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)			<u>coplicsoa@copyright.gov</u>	
		8/30/21	\$	For additional information, contact the U.S. Copyright	
-	ictions are located	0/00/21		Office Licensing Division at: Tel: (202) 707-8150	
In the list lab	of this workbook		ALLOCATION NUMBER		
Α	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		<u>i</u>			
Period					
	Instructions:	he cable system. If the owner is a sub	sidiary of another corporation, give the full o	corporate	
B	title of the subsidiary, not that of the pare				
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	n the last day of the accounting period should	d submit a	
	single statement of account and royalty fe	ee payment covering the entire accou	nting period.	201021	
	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.	004031	
	LEGAL NAME OF OWNER/MAILING	G ADDRESS OF CABLE SYSTEM	Λ		
	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 (City, town, state, zip)				
С	INSTRUCTIONS: In line 1, give any busir names already appear in space B. In line				
System	IDENTIFICATION OF CABLE SYSTEM:				
	MORRILTON, AR				
	MAILING ADDRESS OF CABLE SYSTEM	:			
	2 (Number, street, rural route, apartment, or suite n	umber)			
	(City, town, state, zip code)				

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	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM 004					
D	Instructions: List each separate community served by the cable system. A "co "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that as the "first community." Please use it as the first community on all future fil	ommunity" is the same as a "community unit" as defined in FCC ru rated communities within unincorporated areas and including sing at you list will serve as a form of system identification hereafter kn					
Area Served	as the "first community." Please use it as the first community on all future fill Note: Entities and properties such as hotels, apartments, condominiums, or r identified city.						
_	CITY OR TOWN	STATE					
First Community	MORRILTON	AR					
,							
dd Rows as Necessary							

	T							FORM SA1			
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM									
	CEQUEL COMMUNICAT	FIONS LLC							00403		
-	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCRI	BERS AND R	ATES						
E	In General: The information in space E should cover all categories of secondary transmission service of the cable										
Coordon	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information										
Secondary Transmission	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 service at the rate indicated—not the number of sets receiving service).										
	Rate: Give the standard rate of					•	,	ne and the			
	unit in which it is generally billed	-	-	•							
	category, but do not include disc	· ·	,								
	Block 1: In the left-hand block	•		-		•					
	systems most commonly provide										
	that applies to your system. 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						,.				
	sufficient.	and rates, in th	e ngnt-na		wo- or the	e-word descript	ription of the service is				
	BLC	DCK 1					BLOCK 2				
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RATE		
	Residential:	CODCOND			0,111		(WICE	CODOCINIDENCO	1011		
	Service to first set		1,216	34.99							
	 Service to additional set(s) 										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		84	45.95							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC										
F	In General: Space F calls for ra	•	,		-	• •					
•	not covered in space E, that is, t service for a single fee. There ar					,	,				
Services	furnished at cost or (2) services	•			0		0 ()				
Other Than	amount of the charge and the ur		usually	billed. If any r	ates are ch	narged on a vari	able per-pi	rogram basis,			
Secondary	enter only the letters "PP" in the			f			I'- 4 I				
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that			•				were not			
Rates	listed in block 1 and for which a										
	brief (two- or three-word) descrip										
		BLO	CK 1					BLOCK 2			
					VICE	RATE	CATEGO	ORY OF SERVICE	RATE		
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SER	NICE	IVAL					
	CATEGORY OF SERVICE Continuing Services:	RATE		tion: Non-res		INTE					
	Continuing Services: • Pay cable	RATE 17.00	Installa								
	Continuing Services:		Installa • Mote	tion: Non-res							
	Continuing Services: • Pay cable	17.00	Installa • Mote • Com • Pay	tion: Non-res el, hotel mercial cable	idential						
	Continuing Services: • Pay cable • Pay cable—add'l channel	17.00	Installa • Mote • Com • Pay	tion: Non-res el, hotel imercial	idential						
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	17.00 19.00	Installa • Mote • Corr • Pay • Pay • Fire	tion: Non-res el, hotel Imercial cable cable-add'l cl protection	idential						
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	17.00	Installa • Mote • Com • Pay • Pay • Fire • Burg	tion: Non-res el, hotel mercial cable cable-add'l cl protection glar protection	idential						
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	17.00 19.00	Installa • Mote • Com • Pay • Pay • Fire • Burg Other s	tion: Non-res el, hotel mercial cable cable-add'l cl protection glar protection ervices:	idential						
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set	17.00 19.00 99.00	Installa • Mote • Com • Pay • Pay • Fire • Burg Other s	tion: Non-res el, hotel mercial cable cable-add'l cl protection glar protection	idential	40.00					
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	17.00 19.00 99.00	Installa • Mote • Corr • Pay • Pay • Fire • Burg Other s • Reco • Disc	tion: Non-res al, hotel mercial cable cable-add'l cl protection glar protection ervices: onnect onnect	idential						
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	17.00 19.00 99.00	Installa • Mote • Corr • Pay • Pay • Fire • Burg Other s • Reco • Disc	tion: Non-res and hotel amercial cable cable-add'l cl protection glar protection ervices: ponnect	idential						

	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTE				
Name	CEQUEL COMMUNIC	ATIONS LLC		00				
	PRIMARY TRANSMITTERS: TELEVISION							
G Primary ransmitters: Television	 In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do <i>not</i> list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried <i>only</i> on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network, station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network, multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv)							
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	KAFT-1	9	E	FAYETTEVILLE, AR				
	KAFT-2	9.2	E-M	FAYETTEVILLE, AR				
d Rows as Necessary	KAFT-3	9.3	E-M	FAYETTEVILLE, AR				
	KAFT-4	9.4	E-M	FAYETTEVILLE, AR				
	KAFT-HD1	9	E-M	FAYETTEVILLE, AR				
	KARK-1	4	N	LITTLE ROCK, AR				
	KARK-2	4.2	I-M	LITTLE ROCK, AR				
	KARK-3	4.3	I-M	LITTLE ROCK, AR				
	KARK-HD1	4	N-M	LITTLE ROCK, AR				
	KARZ-1	42	l	LITTLE ROCK, AR				
	KARZ-2	42.2	I-M	LITTLE ROCK, AR				
	KARZ-HD1	42	I-M	LITTLE ROCK, AR				
	KASN-1	38	I	PINE BLUFF, AR				
	KASN-HD1	38	I-M	PINE BLUFF, AR				
	KATV-1	7	N	LITTLE ROCK, AR				
	KATV-2	7.2	I-M	LITTLE ROCK, AR				
	KATV-3	7.3	I-M	LITTLE ROCK, AR				
				LITTLE ROCK, AR				
	KATV-4	7.4	I-M	LITTLE ROCK, AR				
		7.4 7	I-M N-M	LITTLE ROCK, AR				
	KATV-4							
	KATV-4 KATV-HD1	7	N-M	LITTLE ROCK, AR				
	KATV-4 KATV-HD1 KKAP-1	7 36	N-M E	LITTLE ROCK, AR LITTLE ROCK, AR				
	KATV-4 KATV-HD1 KKAP-1 KLRA-1	7 36 30	N-M E I	LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR				

	LEGAL NAME OF OWNER O	DE CABLE SYSTEM:		SYSTEM					
Name				004					
	PRIMARY TRANSMITTERS								
			analator stations and low nower	television stations)					
G		In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under							
D ular and		s in effect on June 24, 1981, permitting the $(2)(0)$ and (4) and $(2)(2)$							
Primary Fransmitters:		(e)(2) and (4), or 76.63 (referring to 76.61) as explained in the next paragraph.	(e)(2) and (4))]; and (2) certain s	tations carried on a					
Television	Substitute Basis Station	s: With respect to any distant stations car	ried by your cable system on a s	ubstitute program					
		rules, regulations, or authorizations: ere in space G—but do list it in space I (the	Special Statement and Program	n Log)—if the					
	station was carried only o	on a substitute basis.		0,					
		also in space I, if the station was carried							
		basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each							
	multicast stream associated with a station according to its over-the-air designation. For example, report multistream								
	"WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community								
		WRC is channel 4 in Washington, D.C.							
		ch case whether the station is a network st tering the letter "N" (for network) "N-M" (for	, , ,						
	(for independent multicast	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).							
	For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the								
			tions in the paper SA1-2 form.	,					
	Column 4: Give the locati		tions in the paper SA1-2 form. ne community to which the statio	n is licensed by the					
	Column 4: Give the locati	ion of each station. For U.S. stations, list t	tions in the paper SA1-2 form. ne community to which the statio	n is licensed by the					
	Column 4: Give the locati	ion of each station. For U.S. stations, list t	tions in the paper SA1-2 form. ne community to which the statio	n is licensed by the					
	Column 4: Give the locati FCC. For Mexican or Can 1. CALL SIGN	ion of each station. For U.S. stations, list the adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	tions in the paper SA1-2 form. ne community to which the statio e community with which the statio	n is licensed by the on is identified. 4. LOCATION OF STATION					
	Column 4: Give the locati FCC. For Mexican or Can 1. CALL SIGN KMYA-1	ion of each station. For U.S. stations, list the ladian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 49	tions in the paper SA1-2 form. ne community to which the statio e community with which the statio 3. TYPE OF STATION	A. LOCATION OF STATION					
	Column 4: Give the locati FCC. For Mexican or Can 1. CALL SIGN	ion of each station. For U.S. stations, list the name of the name of the 2. B'CAST CHANNEL NUMBER 49 11	tions in the paper SA1-2 form. ne community to which the statio e community with which the statio	A. LOCATION OF STATION CAMDEN, AR LITTLE ROCK, AR					
	Column 4: Give the locati FCC. For Mexican or Can 1. CALL SIGN KMYA-1 KTHV-1	ion of each station. For U.S. stations, list the ladian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 49	tions in the paper SA1-2 form. ne community to which the statio e community with which the statio 3. TYPE OF STATION I N	A LOCATION OF STATION CAMDEN, AR LITTLE ROCK, AR LITTLE ROCK, AR					
	Column 4: Give the locati FCC. For Mexican or Can 1. CALL SIGN KMYA-1 KTHV-1 KTHV-3	ion of each station. For U.S. stations, list the name of the name of the name of the 2. B'CAST CHANNEL NUMBER 49 11 11.3	tions in the paper SA1-2 form. ne community to which the statio e community with which the statio 3. TYPE OF STATION I N I-M	A. LOCATION OF STATION CAMDEN, AR LITTLE ROCK, AR					
	Column 4: Give the locati FCC. For Mexican or Can 1. CALL SIGN KMYA-1 KTHV-1 KTHV-3 KTHV-4	ion of each station. For U.S. stations, list the adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 49 11 11.3 11.4	tions in the paper SA1-2 form. ne community to which the statio e community with which the statio 3. TYPE OF STATION I N I-M I-M	A LOCATION OF STATION A. LOCATION OF STATION CAMDEN, AR LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR					

	F OWNER OF (SYSTEM I 0040
	t every radio s	tation ca	arried on a separate and discre nerally receivable by your cab					Н
eceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf isignal, 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 t the Co sign of e he statio 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 system 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
		e/n				0/0		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio		048					101	RM SA1-2E. PAGE 5		
Namo	LEGAL NAME OF OWNER OF							8YSTEM ID# 004031		
	SUBSTITUTE CARRIAG				ŊĠ					
I	In General: In space I, ident substitute basis during the a explanation of the programm	tify every non accounting pe	nnetwork televi eriod, under sp	<i>sion program,</i> broadcast b ecific present and former	y a <i>distant</i> sta FCC rules, reg	ulations, or	authorizatio	ons. For a further		
• •	1. SPECIAL STATEMEN				ano gonora na		ine paper			
Special	During the accounting per				asis, any nonr	network tele	evision pro	gram		
Statement and Program Log	broadcast by a distant sta	ation?	·				YES	X NO		
• •										
	Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.									
	In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."									
	Column 7: Enter the lett to delete under FCC rules a was substituted for program	and regulation mming that y	ons in effect d	uring the accounting peri	od; enter the l	etter "P" if	he listed p			
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y	ons in effect d our system w	uring the accounting peri as permitted to delete un	od; enter the l der FCC rules	etter "P" if f and regula	the listed p ations in	rogram		
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y UBSTITUTE 2. LIVE?	E PROGRAM 3. STATION'S	uring the accounting perias permitted to delete un	od; enter the I der FCC rules WHE CARRI 5. MONTH	etter "P" if f and regula N SUBSTI AGE OCC 6. T	TUTE URRED	rogram		
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y b. UBSTITUTE	ons in effect d our system w	uring the accounting peri as permitted to delete un	od; enter the l der FCC rules WHE CARRI	etter "P" if t and regula N SUBSTI AGE OCC	the listed p ations in TUTE URRED	7. REASON FOR		
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y UBSTITUTE 2. LIVE?	E PROGRAM 3. STATION'S	uring the accounting perias permitted to delete un	od; enter the I der FCC rules WHE CARRI 5. MONTH	etter "P" if f and regula N SUBSTI AGE OCC 6. T	TUTE URRED	7. REASON FOR		
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y UBSTITUTE 2. LIVE?	E PROGRAM 3. STATION'S	uring the accounting perias permitted to delete un	od; enter the I der FCC rules WHE CARRI 5. MONTH	etter "P" if f and regula N SUBSTI AGE OCC 6. T	TUTE URRED	7. REASON FOR		
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y UBSTITUTE 2. LIVE?	E PROGRAM 3. STATION'S	uring the accounting perias permitted to delete un	od; enter the I der FCC rules WHE CARRI 5. MONTH	etter "P" if f and regula N SUBSTI AGE OCC 6. T	TUTE URRED	7. REASON FOR		
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y UBSTITUTE 2. LIVE?	E PROGRAM 3. STATION'S	uring the accounting perias permitted to delete un	od; enter the I der FCC rules WHE CARRI 5. MONTH	etter "P" if f and regula N SUBSTI AGE OCC 6. T	TUTE URRED	7. REASON FOR		
	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y UBSTITUTE 2. LIVE?	E PROGRAM 3. STATION'S	uring the accounting perias permitted to delete un	od; enter the I der FCC rules WHE CARRI 5. MONTH	etter "P" if f and regula N SUBSTI AGE OCC 6. T	TUTE URRED	7. REASON FOR		
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	Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	and regulation mming that y UBSTITUTE 2. LIVE?	E PROGRAM 3. STATION'S	uring the accounting perias permitted to delete un	od; enter the I der FCC rules WHE CARRI 5. MONTH	etter "P" if f and regula N SUBSTI AGE OCC 6. T	TUTE URRED	7. REASON FOR		
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Accounting Period:	2021/1 FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID
	CEQUEL COMMUNICATIONS LLC 00403
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 \$263,800 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 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
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)
	1. Base amount under statutory formula \$ 263,800.00
	2. Enter amount of gross receipts from space K
	3. Subtract line 2 from line 1
	4. Enter the amount of gross receipts from space K
	5. Enter the amount from line 3
	6. Subtract line 5 from line 4
	7. Multiply line 6 by .005 (enter figure here)
	8. Interest charge. Enter the amount from line 4, space Q, page 8
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)
	1. Enter the amount of gross receipts from space K \$ 366,050.13
	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 \$ 2,341.50
	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)
	2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 20.00
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 2,361.50
	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# 004031
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	31 535
N Individual to Be Contacted for Further	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.) Name RODNEY HASKINS	(903) 579-3152
Information	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	
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) of the legal entity identified as ou in line 1 of space B. (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ou in line 1 of space B. (Interve 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. (IB U.S.C., Section 1001(1986)) (X) /s/ Alan Dannenbaum Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) Typed or printed name: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)	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.

	021/1	FORM SA1-2E. PAGE
L NAME OF OWN	ER OF CABLE SYSTEM:	SYSTEM I
	JNICATIONS LLC	00403
The Satellite Ho lowing sentence "In deter service of scribers	CATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS To be viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- te: 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." that on when to exclude these amounts, see the note on page (vii) of the general instructions	P Special Statemen Concerning Gross Receipts Exclusio
	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 satellite carrier(s) below	
Name Mailing Address	Name Mailing Address	
INTEREST A	SSESSMENT	
•	lete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. ion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter th	e amount of late payment or underpayment	Interest Assessme
Line 2 Multiply	Iine 1 by the interest rate* and enter the sum here	
Line 3 Multiply	x days	
	x 0.00274	
	line 3 by 0.00274** and enter here L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 (interest charge)	
	e interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please E Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
** This is the	e decimal equivalent of 1/365, which is the interest assessment for one day late.	
-	e filing this worksheet covering a statement of account already submitted to the Copyright Office, please vner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address		

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 th 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.