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	_
	ms (Short Form)	8/30/21	\$	For additional information, contact the U.S. Copyright
-	ictions are located	0/00/21		Office Licensing Division at:
in the first tab	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				
	Instructions:			
В	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 whi	the owner conducts the business of	the coble system	
Owner	List any other name or names under which	In the owner conducts the busiless of	the cable system.	
	If there were different owners during the single statement of account and royalty f		the last day of the accounting period should nting period.	d submit a
				035029
	Check here if this is the system's first filir	g. If not, enter the system's 1D humbe	r assigned by the Licensing Division.	
	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	Т)	
	SUDDENLINK COMMUNICATIONS			
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM		
	3027 S SE LOOP 323	umber)		
	(Number, street, rural route, apartment, or suite r TYLER, TX 75701	umber)		
	(City, town, state, zip)			
С	INSTRUCTIONS: In line 1, give any busin names already appear in space B. In line			
System	1			
	ST. JOSEPH, LA	ŀ		
	2 (Number, street, rural route, apartment, or suite r	umber)		
	(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	ne personally identifying information (PII) reque	ested on this

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Name	CEQUEL COMMUNICATIONS LLC	0350
D	Instructions: List each separate community served by the cable system. A "community" "a separate and distinct community or municipal entity (including unincorporated comm discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list w 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 hom	nunities within unincorporated areas and including single will serve as a form of system identification hereafter kno
Area Served	identified city.	ne parks should be reported in parentneses below the
	CITY OR TOWN	STATE
First	ST. JOSEPH	LA
Community	LAKE BRUIN	LA
	TENSAS PARISH(PORTION)	LA
Add Rows as Necessary		

	1								2E. PAGE		
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM									
	CEQUEL COMMUNICAT	TIONS LLC							03502		
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCR	IBERS AND RA	TES						
E	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission service of the cable										
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						ble system	ı, broken			
scribers and	down by categories of secondary						•				
Rates	each category by counting the n		<i>.</i>	0,0			,	charged			
	separately for the particular serv Rate: Give the standard rate c					•	,	no 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 l	ists the categor	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					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.	and rates, in th	e right-f	hand block. A tw	o- or thre	e-word descript	ion of the s	service is			
		DCK 1					BLOCK	(2			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF		NO. OF SUBSCRIBERS	RATE		
	Residential:	SUBSCRIB	EKO	NATE	CAT	EGORT OF SEI	VICE	SUBSCRIBERS	TVA II		
	Service to first set		79	34.99							
	Service to additional set(s)		15	54.55							
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		5	45.95							
	Converter		J	45.95							
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	5						
F	In General: Space F calls for rate	•	,		-	• •					
•	not covered in space E, that is, t					,	,				
Services	service for a single fee. There ar furnished at cost or (2) services	•			•		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			•		••		wara not			
Rates	Block 2: List any services that listed in block 1 and for which a										
	brief (two- or three-word) descrip										
		BLO	CK 1					BLOCK 2			
	CATEGORY OF SERVICE	RATE		GORY OF SER	/ICE	RATE	CATEGO	DRY OF SERVICE	RATE		
	Continuing Services:		Install	ation: Non-resi	dential						
	• 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							
			• Ou	tlet relocation		25.00					
			• Mo	ve to new addre	ess	99.00					

nting Period: 2	2021/1				
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTI	
	CEQUEL COMMUNIC	ATIONS LLC		0;	35029
	PRIMARY TRANSMITTERS:	TELEVISION			
G Primary nsmitters: elevision	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, a: Substitute Basis Stations 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 information	entify every television station (including tem 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 76.6' s 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 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	(1) stations carried only on a particle carriage of certain network programe carriage of certain network program (2) and (4))]; and (2) certain statistical by your cable system on a sume Special Statement and Programe both on a substitute basis and als see page (v) of the general instruct	-time basis under rams [sections ations carried on a ubstitute program u Log)—if the so on some other stions.	
	multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location	d with a station according to its over-the	-air designation. For example, rep vision station for broadcasting ove station, an independent station, or for network multicast), "I" (for indep rr "E-M" (for noncommercial educat ctions in the paper SA1-2 form. the community to which the station	oort multistream r the air in its community a noncommercial bendent), "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	
	KAQY-1	11	Ν	COLUMBIA, LA	
	KAQY-1 KARD-1	11 14	N	COLUMBIA, LA WEST MONROE, LA	
ws as Necessary			N 1 E		
vs as Necessary	KARD-1	14	I	WEST MONROE, LA	
; as Necessary	KARD-1 KLTM-1	14 13	I E	WEST MONROE, LA MONROE, LA	
s as Necessary	KARD-1 KLTM-1 KNOE-1	14 13 8	I E I-M	WEST MONROE, LA MONROE, LA MONROE, LA	
<i>i</i> s as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	I E I-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
vs as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	I E I-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
is as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	I E I-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
is as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	I E I-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
rs as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	I E I-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
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ws as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	I E I-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
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ows as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	i E i-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
ows as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	i E i-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
ows as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	i E i-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
ows as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	i E i-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
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ows as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	i E i-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	
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ows as Necessary	KARD-1 KLTM-1 KNOE-1 KNOE-3	14 13 8 8.3	i E i-M N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA	

EGAL NAME O								SYSTEM I 0350
	t every radio s	station ca	arried on a separate and discronnerally receivable by your cab					Н
eceivable if (1) on the basis of or detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. dentify the call tate whether t the radio stat this by placing sive 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 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 licens	adend, and (2 nna, during c 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
0417 01011		0/5				0/5		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
			·					
			·					
		t				1		
						 		

Accounting Perio							10	RM SA1-2E. PAGE 5
Name	LEGAL NAME OF OWNER OF							SYSTEM ID
	CEQUEL COMMUNICA	ATIONS LLC	ز ز					035029
	SUBSTITUTE CARRIAG	E: SPECIAL	STATEME	NT AND PROGRAM	LOG			
	In General: In space I, ident							
.	substitute basis during the a							
Substitute Carriage:	explanation of the programm 1. SPECIAL STATEMEN				or the general in	Structions in	i trie paper	SA 1-2 101111.
Special	During the accounting per				basis any non	network tel	evision pro	oram
Statement and Program Log	broadcast by a distant sta	-				[YES	NO
• •	-		at of this no	an block If your anour		l must somm	-	
	Note: If your answer is "No log in block 2.	, leave the re	est of this pa	ige blank. If your answe	ris res, you	must comp	iete trie pro	bgram
	clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general categoo "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call Column 4: Give the broa the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim	of every nonn a distant statior egulations, or a ries like "movie . Bulls." m was broadca sign of the sta adcast station' nadian stations nth and day w ive "5/7."	network televen authorization es" or "bask ast live, enter ation broadce 's location (t s, if any, the hen your sy: substitute pro-	vision program ("substii our cable system subst ns. See page (v) of the etball." List specific pro er "Yes." Otherwise ent asting the substitute pr the community to which a community with which stem carried the substii ogram was carried by y	ituted for the pr general instruc gram titles, for er "No." ogram. the station is li the station is li ute program. U our cable syste	ogramming tions for fur example, "I censed by Jentified). Ise numera m. List the	y of anothe ther inform Love Lucy the FCC o Is, with the times accu	r station nation. " or r, in month urately
	to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program	ter "R" if the lis and regulation mming that you	sted progran is in effect d	n was substituted for pr uring the accounting pe	ogramming tha eriod; enter the	t your syste letter "P" if	the listed p	
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a	ter "R" if the lis and regulation mming that you	sted progran is in effect d	n was substituted for pr uring the accounting pe	ogramming tha riod; enter the inder FCC rule	t your syste letter "P" if	the listed p ations in	
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	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the lis and regulations mming that you UBSTITUTE F	sted progran is in effect d ur system w	n was substituted for pr uring the accounting pe as permitted to delete u	ogramming tha priod; enter the under FCC rule WHE CARR 5. MONTH	t your syste letter "P" if s and regul N SUBST IAGE OCC	the listed p ations in ITUTE	brogram
	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the lis and regulations mming that you UBSTITUTE F	sted program is in effect d ur system w <u>PROGRAM</u> STATION'S	n was substituted for pr uring the accounting pe as permitted to delete t	ogramming tha priod; enter the under FCC rule WHE CARR 5. MONTH	t your syste letter "P" if s and regul N SUBST IAGE OCC	the listed p ations in ITUTE URRED TIMES	7. REASON FO
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	stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	ter "R" if the lis and regulations mming that you UBSTITUTE F	sted program is in effect d ur system w <u>PROGRAM</u> STATION'S	n was substituted for pr uring the accounting pe as permitted to delete t	ogramming tha priod; enter the under FCC rule WHE CARR 5. MONTH	t your syste letter "P" if s and regul N SUBST IAGE OCC	the listed p ations in ITUTE URRED TIMES	7. REASON FC
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Accounting Period:	2021/1 FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#
Hame	CEQUEL COMMUNICATIONS LLC 035029
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
	o. Interest charge. Enter the amount from line 4, space Q, page 6
	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) \$ 52.00
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:	2021/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 035029
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	6 54
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	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) • 1, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Qwner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ov 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 herei 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)] Examplete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] Typed or printed name: ALAN DANNENBAUM Typed or printed name: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)	system as identified vner of the cable system
	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.

unting Period: 2	021/1	FORM SA1-2E. PAGE
AL NAME OF OWN	NER OF CABLE SYSTEM:	SYSTEM I
QUEL COMMU	UNICATIONS LLC	03502
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 Statement Concerning Gross Receipts Exclusion
	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	
TES. Enter		
Name Mailing Address	Name Mailing Address	
	ASSESSMENT	
•	blete 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
For an explanat	olete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q Interest Assessme
For an explanat	elete 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 Interest Assessme
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