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

STATEMI	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
	ry Transmissions by	DATE RECEIVED	AMOUNT	
Cable Syste	ms (Short Form)	8/30/21	\$	coplicsoa@copyright.gov For additional information, contact the U.S. Copyright Office Licensing Division at:
-	of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))	
	2021/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20211	Barcode Data Filing Period (optiona	I - see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of t title of the subsidiary, not that of the par		sidiary of another corporation, give the full o	corporate
Owner	List any other name or names under whic	ch the owner conducts the business of	the cable system.	
	If there were different owners during the single statement of account and royalty f		n the last day of the accounting period shoul nting period.	d submit a
	Check here if this is the system's first filin	g. If not, enter the system's ID numbe	r assigned by the Licensing Division.	010031
	LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM	Λ	
	CEQUEL COMMUNICATIONS LLC			
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFEREN	T)	
	SUDDENLINK COMMUNICATIONS			
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
	3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite n	umber)		
	TYLER, TX 75701 (City, town, state, zip)			
С	<b>INSTRUCTIONS:</b> In line 1, give any busin names already appear in space B. In line			
System	IDENTIFICATION OF CABLE SYSTEM:	_, g	······································	
	<sup>1</sup> QUANAH, TX			
	MAILING ADDRESS OF CABLE SYSTEM	:		
	2 (Number, street, rural route, apartment, or suite n	umber)		
	(City, town, state, zip code)			
	(org, corr, care, zip oodo)			
Privacy Act Notic	e: Section 111 of title 17 of the United States Code au	thorizes the Copyright Offce to collect th	ne personally identifying information (PII) reque	ested on this

Final of Notice: Section 111 of title 17 of the United States Code autonorzes the Copyright Office to collect the personally identifying information (Pil) 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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
	CEQUEL COMMUNICATIONS LLC	0100
D	Instructions: List each separate community served by the cable system. A "con "a separate and distinct community or municipal entity (including unincorpora discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that as the "first community." Please use it as the first community on all future filin	ted communities within unincorporated areas and including single you list will serve as a form of system identification hereafter kno ngs.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mo identified city.	obile home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	QUANAH	ТХ
Community		
dd Rows as Necessary		

	Т						FORM SA1-				
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:								
	CEQUEL COMMUNICAT	TIONS LLC						01003			
-	SECONDARY TRANSMISSION	SERVICE: SI	JBSCRIBERS	AND RATES							
E	In General: The information in s			-	•						
0	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the										
Secondary Transmission	last day of the accounting period					lnose exist	ing on the				
Service: Sub-	Number of Subscribers: Both	<b>`</b>	,	,	,	ble system	, broken				
scribers and	down by categories of secondary	y transmission	service. In ge	neral, you can co	mpute the number	er of subsc	ribers in				
Rates	each category by counting the n		, ,	5 5 (		,	charged				
	separately for the particular serv Rate: Give the standard rate c				•	,	ne 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. <b>Not</b> 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.		e fight-hand bi	IOCK. A IWO- OF IT	ree-word descript		Service is				
	BLC	DCK 1				BLOCK					
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		TE CA	TEGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RATE			
	Residential:	CODOCIND				(WICE	COBCONIBEINO	10(11			
	Service to first set		76	34.99							
	Service to additional set(s)										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		16	45.95							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISSION	S: RATES							
F	In General: Space F calls for rat	•			• •						
•	not covered in space E, that is, t service for a single fee. There ar				,	,					
Services	furnished at cost or (2) services	•		•		0 ( )					
Other Than	amount of the charge and the ur		usually billed.	If any rates are	charged on a vari	able per-pi	rogram basis,				
Secondary	enter only the letters "PP" in the		h			I'- <b>4</b> I					
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that						were not				
Rates	listed in block 1 and for which a										
	brief (two- or three-word) descrip										
		BLO	CK 1				BLOCK 2				
	CATEGORY OF SERVICE	RATE	CATEGORY	OF SERVICE	RATE	CATEGO	ORY OF SERVICE	RATE			
	Continuing Services:		Installation:	Non-residential							
	• Pay cable	17.00	<ul> <li>Motel, hot</li> </ul>	el							
	<ul> <li>Pay cable—add'l channel</li> </ul>	19.00	<ul> <li>Commerce</li> </ul>								
	Fire protection		<ul> <li>Pay cable</li> </ul>								
	<ul> <li>Burglar protection</li> </ul>		-	-add'l channel							
			Fire prote								
	Installation: Residential		<ul> <li>Duralar pr</li> </ul>	otection							
	• First set	99.00	÷ .								
	• First set • Additional set(s)	99.00 25.00	Other servic	es:							
	<ul> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>		• Reconnect	es: ct	40.00						
	• First set • Additional set(s)		Other service • Reconnect • Disconnect	e <b>s:</b> ct							
	<ul> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>		Other service • Reconnect • Disconnect • Outlet relation	e <b>s:</b> ct	40.00 25.00 99.00						

ccounting Period: 2	2021/1			FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID
	CEQUEL COMMUNICA			01003
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as <b>Substitute Basis Stations:</b> basis under specific FCC rul • Do <i>not</i> list the station here station was carried <i>only</i> on	ntify every television station (including n during the accounting period, except n effect on June 24, 1981, permitting the (2) and (4), or 76.63 (referring to 76.63 s explained in the next paragraph. With respect to any distant stations ca- les, regulations, or authorizations: a in space G—but do list it in space I (the a substitute basis.	t (1) stations carried only on a part-ti he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain stat arried by your cable system on a sub he Special Statement and Program I	me basis under ims [sections ions carried on a ostitute program _og)—if the
	basis. For further information Column 1: List each station multicast stream associated "WETA-2" as the same on th Column 2: Give the channer of license. For example, WF Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	also in space I, if the station was carrie n concerning substitute basis stations, i's call sign. <i>Do not</i> report origination p I with a station according to its over-the he form. I number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" ( "E" (for noncommercial educational), c rms, see page (iv) of the general instru- n of each station. For U.S. stations, list dian stations, if any, give the name of t	see page (v) of the general instruction program services such as HBO, ESF e-air designation. For example, report evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for independent or "E-M" (for noncommercial education functions in the paper SA1-2 form. t the community to which the station	ons. N, etc. Identify each rt multistream the air in its community noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KAUZ-1	6	N	WICHITA FALLS, TX
	KAUZ-2	6.2	I-M	WICHITA FALLS, TX
Rows as Necessary	KFDX-1	3	Ν	WICHITA FALLS, TX
	KJBO-1	3	I	WICHITA FALLS, TX
	KJTL-1	18	I	WICHITA FALLS, TX
	KSWO-1	7	Ν	LAWTON, OK
	KWET-1	12	E	CHEYENNE, OK

EGAL NAME OF								SYSTEM I 0100
	t every radio s	station ca	arried on a separate and discronnerally receivable by your cab					н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf isignal, indicate 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 station	y the sys be recei It the Co sign of e the statio ion's sign g a check n's locatio	I-Band FM Carriage: Under C stem whenever it is received a ved at the headend, with the 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 this point, see par this point, see par this point, see par this point, see part the station is licens	adend, and (2 nna, during co ge (v) of the g ystem as a se sed by the FC	!) it can ertain st eneral ii eparate a	be expected, ated intervals. hstructions in the. and discrete	Primary Transmitters Radio
		6/D				6/D		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
			·					

Accounting Peric		04815					1 01	RM SA1-2E. PAGE 5		
Name	LEGAL NAME OF OWNER OF							SYSTEM ID# 010031		
	SUBSTITUTE CARRIAG	E: SPECIA		NT AND PROGRAM LO	DG					
Substitute	In General: In space I, iden substitute basis during the a explanation of the programm	tify every noni	network televieriod, under sp	<i>sion program,</i> broadcast b becific present and former l	y a <i>distant</i> sta FCC rules, reg	ulations, or	authorizati	ons. For a further		
Carriage:	1. SPECIAL STATEMEN				and general inc					
Special	During the accounting pe				asis anv nonr	network tel	evision pro	aram		
Statement and Program Log	broadcast by a distant sta	•		n ouny, on a ousoillato si	aolo, any nom		YES	NO		
Frogram Log					- "X"	L				
	<b>Note:</b> 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.									
	period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. <b>Column 2:</b> If the prograt <b>Column 3:</b> Give the call <b>Column 4:</b> Give the bro the case of Mexican or Cau <b>Column 5:</b> Give the mod first. Example: for May 7 gi <b>Column 6:</b> State the tim to the nearest five minutes stated as "6:00–6:30 p.n." <b>Column 7:</b> Enter the let	ace, please a e of every nor a distant static egulations, or ries like "mov . Bulls." m was broad sign of the s adcast station nadian station nth and day v ive "5/7." nes when the . Example: a ter "R" if the l	add additional nnetwork tele ion and that y r authorization vies" or "bask least live, entre- station broade on's location (f ns, if any, the when your sy substitute pro- program carro listed program	rows to the tables. vision program ("substitut our cable system substitu- ns. See page (v) of the ge etball." List specific progr er "Yes." Otherwise enter asting the substitute prog the community to which the community with which the stem carried the substitute ogram was carried by you ried by a system from 6:0 n was substituted for prog	e program") ti ted for the pro- eneral instruct am titles, for e "No." gram. he station is lid e station is id e program. Us ir cable syste 1:15 p.m. to 6 gramming that	hat, during ogramming ions for fur example, "I censed by entified). se numera m. List the :28:30 p.m	the account of another ther inform Love Lucy the FCC or ls, with the times accu- times accu- times accu- times accu- times accu- times accu-	nting r station hation. " or r, in month urately e guired		
	was substituted for program	mming that yo		uring the accounting peri as permitted to delete un				orogram		
	was substituted for program effect on October 19, 1976	mming that yo	our system w	as permitted to delete un	der FCC rules	and regul	ations in TUTE			
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	was substituted for program effect on October 19, 1976 S	UBSTITUTE	our system w <u>E PROGRAN</u> 3. STATION'S	as permitted to delete un	der FCC rules WHE CARRI 5. MONTH	N SUBST	TUTE URRED	7. REASON FO		

Accounting Period:	<b>2021/1</b> FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC 010031
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.
	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 \$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
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8
	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
	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
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)
	1. Enter the amount of gross receipts from space K
	2. Base amount under statutory formula
	3. Subtract line 2 from line 1
	4. Multiply line 3 by .01
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)
	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 Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)
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 #
	<b>Important:</b> 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:	2021/1	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 010031
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	7 57
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information		903) 579-3152
	Address       Address     3027 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)	
O Certification	<ul> <li>CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)</li> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as own in line 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein 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)]</li> </ul>	rstem as identified
	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: 7/22/2021	

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 it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.

	021/1	FORM SA1-2E. PAGE
AL NAME OF OWN	IER OF CABLE SYSTEM:	SYSTEM I
QUEL COMMI	UNICATIONS LLC	01003
The Satellite Ho lowing sentence "In deter service o scribers	TATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS ome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- e: mining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statemen Concerning Gross Receipts Exclusio
	aper SA1-2 form.	
-	ounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions te carriers to satellite dish owners?	
	the total here and list the satellite carrier(s) below	
	۰۰۰۰	
Name Mailing Address	Image: Address     Name       Mailing Address     Image: Address	
	ASSESSMENT	
	lete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	
	tion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
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