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:
		ansmissions by	DATE RECEIVED	AMOUNT	-
Cable Syste	-				<u>coplicsoa@copyright.gov</u>
General instru			8/30/21	\$	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
	orune	S WOLKDOOK		ALLOCATION NOWBER	-
Α	ACC	OUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))	
			I		
		2021/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		20211	Barcode Data Filing Period (optiona	I - see instructions)	
Accounting			I		
Period					
		Instructions:	ha aabla ayatana liftha ayyaaria a ayb	sidian, of another correction, sine the full	
B		title of the subsidiary, not that of the pare		sidiary of another corporation, give the full of	Jorporate
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	accounting period only the owner or	the last day of the accounting period should	d submit a
		single statement of account and royalty fe			
	-	Check here if this is the system's first filing	g. If not, enter the system's ID numbe	r assigned by the Licensing Division.	037992
		LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM	1	
		CEQUEL COMMUNICATIONS LLC			
		BUSINESS NAME(S) OF OWNER OF	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 no	umber)		
		TYLER, TX 75701	anibor)		
		(City, town, state, zip)			
С				entify the business and operation of the system, if different from the addre	
System		IDENTIFICATION OF CABLE SYSTEM:			
	1	WINN CORRECTIONAL FA	CILITY		
		MAILING ADDRESS OF CABLE SYSTEM	:		
	2	(Number, street, rural route, apartment, or suite n	umber)		
		(City, town, state, zip code)			
		ונסוא, ומשוו, סומוב, בוף טעש)			
r					

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 Offce'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		SYSTEM II
	CEQUEL COMMUNICATIONS LLC Instructions: List each separate community served by the cable system. A "community	03799
D	"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.	munities within unincorporated areas and including single 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.	me parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	WINNFIELD	LA
Community	(WINN CORR)	
	การและการและการและการและการและการและการและการในและการและการและการและการและการและการและการและการและการและการและ 	
dd Rows as Necessary		

								FO	RM SA1-	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:							
	CEQUEL COMMUNICAT	TIONS LLC							(03799
-	SECONDARY TRANSMISSION	SERVICE: SI	JBSCR	IBERS AND R	ATES					
E	In General: The information in s			-		•				
	system, that is, the retransmission									
Secondary Fransmission	about other services (including p	• • •			-		hose exis	ting on the		
Service: Sub-	last day of the accounting period Number of Subscribers: Both	•				,	ole system	broken		
scribers and	down by categories of secondar	•								
Rates	each category by counting the n	,		0 / 1						
	separately for the particular serv					•	,			
	Rate: Give the standard rate of	-	-	•				-		
	unit in which it is generally billed category, but do not include disc				ny standa	ard rate variation	s within a	particular rai	le	
	Block 1: In the left-hand block				ries of sec	condary transmis	sion servi	ce that cable	;	
	systems most commonly provide	e to their subso	ribers.	Give the numbe	er of subse	cribers and rate	for each li	sted categor	у	
	that applies to your system. Not			-		-				
	categories, that person or entity								al	
	subscriber who pays extra for ca					d in the count ur	der "Servi	ce to the		
	first set" and would be counted of Block 2: If your cable system					service that are	different	from those		
	printed in block 1 (for example, t	-		•					r	
	with the number of subscribers a						,.			
	sufficient.			r	r		BI 00	<u> </u>		
	BLC	DCK 1 NO. OF					BLOCK	NO. 0	F	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATI	EGORY OF SEF	RVICE	SUBSCRIE	BERS	RATE
	Residential:									
	Service to first set		0	-						
	 Service to additional set(s) 		0	0						
	 FM radio (if separate rate) 									
	Motel, hotel									
	Commercial		13	42.41						
	Converter									
	Residential									
	Non-residential									
			NCMIC		e					
_	SERVICES OTHER THAN SEC In General: Space F calls for ra					all your cable sys	tem's serv	vices that we	ere	
F	SERVICES OTHER THAN SEC In General: Space F calls for ra not covered in space E, that is, t	te (not subscril	per) info	ormation with re	spect to a				ere	
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counting Period: 2	2021/1			F	ORM SA1-2E. PAGE 3
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:			SYSTEM ID#
	CEQUEL COMMUNIC	ATIONS LLC			037992
G Primary Transmitters:	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as	ntify every television station (including n during the accounting period, <i>except</i> n effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph.	<i>t</i> (1) stations carried only on a part-t he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain sta	ime basis under ams [sections tions carried on a	
Television	basis under specific FCC ru • Do not list the station here station was carried only on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on the Column 2: Give the channel of license. For example, Wit Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these te Column 4: Give the location	also in space I, if the station was carrie in concerning substitute basis stations, i's call sign. <i>Do not</i> report origination p I with a station according to its over-the	he Special Statement and Program d both on a substitute basis and also , see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep- or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station	Log)—if the o on some other ions. PN, etc. Identify each ort multistream the air in its community noncommercial endent), "I-M" onal multicast). is licensed by the	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF	STATION
	KAQY-1	11	Ν	COLUMBIA, LA	
	KARD-1	14		WEST MONORE, LA	
d Rows as Necessary	KEJB-1	43		EL DORADO, AR	
-	KLTM-1	13	E	MONROE, LA	
	KNOE-1	8	N	MONROE, LA	
	KTVE-1	10	N	EL DORADO, AR	
		f · · · · · · · · · · · · · · · · · · ·			

CEQUEL CO	MMUNICA	TIONS	LLC						0379
	t every radio s	tation ca	arried on a separate and disc nerally receivable by your cal						н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If signal, indicate Column 4: G	it is carried by monitoring, to prmation abou rm. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Co sign of e he static ion's sign g a check n's locatio	I-Band FM Carriage: Under tem whenever it is received a ved at the headend, with the pyright Office regulations on each station carried. on is AM or FM. hal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the	at si the	the system's he ystem's FM ante is point, see pag d by the cable s e station is licens	adend, and (2 nna, during cr ge (v) of the g ystem as a se sed by the FC	ertain st ertain st eneral ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	1	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		5,0		t			5,0		
				-					
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				-1					
				-					

Accounting Perio								RM SA1-2E. PAGE 5
Name	LEGAL NAME OF OWNER OF							
	CEQUEL COMMUNICA	ATIONS LLC	ن					037992
	SUBSTITUTE CARRIAGI	E: SPECIAL	. STATEME	NT AND PROGRAM L	.0G			
	In General: In space I, ident							
	substitute basis during the a explanation of the programm							
Substitute Carriage:	1. SPECIAL STATEMEN				i ille gellerar ill		i tile paper	3A1-2 10111.
Special	During the accounting per				oasis, anv non	network tel	evision pro	gram
Statement and Program Log	broadcast by a distant sta	-	,	<i>.</i> ,		Γ	YES	
	Note: If your answer is "No		est of this na	ae blank. If your answe	is "Ves " vou	⊔ must.comp		
	log in block 2.	, leave the le	est of this pa	ige blank. If your answe	is res, you	must comp		byrann
	period, was broadcast by a under certain FCC rules, re Do not use general categor "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 gir Column 6: State the tim to the nearest five minutes.	egulations, or a ries like "movie . Bulls." m was broadca sign of the sta adcast station" nadian stations nth and day wl ive "5/7."	authorization ies" or "bask cast live, ente ation broadc i's location (t is, if any, the rhen your sys substitute pro	ns. See page (v) of the e etball." List specific proc er "Yes." Otherwise enter asting the substitute pro- the community to which community with which stem carried the substitu- ogram was carried by ye	general instruct gram titles, for gram. the station is li the station is ic ute program. U pur cable syste	tions for fur example, "I censed by lentified). se numeral m. List the	ther inform Love Lucy the FCC or Is, with the times accu	nation. " or r, in month urately
	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	sted progran	n was substituted for pro uring the accounting pe	riod; enter the	letter "P" if	the listed p	
	stated as "6:00–6:30 p.m." Column 7: Enter the lett	ter "R" if the lis and regulation mming that you	sted progran	n was substituted for pro uring the accounting pe	riod; enter the nder FCC rules	letter "P" if s and regula	the listed p ations in	
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Accounting Period:	2021/1 FORM SA	1-2E. PAGE 6.
Name		STEM ID#
Hame	CEQUEL COMMUNICATIONS LLC	037992
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. (Amount of groc	,246.00
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	52.00
	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 \$	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	0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
	1. Enter the amount of gross receipts from space K	
	2. Base amount under statutory formula	
	3. Subtract line 2 from line 1	
	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 0.00	
	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	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# 037992
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	6 22
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 (Number, street, rural route, apartment, or suite number)	(903) 579-3152
	TYLER, TX 75701 (City, town, state, zip)	
	Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional) CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
O Certification	 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)] 	system as identified /ner 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 it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.

AL NAME OF OW		FORM SA1-2E. PAGE
	NER OF CABLE SYSTEM:	SYSTEM I
	UNICATIONS LLC	03799
The Satellite He lowing sentence "In deter service scribers For more inform	ermining 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- s and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." mation on when to exclude these amounts, see the note on page (vii) of the general instructions	P Special Statement Concerning Gross Receipts Exclusion
During the acco	paper SA1-2 form. ounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions ite carriers to satellite dish owners?	
X NO		
YES. Enter	r the total here and list the satellite carrier(s) below	
Name Mailing Address	Name Mailing Address	
For an explana	plete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. ation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the	he amount of late payment or underpayment	
		Interest Assessmer
Line 2 Multinh	x	Interest Assessme
Line 2 Multiply	y line 1 by the interest rate* and enter the sum here	Interest Assessmen
	y line 1 by the interest rate* and enter the sum here	Interest Assessme
	y line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 3 Multiply	y line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 3 Multiply	y line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 3 Multiply Line 4 Multiply in space * To view th	y line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 3 Multiply Line 4 Multiply in space * To view th contact th	y line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 3 Multiply Line 4 Multiply in space * To view th contact th ** This is th NOTE: If you a	y line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 3 Multiply Line 4 Multiply in space * To view th contact th ** This is th NOTE: If you a	y line 1 by the interest rate* and enter the sum here	Interest Assessme
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Line 3 Multiply Line 4 Multiply in space * To view th contact th ** This is th NOTE: If you a list below the or Owner Address	y line 1 by the interest rate* and enter the sum here	Interest Assessme

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