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:
	ary Transmissions by	DATE RECEIVED	AMOUNT	
	ems (Short Form)	DATE RECEIVED		coplicsoa@copyright.gov
-	uctions are located	8/30/21	\$	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
				-
_	1			
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	'YYY/(Period))	
		_		
	2021/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		<b>_</b>		
	2021	Barcode Data Filing Period (optiona	I - see instructions)	
Accounting	2021			
Period				
	Instructions:			
В	Give the full legal name of the owner of title of the subsidiary, not that of the particular to the particular of the particular to the pa		sidiary of another corporation, give the full	corporate
Owner	List any other name or names under wh	ich the owner conducts the business of	the cable system.	
			n the last day of the accounting period shoul	d submit a
	single statement of account and royalty			<u>.</u>
	Check here if this is the system's first fil	ing. If not, enter the system's ID numbe	r assigned by the Licensing Division.	037025
	LEGAL NAME OF OWNER/MAILI	NG ADDRESS OF CABLE SYSTEM	Λ	
	CEQUEL COMMUNICATIONS LLC			
	BUSINESS NAME(S) OF OWNER (	OF CABLE SYSTEM (IF DIFFEREN	Т)	
	SUDDENLINK COMMUNICATIONS	1		
	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) INSTRUCTIONS: In line 1, give any bus	inoss or trado namos usod to ide	antify the business and exercises of t	he system unless these
С	names already appear in space B. In lin		,	5
System	IDENTIFICATION OF CABLE SYSTEM:			
	ROCKDALE, TX			
	MAILING ADDRESS OF CABLE SYSTE	M:		
	2 (Number, street, rural route, apartment, or suite	number)		
	(City, town, state, zip code)			
Privacy Act Notic	e: Section 111 of title 17 of the United States Code a	uthorizes 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
indille	CEQUEL COMMUNICATIONS LLC	0370
D	Instructions: List each separate community served by the cable system. A "come "a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that y as the "first community." Please use it as the first community on all future filing	ed communities within unincorporated areas and including single you list will serve as a form of system identification hereafter kno
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mol identified city.	bile home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	ROCKDALE	ТХ
Community		
dd Rows as Necessary		

	I							FORM SA1-	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM							
	CEQUEL COMMUNICAT	TIONS LLC							03702
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCRI	BERS AND RA	ATES				
E	In General: The information in s			-		•			
Coordon	system, that is, the retransmission								
Secondary Fransmission	about other services (including p last 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 secondary						•		
Rates	each category by counting the n		<i>.</i>	0 , (			,	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		5 within a		
	Block 1: In the left-hand block	in space E, th	e form li	sts the categor	ies of sec	ondary transmis	sion servi	ce that cable	
	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.	and rates, in th	e right-h	and block. A tv	vo- 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	EKS	RATE	CAT	EGORT OF SE	VICE	SUBSCRIBERS	NATE
	Service to first set		371	34.99					
	Service to additional set(s)			54.55					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		15	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			•				wara nat	
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		ORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RATE
	Continuing Services:		Installa	tion: Non-resi	idential				
	• Pay cable	17.00	• Mot	el, hotel					
	• Pay cable—add'l channel	19.00	• Con	nmercial					
	Fire protection		• Pay	cable					
	•Burglar protection		• Pay	cable-add'l ch	annel				
	Installation: Residential		• Fire	protection					
	• First set	99.00	• Burg	glar protection					
	<ul> <li>Additional set(s)</li> </ul>	25.00	Other s	ervices:					
	• FM radio (if separate rate)		• Rec	onnect		40.00			
	Converter		• Disc	connect					
			• Out	et relocation		25.00			
				orrelegation					
				e to new addre	ess	99.00			

counting Period: 2	2021/1			FORM SA1-2E. PA	ЭE 3.
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM	
	CEQUEL COMMUNIC	ATIONS LLC		037	125
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 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 the <b>Column 2:</b> Give the channel of license. For example, WI <b>Column 3:</b> Indicate in each educational station, by enter (for independent multicast), For the meaning of these te <b>Column 4:</b> Give the location	ntify every television station (including in during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting t )(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. With respect to any distant stations c les, regulations, or authorizations: in space G—but do list it in space I (f a substitute basis. Ilso in space I, if the station was carrien in concerning substitute basis stations 's call sign. <i>Do not</i> report origination with a station according to its over-th	<i>t</i> (1) stations carried only on a part- he carriage of certain network progr. 51(e)(2) and (4))]; and (2) certain sta 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 instruct program services such as HBO, ESI e-air designation. For example, repr evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep or "E-M" (for noncommercial educati uctions in the paper SA1-2 form. t the community to which the station	time basis under ams [sections itions carried on a bstitute program Log)—if the o on some other tions. PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" tonal multicast). is licensed by the	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION	
	KCEN-1	6	N	TEMPLE, TX	
	KEYE-1	42	N	AUSTIN, TX	
	KLRU-1	4 <u>2</u> 18	E	AUSTIN, TX	
as Necessary	KLKU-1	46		BELTON, TX	
	KTBC-1	48 7		AUSTIN, TX	
	KWKT-1	44	II	WACO, TX	
			N	WACO, TX WACO, TX	
	KWTX-1				
	KXXV-1	25		WACO, TX	
	KYLE-1	28		BRYAN, TX	

EGAL NAME O								SYSTEM I 0370
	t every radio s	station ca	arried on a separate and discre nerally 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 about rm. dentify the call tate whether to the radio stat this by placing Sive the station	y the sys be recei it the Co sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received at wed 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 enna, 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. nstructions in the. and discrete	Primary Transmitters Radio
		0/5			ANA	0/5		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
			·					

Namo							FUR	M SA1-2E. PAGE 5
	LEGAL NAME OF OWNER OF							SYSTEM ID#
	CEQUEL COMMUNICA	ATIONS LLC						037025
_	SUBSTITUTE CARRIAG	E: SPECIAL STA	TEMENT AND PROG	GRAM LOG	6			
	In General: In space I, ident							
	substitute basis during the a							
	explanation of the programm 1. SPECIAL STATEMEN				e general ins	structions in i	ine paper s	SA 1-2 10fm.
Special	During the accounting per				is any nonn	etwork telev	vision prog	Iram
Statement and	broadcast by a distant sta	•	System ourry, on a suc		io, any norm			NO
r rogram zog	5		11.1.1.1.1.1.1.1.	•	w) / "		-	
	Note: If your answer is "No log in block 2.	o", leave the rest of	this page blank. If your	r answer is	rres," you r	nust comple	ete the prog	gram
	<ol> <li>LOG OF SUBSTITUTE In General: List each subs 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 prograr 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 to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a</li> </ol>	titute program on a ace, please add ad of every nonnetwo addistant station and egulations, or author ries like "movies" of Bulls." m was broadcast li sign of the station adcast station's loc hadian stations, if a hith and day when y ve "5/7." es when the subst . Example: a progra	ditional rows to the tabl ork television program (' d that your cable system orizations. See page (v) r "basketball." List spec ve, enter "Yes." Otherw broadcasting the subst ation (the community to iny, the community with your system carried the tute program was carrie am carried by a system program was substitute	les. "substitute p n substituted of the gene cific program vise enter "N itute progra o which the n which the substitute p ed by your o from 6:01:1 d for progra	program") th d for the pro- eral instruction in titles, for e lo." m. station is lice station is lice station is ide program. Us cable system 15 p.m. to 6 imming that	nat, during ti ogramming o ons for furth example, "I L eensed by th entified). se numerals n. List the ti :28:30 p.m. your syster	he account of another her informa love Lucy" he FCC or, , with the r mes accur should be n was <i>requ</i>	ting station ation. or in month rately <i>uired</i>
			stem was permitted to o					ogram
	effect on October 19, 1976		stem was permitted to o		r FCC rules	and regulat	UTE	-
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI	and regulat	UTE IRRED	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FC
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FC
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FC
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FC
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FC
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FC
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FC
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FC
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO
	effect on October 19, 1976	UBSTITUTE PRO	GRAM	delete unde	r FCC rules WHEI CARRI/ 5. MONTH	and regulat N SUBSTIT AGE OCCL 6. TI	UTE IRRED MES	7. REASON FO

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 037025
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) \$ 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) \$ 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 #
	<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# 037025
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	9
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  (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 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)]  K /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	system as identified vner of the cable system
	(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.

unting Period: 20	021/1	FORM SA1-2E. PAGE
AL NAME OF OWNE	ER OF CABLE SYSTEM:	SYSTEM I
QUEL COMMU	INICATIONS LLC	03702
The Satellite Hor lowing sentence: "In determ service of scribers a	nining the total number of subscribers and the gross amounts paid to the cable system for the basic f 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
For more information located in the pa	ation on when to exclude these amounts, see the note on page (vii) of the general instructions aper SA1-2 form.	
-	unting period, did the cable system exclude any amounts of gross receipts for secondary transmissions e carriers to satellite dish owners?	
	the total here and list the catallite carrier(c) below <b>\$</b>	
YES. Enter t	the total here and list the satellite carrier(s) below	
Name Mailing Address	Name Mailing Address	
	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 explanation		Q Interest Assessme
For an explanation	on of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	<b>Q</b> Interest Assessme
For an explanation	on of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	<b>Q</b> Interest Assessme
For an explanation	ion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	<b>Q</b> Interest Assessme
For an explanation	ion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.  e amount of late payment or underpayment	Q Interest Assessme
For an explanation	ion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	<b>Q</b> Interest Assessme
For an explanation	ion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.  e amount of late payment or underpayment	<b>Q</b> Interest Assessme
For an explanation Line 1 Enter the Line 2 Multiply Line 3 Multiply	ion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.  e amount of late payment or underpayment	<b>Q</b> Interest Assessme
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