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

STATEMENT OF ACCOUNT			FOR COPYRIG	Return completed workbook by email to:			
		ansmissions by	DATE RECEIVED	AMOUNT	-		
Cable Syste			8/30/21	\$	Coplicsoa@copyright.gov For additional information, contact the U.S. Copyright Office Licensing Division at:		
in the first tab	of this	workbook		ALLOCATION NUMBER	Tel: (202) 707-8150		
A	ACCO	DUNTING 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 pare		sidiary of another corporation, give the full	corporate		
Owner		List any other name or names under whic	h the owner conducts the business of	the cable system.			
		If there were different owners during the single statement of account and royalty for		the last day of the accounting period shoul nting period.			
		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.	023706		
		LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM	Λ			
		CEQUEL COMMUNICATIONS LLC					
		BUSINESS NAME(S) OF OWNER OF	F CABLE SYSTEM (IF DIFFEREN	Т)			
		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 (Cfty, town, state, zip)					
С				entify the business and operation of t he system, if different from the addre			
System		IDENTIFICATION OF CABLE SYSTEM:	_, g				
	1	MOREAUVILLE, LA					
		MAILING ADDRESS OF CABLE SYSTEM	:				
	2	(Number, street, rural route, apartment, or suite n	umber)				
	1	(City, town, state, zip code)					
Privacy Act Notic	e: Section	111 of title 17 of the United States Code au	thorizes the Copyright Offce to collect th	e personally identifying information (PII) reque	ested on this		

Final of 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.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAG
Name		
	CEQUEL COMMUNICATIONS LLC	0237
	Instructions: List each separate community served by the cable system. A "community	
D	"a separate and distinct community or municipal entity (including unincorporated com	
D	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list	will serve as a form of system identification hereafter know
	as the "first community." Please use it as the first community on all future filings.	
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile hor	me parks should be reported in parentheses below the
Area	identified city.	···· · ···· · · · · · · · · · · · · ·
Served		
	CITY OR TOWN	STATE
First	MOREAUVILLE	LA
Community	AVOYELLES PARISH	LA
-	BELLEDEAU	LA
Add Rows as Necessary	BORDELONVILLE	LA
	COTTONPORT	LA
	ECHO	LA
	PLAUCEVILLE	LA
	RAPIDES PARISH(PORTION)	LA
	SIMMESPORT	LA
	······································	

								FORM SA1-				
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:									
	CEQUEL COMMUNICAT			02370								
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCR	IBERS AND R	ATES							
E	In General: The information in s			-		•						
Coordom		system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information										
Secondary Fransmission	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).											
Service: Sub-	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken											
scribers and	down by categories of secondary transmission service. In general, you can compute the number of subscribers in											
Rates	each category by counting the number of billings in that category (the number of persons or organizations charged											
	separately for the particular serv Rate: Give the standard rate c					•	,	ro and the				
	unit in which it is generally billed	-	-	•			-					
	category, but do not include disc	• •		,	ny standa		o within a					
	Block 1: In the left-hand block	in space E, th	e form	lists the catego	ies of sec	ondary 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	-		•								
	printed in block 1 (for example, t					•	,					
	with the number of subscribers a	and rates, in th	e right-l	nand block. A tv	vo- or thre	e-word descript	ion of the s	service is				
	sufficient. BLOCK 1						BLOCK	(2				
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF		NO. OF SUBSCRIBERS	RATE			
	Residential:	SUBSCRIB	EKS	RATE	CAT	EGORT OF SEI	(VICE	SUBSCRIBERS	NATE			
	Service to first set		809	34,99								
	Service to additional set(s)			54.55								
	• FM radio (if separate rate)											
	Motel, hotel											
	Commercial		23	45.95								
	Converter			-0.00								
	Residential											
	Non-residential											
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s							
F	In General: Space F calls for rat	•	,		-	• •						
•	not covered in space E, that is, t					,						
Services	service for a single fee. There ar furnished at cost or (2) services	•			0		0.0					
Other Than	amount of the charge and the ur											
Secondary	enter only the letters "PP" in the			-								
Fransmissions:	Block 1: Give the standard rat			•		• •		wore not				
Rates	Block 2: List any services that your cable system furnished or offered during the accounting period that were not 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) description and include the rate for each.											
		BLO	CK 1					BLOCK 2				
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RATE			
	Continuing Services:		Install	ation: Non-res	idential							
	• Pay cable	17.00	• Mo	tel, hotel								
	• Pay cable—add'l channel	19.00	• Co	mmercial								
	Fire protection		•Pa	y cable								
	•Burglar protection		•Pa	y cable-add'l ch	annel							
	Installation: Residential		• Fire	e protection								
	• First set	99.00	• Bu	rglar protection								
	 Additional set(s) 	25.00	Other	services:								
	• FM radio (if separate rate)		•Re	connect		40.00						
	Converter		• Dis	connect								
			۰Ou	tlet relocation		25.00						
			-									
				ve to new addr	ess	99.00						

	L - CAL MANE OF OMMED OF			FORM	SYSTEM			
me								
	CEQUEL COMMUNICATIONS LLC PRIMARY TRANSMITTERS: TELEVISION							
hary nitters: rision	In General: In space G, ide carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, a Substitute Basis Stations basis under specific FCC ru	entify every television station (including t m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.67 as explained in the next paragraph. With respect to any distant stations ca ules, regulations, or authorizations: e in space G—but do list it in space I (th	(1) stations carried only on a part ne carriage of certain network prog 1(e)(2) and (4))]; and (2) certain st arried by your cable system on a su	-time basis under rams [sections ations carried on a ubstitute program				
	station was carried <i>only</i> on • List the station here, and a basis. For further informatic Column 1: List each station multicast stream associated "WETA-2" as the same on the Column 2: Give the channel	a substitute basis. also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the the form. el number the FCC assigned to the telev	d both on a substitute basis and als see page (v) of the general instruc orogram services such as HBO, ES e-air designation. For example, rep	so on some other stions. SPN, etc. Identify each port multistream				
	Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio FCC. For Mexican or Cana	/RC is channel 4 in Washington, D.C. in case whether the station is a network sering the letter "N" (for network), "N-M" (f , "E" (for noncommercial educational), or erms, see page (iv) of the general instru- on of each station. For U.S. stations, list idian stations, if any, give the name of th	for network multicast), "I" (for indep or "E-M" (for noncommercial educations in the paper SA1-2 form. the community to which the station ne community with which the station	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 STA	TION			
	KALB-1	5	Ν	ALEXANDRIA, LA				
	KALB-2	5.2	N-M	ALEXANDRIA, LA				
s Necessary	KALB-3	5.3	I-M	ALEXANDRIA, LA				
	KALB-HD1	5	N-M	ALEXANDRIA, LA				
		5.2	N-M					
	KALB-HD2	5.2	IN-IVI	ALEXANDRIA, LA				
	KALB-HD2 KBCA-1	41	I-M	ALEXANDRIA, LA ALEXANDRIA, LA				
	KBCA-1	41	I-M	ALEXANDRIA, LA				
	KBCA-1 KLAX-1	41 31	I-M N	ALEXANDRIA, LA ALEXANDRIA, LA				
	KBCA-1 KLAX-1 KLAX-2	41 31 31.2	I-M N I-M	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1	41 31 31.2 31	I-M N I-M N-M	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1	41 31 31.2 31 25	I-M N I-M N-M E	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2	41 31 31.2 31 25 25.2	I-M N I-M N-M E E E-M	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3	41 31 31.2 31 25 25.2 25.3	I-M N I-M E E E-M E-M	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3 KLPA-HD1	41 31 31.2 31 25 25.2 25.3 25.3 25	I-M N I-M E E E-M E-M	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3 KLPA-HD1 WNTZ-1	41 31 31.2 31 25 25.2 25.3 25 48	I-M N I-M E E E-M E-M E-M I	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA NATCHEZ, MS				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3 KLPA-HD1 WNTZ-1	41 31 31.2 31 25 25.2 25.3 25 48	I-M N I-M E E E-M E-M E-M I	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA NATCHEZ, MS				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3 KLPA-HD1 WNTZ-1	41 31 31.2 31 25 25.2 25.3 25 48	I-M N I-M E E E-M E-M E-M I	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA NATCHEZ, MS				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3 KLPA-HD1 WNTZ-1	41 31 31.2 31 25 25.2 25.3 25 48	I-M N I-M E E E-M E-M E-M I	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA NATCHEZ, MS				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3 KLPA-HD1 WNTZ-1	41 31 31.2 31 25 25.2 25.3 25 48	I-M N I-M E E E-M E-M E-M I	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA NATCHEZ, MS				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3 KLPA-HD1 WNTZ-1	41 31 31.2 31 25 25.2 25.3 25 48	I-M N I-M E E E-M E-M E-M I	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA NATCHEZ, MS				
	KBCA-1 KLAX-1 KLAX-2 KLAX-HD1 KLPA-1 KLPA-2 KLPA-3 KLPA-HD1 WNTZ-1	41 31 31.2 31 25 25.2 25.3 25 48	I-M N I-M E E E-M E-M E-M I	ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA ALEXANDRIA, LA NATCHEZ, MS				

all-band basis whose signals were generally receivable by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Principal	H Primary Insmitters Radio
 Trans To detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. Trans To detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. To detailed information about the Copyright Office regulation carried. To detailed information about the Station carried. To detailed this by placing a check mark in the "S	nsmitters
CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION I	
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	d: 2021/1							
Name	LEGAL NAME OF OWNER OF CEQUEL COMMUNICA							SYSTEM ID: 02370
								02370
	SUBSTITUTE CARRIAG	-	-					
	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the programm							
Carriage: Special	1. SPECIAL STATEMEN							
Statement and	 During the accounting per 	•	ir cable syster	n carry, on a substitute ba	isis, any nonr	network tele	vision prog	
Program Log	broadcast by a distant sta	ation?					YES	× NO
	Note: If your answer is "No	o", leave the	rest of this pa	ige blank. If your answer i	s "Yes," you r	nust comple	ete the prog	gram
	period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the progran Column 3: Give the call Column 4: Give the broat the case of Mexican or Car Column 5: Give the mon first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the lett	stitute progra ace, please a of every not a distant stati egulations, o ries like "mor . Bulls." m was broac sign of the s adcast static nadian statio nth and day ive "5/7." nes when the . Example: a ter "R" if the	am on a separ add additional nnetwork tele ion and that y or authorization vies" or "bask dcast live, entr station broadc on's location (r ons, if any, the when your sy e substitute pr a program carr	rows to the tables. vision program ("substitute our cable system substitut ns. See page (v) of the ge etball." List specific progra er "Yes." Otherwise enter sasting the substitute prog the community to which the community with which the stem carried the substitute ogram was carried by you	e program") ti ted for the pro neral instruct am titles, for e "No." ram. le station is lid e station is id e program. Us r cable systel 1:15 p.m. to 6	nat, during t ogramming ions for furtl example, "I I censed by th entified). se numerals m. List the t :28:30 p.m.	he accoun of another ner informa ove Lucy" ne FCC or, , with the r mes accur should be n was <i>requ</i>	ting station ation. or in month rately
	was substituted for program effect on October 19, 1976	mming that y		luring the accounting period as permitted to delete unc				ogram
	was substituted for prograr effect on October 19, 1976	mming that y	/our system w	as permitted to delete und	der FCC rules	and regula	TUTE	7. REASON FO
	was substituted for prograr effect on October 19, 1976	UBSTITUTE		as permitted to delete und	der FCC rules	and regula	UTE IRRED	
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Accounting Period:	2021/1 FORM SA1-2E	E. PAGE 6.
Name		TEM ID#
	CEQUEL COMMUNICATIONS LLC	023706
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.	
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	
	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	
	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 \$ 53,058.28	
	4. Enter the amount of gross receipts from space K \$ 210,741.72	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	38.42
	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	38.42
	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	
	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) \$ 788.42	
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 \$ 80	08.42
	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:	2021/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 023706
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	15 229
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	Name RODNEY HASKINS Telephone Address 3027 S SE LOOP 323	(903) 579-3152
	(Number, street, rural route, apartment, or suite number) TYLER, TX 75701 (City, town, state, zip)	
	Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional)	
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space I (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 (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. 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)] X /s/ Alan Dannenbaum 	system as identified mer of the cable system
	Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) Typed or printed name: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership) Date: 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.

counting Period: 2021/1		FORM SA1-2E. PAGE
SAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID
QUEL COMMUNICATIONS LLC		02370
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright A lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable sy service of providing secondary transmissions of primary broadcast transmitters, the system scribers and amounts collected from subscribers receiving secondary transmissions pursu	rstem for the basic n shall not include sub-	P Special Statement Concerning Gross Receipts Exclusion
For more information on when to exclude these amounts, see the note on page (vii) of the genera located in the paper SA1-2 form.	linstructions	
During the accounting period, did the cable system exclude any amounts of gross receipts for sec made by satellite carriers to satellite dish owners?	ondary transmissions	
YES. Enter the total here and list the satellite carrier(s) below		
Name Name Mailing Address Mailing Address		
INTEREST ASSESSMENT		
You must complete this worksheet for those royalty payments submitted as a result of a late payn For an explanation of interest assessment, see page (viii) of the general instructions located in the		Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessmen
	v	
	^	
Line 2 Multiply line 1 by the interest rate* and enter the sum here		
	xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here	-	
	x 0.00274	
Line 4 Multiply line 3 by 0.00274** and enter here		
in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	(interest sharge)	
	(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For fur contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	ther assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the C list below the owner, address, first community served, ID number, and accounting period as given		
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