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

STATEM	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to:
	ry Transmissions by	DATE RECEIVED	AMOUNT	
General instru	nctions are located of this workbook	8/30/21	\$ 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: (Y	'YYY/(Period))	
	2021/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	2021	Barcode Data Filing Period (optiona	I - see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of title of the subsidiary, not that of the pa		sidiary of another corporation, give the full	corporate
Owner	List any other name or names under whi	ch the owner conducts the business of	the cable system.	
	If there were different owners during the single statement of account and royalty		n the last day of the accounting period shoul nting period.	d submit a
	Check here if this is the system's first fili	ng. If not, enter the system's ID numbe	r assigned by the Licensing Division.	010736
	LEGAL NAME OF OWNER/MAILIN	IG ADDRESS OF CABLE SYSTE	Λ	
	CEQUEL COMMUNICATIONS LLC			
	BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFEREN	T)	
	SUDDENLINK COMMUNICATIONS			
	MAILING ADDRESS OF OWNER O	F CABLE SYSTEM		
	3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite	number)		
	TYLER, TX 75701 (City, town, state, zip)			
С	<b>INSTRUCTIONS:</b> In line 1, give any business already appear in another B. In line			
System	names already appear in space B. In line	2, give the maining address of t	ne system, il diferent from the addre	
System	1 BROOKFIELD, MO			
	MAILING ADDRESS OF CABLE SYSTEM	Λ:		
	2 (Number, street, rural route, apartment, or suite	number)		
	(City, town, state, zip code)			
	as Coption 111 of title 17 of the United Otates Order	therizes the Convict Offer to a "		noted on this
FIVACY ACT NOTIC	e: Section 111 of title 17 of the United States Code at	anionzes the copyright office to collect th	re personally identifying information (PII) reque	Saled OII IIII

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 II
Nume	CEQUEL COMMUNICATIONS LLC	0107:
D	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated com discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list as the "first community." Please use it as the first community on all future filings.	nmunities within unincorporated areas and including single, t will serve as a form of system identification hereafter know
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho identified city.	ome parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	BROOKFIELD	MO
Community	LINN COUNTY(PORTIONS)	МО
d Rows as Necessary		

	Т									E. PAGE
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM								
	CEQUEL COMMUNICAT	FIONS LLC							U	01073
-	SECONDARY TRANSMISSION	I SERVICE: SU	JBSCRI	BERS AND R	ATES					
E	In General: The information in s	•		-		•				
Coordon	system, that is, the retransmission									
Secondary Transmission	about other services (including plast day of the accounting period						lnose exist	ing on the		
Service: Sub-	Number of Subscribers: Both						ble system	, broken		
scribers and	down by categories of secondar	y transmission	service	. In general, yo	ou can con	npute the numbe	er of subsc	ribers in		
Rates	each category by counting the n	•	<i>,</i>	0 , (			,	charged		
	separately for the particular serv Rate: Give the standard rate of					•	,	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					0,	•			
	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 nym-n		wo- or the	e-word descript				
	BLC	DCK 1					BLOCK			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBE	RS	RATE
	Residential:	COBCOTUB	LIKO	TUTE	0,111		(IIIOE	CODCOLUDE		1011
	Service to first set		197	34.99						
	<ul> <li>Service to additional set(s)</li> </ul>									
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		19	45.95						
	Converter									
	Residential									
	Non-residential									
									ľ	
	SERVICES OTHER THAN SEC									
F	In General: Space F calls for ra	•	,		-	• •			e	
•	not covered in space E, that is, t service for a single fee. There ar					,	,			
Services	furnished at cost or (2) services	•			U		0.0			
Other Than	amount of the charge and the ur		usually	billed. If any r	ates are cl	narged on a vari	able per-p	rogram basis,		
Secondary	enter only the letters "PP" in the						1:-41			
•	Disclosed Characteristics of a second second second		ne cable				ces listed.	were not		
ransmissions:	Block 1: Give the standard rat Block 2: List any services that		stem fur	•			period that	more not		
•	Block 2: List any services that	t your cable sy		nished or offer	ed during	the accounting		e form of a		
ransmissions:		t your cable systems separate charg	ge was r	nished or offer nade or establ	ed during	the accounting		e form of a		
ransmissions:	<b>Block 2:</b> List any services that listed in block 1 and for which a	t your cable system separate charge otion and inclue	je was r de the ra	nished or offer nade or establ	ed during	the accounting		e form of a BLOCK	2	
ransmissions:	<b>Block 2:</b> List any services that listed in block 1 and for which a	t your cable system separate chargo otion and inclue BLO0	ge was r de the ra CK 1	nished or offer nade or establ	ed during ished. List	the accounting	vices in the			RATE
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip	t your cable system separate chargo otion and inclue BLO0	ge was r de the ra CK 1 CATEG	nished or offer nade or establ ate for each.	ed during ished. List	the accounting these other ser	vices in the	BLOCK		RATE
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	t your cable system separate chargo otion and inclue BLO0	ge was r de the ra CK 1 CATEG Installa	nished or offer nade or establ ate for each.	ed during ished. List	the accounting these other ser	vices in the	BLOCK		RATE
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ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	t your cable sy separate charg otion and includ BLO( RATE 17.00	ge was r de the ra CK 1 CATEG Installa • Mot • Cor • Pay	nished or offer nade or establ ate for each. GORY OF SER ation: Non-res tel, hotel nmercial v cable	red during ished. List VICE idential	the accounting these other ser	vices in the	BLOCK		RATE
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ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	t your cable sy separate charge btion and inclue BLOO RATE 17.00 19.00	ge was r de the ra CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur	nished or offer made or establ ate for each. GORY OF SER ation: Non-res tel, hotel mmercial cable cable-add'l cl protection	red during ished. List VICE idential	the accounting these other ser	vices in the	BLOCK		RATE
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ransmissions:	Block 2: List any services that 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)	t your cable sy separate charge btion and inclue BLOO RATE 17.00 19.00 99.00	e was r de the ra CK 1 CATEG Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s • Rec • Dise	nished or offer nade or establ ate for each. GORY OF SER ation: Non-res tel, hotel nmercial ( cable ( cable-add'l ch protection glar protection services: connect	red during ished. List VICE idential	RATE	vices in the	BLOCK		RATE

unting Period:	-			Г	ORM SA1-2E. PAGE (
Name	LEGAL NAME OF OWNER OF				SYSTEM ID
	CEQUEL COMMUNICA				010730
G Primary ansmitters: relevision	carried by your cable syster 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 ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on t <b>Column 2:</b> Give the channel of license. For example, Wi <b>Column 3:</b> Indicate in each educational station, by ente (for independent multicast), For the meaning of these te <b>Column 4:</b> Give the location	also in space I, if the station was carrie n concerning substitute basis stations n's call sign. <i>Do not</i> report origination I with a station according to its over-the	t (1) stations carried only on a part he carriage of certain network prog 51(e)(2) and (4))]; and (2) certain st arried by your cable system on a su he Special Statement and Program d both on a substitute basis and als see page (v) of the general instruc- program services such as HBO, ES e-air designation. For example, rep evision station for broadcasting ove station, an independent station, or (for network multicast), "I" (for indep or "E-M" (for noncommercial educa uctions in the paper SA1-2 form. t the community to which the station	-time basis under rams [sections ations carried on a ubstitute program h Log)—if the so on some other ctions. SPN, etc. Identify each bort multistream r the air in its community a noncommercial pendent), "I-M" tional multicast). n is licensed by the	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF	STATION
	KCPT-1	19	E	KANSAS CITY, MO	<b>O</b> MARCE
	KCTV-1	5	N	KANSAS CITY, MO	
as Nacassan	KCWE-1	29	N I	KANSAS CITY, MO	
s Necessary	KMBC-1	9	N	KANSAS CITY, MO	
	KMCI-1	38	I	LAWRENCE, KS	
	KMOL-1 KSHB-1	41	N	KANSAS CITY, MO	
	KSMO-1	62		KANSAS CITY, MO	
	KTVO-1	3	N	KIRKSVILLE, MO	
	WDAF-1	-	N I		
		4	<b></b>	KANSAS CITY, MO	

EGAL NAME O								SYSTEM I 0107
	t every radio s	station ca	arried on a separate and discre nerally receivable by your cab					Н
Special Instruct eceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	tions Conce it is carried by monitoring, to ormation about m. dentify the call tate whether t the radio stat this by placing sive the station	rning AI y the sys be recei t the Co sign of e the static ion's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received at 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	Copyright Office r t the system's he system's FM ante his point, see pa ed by the cable s e station is licens	egulations, an adend, and (2 mna, during c ge (v) of the g system as a se sed by the FC	PFM sign (2) it can ertain st eneral in eparate a	nal is generally be expected, ated intervals. nstructions in the.	Primary Transmitters Radio
0417 01011	AN4	0/5			AN4	0/5		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
			·					
			·					

Accounting Perio							M SA1-2E. PAGE 5
Name	LEGAL NAME OF OWNER OF						SYSTEM ID#
		ATIONS LLC					010736
	SUBSTITUTE CARRIAG	E: SPECIAL STATE	MENT AND PROGRAM L	OG			
			<i>levision program,</i> broadcast b				
0			r specific present and former led in this log, see page (v) of				
Substitute Carriage:	1. SPECIAL STATEMEN			the general in		ne paper d	DA 1-2 101111.
Special	• During the accounting per		stem carry, on a substitute b	asis. anv non	network telev	ision prod	Iram
Statement and Program Log	broadcast by a distant sta			····, ···, ···.		YES	× NO
			s page blank. If your answer	is "Ves " vou			
	log in block 2.		s page blank. If your answer	13 1 C3, you	must comple	te the proj	gram
	period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. <b>Column 2:</b> If the prograr <b>Column 3:</b> Give the call <b>Column 4:</b> Give the broa the case of Mexican or Car <b>Column 5:</b> Give the mor first. Example: for May 7 gir <b>Column 6:</b> State the tim	a distant station and the egulations, or authoriz ries like "movies" or "the Bulls." m was broadcast live, sign of the station broadcast station's location adcast station's location adian stations, if any nth and day when you ve "5/7." we when the substitut	relevision program ("substitu at your cable system substitu ations. See page (v) of the g asketball." List specific progr enter "Yes." Otherwise enter adcasting the substitute program on (the community to which t the community with which the r system carried the substitut e program was carried by yo carried by a system from 6:0	uted for the pr eneral instruct ram titles, for r "No." gram. the station is li he station is li the program. U ur cable syste	ogramming c tions for furth example, "I L censed by th lentified). se numerals, m. List the tin	of another ler informa ove Lucy" e FCC or, , with the r mes accur	station ation. or in nonth rately
	to delete under FCC rules a	and regulations in effe	gram was substituted for pro- ct during the accounting per	iod; enter the	letter "P" if th	e listed pr	
	<b>Column 7:</b> Enter the lett to delete under FCC rules a	and regulations in effe		iod; enter the nder FCC rules	letter "P" if th s and regulat	e listed pr ions in	
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulations in effe nming that your syste	ct during the accounting per n was permitted to delete un	iod; enter the nder FCC rules WHE CARRI	letter "P" if th s and regulat	UTE	
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Accounting Period:	<b>2021/1</b> FORM SA1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID:
Hame	CEQUEL COMMUNICATIONS LLC 010736
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 \$ 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 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) \$ 15.00
	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# 010736
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         on which the cable system carried television broadcast stations and nonbroadcast services	9 123
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 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 I</li> <li>(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cables 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 ow 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>	system as identified ner of the cable system
	X       /s/ Alan Dannenbaum         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 its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.

unting Period: 202	21/1	FORM SA1-2E. PAGE
AL NAME OF OWNE	ER OF CABLE SYSTEM:	SYSTEM I
QUEL COMMU	NICATIONS LLC	01073
The Satellite Hom lowing sentence: "In determ service of	ATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS me Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- nining the total number of subscribers and the gross amounts paid to the cable system for the basic providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- ind amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statemen Concerning Gross Receipts Exclusio
For more informa located in the pap	ation on when to exclude these amounts, see the note on page (vii) of the general instructions per SA1-2 form.	
made by satellite	inting period, did the cable system exclude any amounts of gross receipts for secondary transmissions carriers to satellite dish owners?	
YES. Enter th	he total here and list the satellite carrier(s) below	
Name Mailing Address	Name Mailing Address	
INTEREST AS	SSESSMENT	
	ete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. on of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
For an explanatio	ete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. on of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q Interest Assessme
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