d both on a substitute basis and a see page (v) of the general instru- brogram services such as HBO, E e-air designation. For example, re evision station for broadcasting ov station, an independent station, or (for network multicast), "I" (for ind- or "E-M" (for noncommercial educ uctions in the paper SA1-2 form. the community to which the station	Art-time basis under ograms [sections stations carried on a substitute program Im Log)—if the also on some other uctions. ESPN, etc. Identify each eport multistream ver the air in its community or a noncommercial lependent), "I-M" cational multicast). on is licensed by the
RIMARY TRANSMITTERS: a General: In space G, ide arried by your cable syste CC rules and regulations 6.59(d)(2) and (4), 76.61( ubstitute program basis, a ubstitute Basis Stations asis under specific FCC rr Do <i>not</i> list the station here tation was carried <i>only</i> or List the station here, and asis. For further informatic olumn 1: List each station nulticast stream associate WETA-2" as the same on olumn 2: Give the chann f license. For example, W olumn 3: Indicate in each ducational station, by enter or independent multicast) or the meaning of these to olumn 4: Give the location CC. For Mexican or Cana 1. CALL SIGN (AFT-1 (FSM-1 (FTA-1 (HBS-1	TELEVISION         entify every television station (including em during the accounting period, except in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.6 as explained in the next paragraph.         s: With respect to any distant stations carules, regulations, or authorizations:         re in space G—but do list it in space I (the n a substitute basis.         also in space I, if the station was carried on concerning substitute basis stations, or on concerning substitute basis stations, on's call sign. <i>Do not</i> report origination prid with a station according to its over-the the form.         tel number the FCC assigned to the tele         VRC is channel 4 in Washington, D.C.         h case whether the station is a network ering the letter "N" (for network), "N-M" (to, "E" (for noncommercial educational), or erms, see page (iv) of the general instruon of each station. For U.S. stations, list adian stations, if any, give the name of the distant stations, if any, give the name of the distant stations, if any, give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station stations, if any give the name of the station station station stations, if any give the name of the stat	t (1) stations carried only on a pare carriage of certain network provide) (2) and (4))]; and (2) certains arried by your cable system on a set of the Special Statement and Prograded both on a substitute basis and a see page (v) of the general instruction of the general instruction of the services such as HBO, E e-air designation. For example, restriction, an independent station, or (for network multicast), "I" (for independent station, an independent station, or (for network multicast), "I" (for independent station, an independent station, and the community to which the station he community with which the station of the static station in the paper SA1-2 form. It he community with which the station is a set of the static station in the paper SA1-2 form. It is community with which the static stati	r television stations) rr television stations) rrt-time basis under bgrams [sections stations carried on a substitute program um Log)—if the also on some other uctions. ESPN, etc. Identify each eport multistream ver the air in its community or a noncommercial lependent), "I-M" cational multicast). toon is licensed by the iton is identified. 4. LOCATION OF STATION FAYETTEVILLE, AR FORT SMITH, AR FORT SMITH, AR
A General: In space G, ide arried by your cable syste CC rules and regulations 6.59(d)(2) and (4), 76.61( ubstitute program basis, a ubstitute Basis Stations asis under specific FCC m Do <i>not</i> list the station here tation was carried <i>only</i> or List the station here, and asis. For further informatic olumn 1: List each statio nulticast stream associate NETA-2" as the same on olumn 2: Give the chann f license. For example, W olumn 3: Indicate in each ducational station, by ente or independent multicast) or the meaning of these to olumn 4: Give the locatio CC. For Mexican or Cana 1. CALL SIGN (AFT-1 (FFA-1 (HBS-1	entify every television station (including em during the accounting period, except in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.6 as explained in the next paragraph. s: With respect to any distant stations ca- ules, regulations, or authorizations: re in space G—but do list it in space I (th n a substitute basis. also in space I, if the station was carried on concerning substitute basis stations, on's call sign. <i>Do not</i> report origination p ed with a station according to its over-the the form. hel number the FCC assigned to the telev VRC is channel 4 in Washington, D.C. h case whether the station is a network ering the letter "N" (for network), "N-M" ( ), "E" (for noncommercial educational), c erms, see page (iv) of the general instru- on of each station. For U.S. stations, list adian stations, if any, give the name of th <b>2. B'CAST CHANNEL NUMBER</b> <b>9</b> <b>5</b> <b>24</b>	t (1) stations carried only on a pare carriage of certain network provide) (2) and (4))]; and (2) certains arried by your cable system on a set of the Special Statement and Prograded both on a substitute basis and a see page (v) of the general instruction of the general instruction of the services such as HBO, E e-air designation. For example, restriction, an independent station, or (for network multicast), "I" (for independent station, an independent station, or (for network multicast), "I" (for independent station, an independent station, and the community to which the station he community with which the station of the static station in the paper SA1-2 form. It he community with which the station is a set of the static station in the paper SA1-2 form. It is community with which the static stati	rt-time basis under ograms [sections stations carried on a substitute program im Log)—if the also on some other uctions. ESPN, etc. Identify each eport multistream ver the air in its community or a noncommercial lependent), "I-M" exational multicast). on is licensed by the ion is identified. 4. LOCATION OF STATION FAYETTEVILLE, AR FORT SMITH, AR FORT SMITH, AR
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(AFT-1 (FSM-1 (FTA-1 (HBS-1	9 5 24	E N I	FAYETTEVILLE, AR FORT SMITH, AR FORT SMITH, AR
(FSM-1 (FTA-1 (HBS-1	5 24	N I	FORT SMITH, AR FORT SMITH, AR
(FTA-1 (HBS-1	24	l	FORT SMITH, AR
(HBS-1		l N	
	40	N	FORT SMITH, AR
HBS-2			
	40.2	I-M	FORT SMITH, AR
NWA-1	51	Ν	ROGERS, AR
XNW-1	25	I	EUREKA SPRINGS, AR

EGAL NAME OF								SYSTEM 0029
	every radio s	tation ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) in the basis of a for detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether t the radio stati this by placing vive the station	/ the sys be recei t the Cc sign of e he static ion's sign g a check i's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante his point, see pa ed by the cable s le station is licen:	eadend, and (2 enna, during c ge (v) of the <u>c</u> system as a se sed by the FC	2) it can sertain st general i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		5,0		C. LE CIGIT		5,5		
						·		
						ł		

Accounting Perio							FOR	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF							SYSTEM ID#
Name	CEQUEL COMMUNICA	ATIONS L	LC					002913
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LC	G			
I	In General: In space I, ident substitute basis during the a	tify every not	nnetwork televi eriod, under sp	<i>ision program,</i> broadcast b becific present and former F	y a <i>distant</i> sta CC rules, reg	ulations, or	authorizatio	ns. For a further
Substitute	explanation of the programm	ning that mu	st be included	in this log, see page (v) of	he general in	structions ir	the paper S	A1-2 form.
Carriage: Special	1. SPECIAL STATEMEN	-						
Statement and	<ul> <li>During the accounting per</li> </ul>	-	ur cable syster	m carry, on a substitute ba	isis, any noni	network tel	evision prog	
Program Log	broadcast by a distant sta	tion?					YES	NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you i	must comp	lete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI							
	In General: List each subs clear. If you need more spa				s wherever p	ossible, if t	heir meaning	g is
				vision program ("substitut	e program") t	hat, during	the account	ing
	period, was broadcast by a	distant sta	tion and that y	our cable system substitu	ted for the pr	ogramming	of another	station
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.					champic, i	LOVE LUCY	01
				er "Yes." Otherwise enter				
				casting the substitute prog the community to which th		censed by	the ECC or	in
	the case of Mexican or Car							
	Column 5: Give the more	nth and day		stem carried the substitut			ls, with the r	nonth
	first. Example: for May 7 gi		o cubetituto pr	ogram was carried by you	r cablo sveto	m list the	timos occur	atoly
	to the nearest five minutes.							atery
	stated as "6:00–6:30 p.m."							
	Column 7: Enter the lett to delete under FCC rules			n was substituted for prog				
	was substituted for program							ogram
	effect on October 19, 1976		, ,			0		
								7. REASON FOR
		2. LIVE?	E PROGRAM 3. STATION'S		5. MONTH	AGE OCC		DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY		— то	
							_	
							<u> </u>	
							_	
							_	
							<u> </u>	·
							_	
							_	
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Accounting Period:	2020/2 FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY CEQUEL COMMUNICATIONS LLC	STEM ID# 002913
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total c all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se 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.	,884.55
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,80( • 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.	
	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 this six-month accounting period is \$52.00	
	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 \$137,100)	
	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	
	A. Enter the amount of gross receipts from space K     5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	
	8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
	1. Enter the amount of gross receipts from space K	
	2. Base amount under statutory formula \$ 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)	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	
	FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$ 52.00	
Total Remittance Due		
	2. Filing Fee (See the instructions for more information on filing fee calculations)	]
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	67.00
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.	

Accounting Period:	2020/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 002913
<b>M</b> Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable to its subscribers, and (2) the cable system's total number of activated chan 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	7
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEE we can contact about this statement of account.)	
for Further Information	Name     RODNEY HASKINS       Address     3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)       TYLER, TX 75701 (City, town, state, zip)	Telephone (903) 579-3152
	Email RODNEY.HASKINS@ALTICEUSA.COM	Fax (optional)
O Certification	in line 1 of space B and that the owner is not a corporation or p	.) f the cable system as identified in line 1 of space B; or e duly authorized agent of the owner of the cable system as identified artnership; or f a partnership) of the legal entity identified as owner of the cable system of law that all statements of fact contained herein
		enbaum on the line above to certify this statement. ignature" (e.g., /s/ John Smith)
	Typed or printed name: ALAN DANN Title: SVP, PROGRAMMIN (Title of official position held in corporation of	G
	Date:	2/25/2021

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: 2020/2	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
QUEL COMMUNICATIONS LLC	0029
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:</li> <li>"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."</li> <li>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.</li> <li>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?</li> <li>NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below.</li> </ul>	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.	0
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