This form is effective beginning with the January 1 to June 30, 2017, accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

## SA1-2E Short Form

STATEMENT OF ACCOUNT for Secondary Transmissions by Cable Systems (Short Form)       DATE RECEIVED       AMOUNT       calics all convicts and colics all convicts and or additional information.       calics all convicts and colics all colics and colics and colics all colics and colics all colics and colics all colics and colics and colics and colics and colics and colics and colics and colics and colics all colics and colics all colics and colics and	STATEM			FOR COPYRIG	<ul> <li>Return completed workbook by email to</li> </ul>					
Cable Systems (Short Form)       Contract Experiment Contract Control Contro Control Context Content Control Control Control Control Content C				DATE RECEIVED	AMOUNT	-				
General instructions are located in the first tab of this workbook.       03/01/2022       \$ <ul> <li>ALLOCATION NUMBER</li> <li>ALLOCATION NUMBER</li> <li>Constrait the U.S. Goyynth Ciffee Learning Division at 1200 707-8150.</li> </ul> A       ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))         Image: Constraint of U.S. Goyynth Ciffee Learning Division at 1200 707-8150.         A       ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))         Image: Constraint of U.S. Goyynth Ciffee Learning Division at 1200 707-8150.         Accounting Period       20232         Barcode Data Filing Particl (optional - see instructions)         Accounting Period       Image: Constraint of U.S. Goyynth Ciffee Learning Period (optional - see instructions)         Accounting Period       Image: Constraint of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the usbidiary, not that of the parent corporation.         Ust any other rame or names under which the owner conducts the business of the cable system.       If there were fifteen to accounting period, only the owner on the last day of the accounting period should submit a single Statement of account and rowshy the payment covering the entile excounting period should submit a single Statement of account and rowshy the payment covering the entile excounting period should submit a single Statement of account and rowshy the payment covering the entile excounting period (optional - see instructions)       Image: Covering the covering the entile covering the entile system.		-	-	DATE NEOLIVED		<u>coplicsoa@copyright.gov</u>				
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in the first tab of this workbook.       ALLOCATION NUMBER       (202) 707-9150.         A       ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))         2023/27       Period 1 = January 1 - June 30       Period 2 = July 1 - December 31         2023/27       Period 1 = January 1 - June 30       Period 2 = July 1 - December 31         2023/27       Barcode Data Filing Period (optional - see instructions)         Accounting Period       Instructions:         Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.         B       Owner       Instructions:         If there wave filena owner during the accounting period, only the owner on the list day of the accounting period should submit a single tatement of account and royaby fee payment covering the ethic accounting period should submit a single tatement of account and royaby fee payment covering the ethic accounting period should submit a single tatement of account and royaby fee payment covering the ethic accounting period should submit a single tatement of account and royaby fee payment covering the ethic accounting period should submit a single tatement of account and royaby fee payment covering the ethic accounting period should submit a single tatement of account and royaby fee payment covering the ethic accounting period should submit a single tatement of account and royaby fee payment covering the ethic accounting period should submit a single tatement ethic account and royaby fee payment covering the ethic accounting period should submit a single tatement ethic account an	General instru	uctions	s are located	03/01/2022						
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2 (Number, street, rural route, apartment, or suite number)										
			MAILING ADDRESS OF CABLE SYSTEM							
(City, town, state, zip code)		2	(Number, street, rural route, apartment, or suite n	umber)						
(City, town, state, zip code)										
	L		(City, town, state, zip code)							

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 filing, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM						
Nume	CEQUEL COMMUNICATIONS LLC	023						
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.							
Area	Note: Entities and properties such as hotels, apartments, condominiums, or i	mobile home parks should be reported in parentheses below the						
Served	identified city.							
_	CITY OR TOWN	STATE						
First Community	ANTHONY	KS						
Community								
dd Rows as Necessary								
du Rows as Necessary								

								FORM SA1-		
Name	LEGAL NAME OF OWNER OF C									
	CEQUEL COMMUNICAT		02350							
-	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES									
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 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						nose exis	ing on the		
Service: Sub-	Number of Subscribers: Bot						ole system	, broken		
scribers and	down by categories of secondar	y transmission	service	. In general, yo	u can con	npute the numbe	er of subsc	ribers in		
Rates	each category by counting the n			0,0				charged		
	separately for the particular serv 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. <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 ngnt-r	Iand DIOCK. A IV	vo- or thre	e-word descript	ion of the s	service is		
		OCK 1					BLOCK	(2		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEF		NO. OF SUBSCRIBERS	RATE	
	Residential:	SOBOCIAL			0A11			SOBSCIELIS	IVAL	
	Service to first set		170	34.99						
	Service to additional set(s)									
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		10	45.95						
	Converter			-10100						
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	S					
F	In General: Space F calls for ra	•	,		•					
	not covered in space E, that is, t service for a single fee. There a									
Services	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									
ransmissions: Rates	<b>Block 1:</b> Give the standard rate charged by the cable system for each of the applicable services listed. <b>Block 2:</b> List any services that your cable system furnished or offered during the accounting period that were not									
Rales	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	CATEG	DRY OF SERVICE	RATE	
	Continuing Services:		Installa	ation: Non-res	dential					
	• Pay cable	17.00	• Mo	tel, hotel						
	<ul> <li>Pay cable—add'l channel</li> </ul>	19.00	• Cor	mmercial						
	Fire protection		• Pay	/ cable						
	<ul> <li>Burglar protection</li> </ul>		• Pay	/ cable-add'l ch	annel					
	Installation: Residential		• Fire	e protection						
	• First set	99.00	• Bur	glar protection						
	<ul> <li>Additional set(s)</li> </ul>	25.00	Other s	services:						
	• FM radio (if separate rate)		• Red	connect		40.00				
	Converter		• Dis	connect						
			• Out	tlet relocation		25.00				
				tlet relocation ve to new addro	ess	25.00 99.00				

ounting Period: 2	2021/2			FORM SA1-2E. PAGE 3.	
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#	
Name	CEQUEL COMMUNIC	ATIONS LLC		023505	
	PRIMARY TRANSMITTERS:	TELEVISION			
G Primary Transmitters: Television	carried by your cable syster FCC rules and regulations i 76.59(d)(2) and (4), 76.61(e substitute program basis, as <b>Substitute Basis Stations</b>	ntify every television station (including m during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting t e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations c iles, regulations, or authorizations:	t (1) stations carried only on a part- the carriage of certain network progra 61(e)(2) and (4))]; and (2) certain sta	ime basis under ams [sections tions carried on a	
	• Do not list the station here station was carried only on	e in space G—but do list it in space I (i			
	basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t	n concerning substitute basis stations s' call sign. <i>Do not</i> report origination with a station according to its over-th he form.	, see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo	ions. PN, etc. Identify each ort multistream	
	of license. For example, WF <b>Column 3:</b> Indicate in each educational station, by ente	el number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M"	station, an independent station, or a (for network multicast), "I" (for indep	noncommercial endent), "I-M"	
	For the meaning of these te <b>Column 4:</b> Give the location	"E" (for noncommercial educational), rms, see page (iv) of the general instr n of each station. For U.S. stations, lis dian stations, if any, give the name of t	uctions in the paper SA1-2 form. t the community to which the station	is licensed by the	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION	
	KAKE-1	10	Ν	WICHITA, KS	
	KDCU-1	31	I	DERBY, KS	
Rows as Necessary	KETA-1	13	E	OKLAHOMA CITY, OK	
	KMTW-1	36	I	HUTCHINSON, KS	
	KPTS-1	8	E	HUTCHINSON, KS	
	KSAS-1	24	l	WICHITA, KS	
	KSCW-1	33	l	WICHITA, KS	
	KSNW-1	3	N	WICHITA, KS	
	KWCH-1	12	Ν	HUTCHINSON, KS	

EGAL NAME OI								SYSTEM 023
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) on the basis of For detailed info paper SA1-2 for <b>Column 1:</b> Io <b>Column 2:</b> S	it is carried by monitoring, to prmation abou m. lentify the call tate whether t	y the sys be rece It the Co sign of the statio	II-Band FM Carriage: Under of stem whenever it is received a ived at the headend, with the pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process	at the system's h system's FM an this point, see pa	eadend, and ( tenna, during o age (v) of the g	2) it can certain s jeneral ii	be expected, tated intervals. nstructions in the.	Primary Transmitter: Radio
Column 4: G	ive the statior	n's locati	k mark in the "S/D" column. on (the community to which th the community with which the			CC or, in	the case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
							·	
					+			
						·		
					+			
					+			
					+			
					+			

Accounting Perio	d: 2021/2						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS L	LC					023505
	SUBSTITUTE CARRIAGI	E: SPECIA	L STATEME	NT AND PROGRAM LO	G			
	In General: In space I, ident	ify every nor	nnetwork televi	s <i>ion program</i> , broadcast by	a distant stat	tion, that yo	ur cable sys	tem carried on a
	substitute basis during the a	ccounting p	eriod, under sp	ecific present and former F	CC rules, reg	ulations, or a	authorizatior	ns. For a further
Substitute	explanation of the programm	ning that mu	st be included i	n this log, see page (v) of t	he general ins	structions in	the paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMEN	-						
Special Statement and	<ul> <li>During the accounting per</li> </ul>	iod, did yoι	ur cable syster	n carry, on a substitute ba	sis, any nonn	etwork tele	vision prog	
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No	," leave the	rest of this pa	ge blank. If your answer is	s "Yes," you r	nust comple	ete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subst clear. If you need more spa				s wherever po	ossible, if th	eir meaning	g is
				/ision program ("substitute	e program") th	nat. during f	he account	ina
	period, was broadcast by a	distant stat	tion and that y	our cable system substitut	ed for the pro	ogramming	of another s	station
	under certain FCC rules, re							
	Do not use general categor "NBA Basketball: 76ers vs.		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I	Love Lucy"	or
			dcast live, ente	er "Yes." Otherwise enter '	'No."			
	Column 3: Give the call	sign of the	station broadc	asting the substitute progr	am.			
				he community to which th			he FCC or,	in
	the case of Mexican or Car Column 5: Give the mor			stem carried the substitute			s with the n	nonth
	first. Example: for May 7 giv	ve "5/7."						
				ogram was carried by you				ately
	to the nearest five minutes.	Example: a	a program carr	ied 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 left	er "R" if the	listed program	n was substituted for prog	ramming that	vour syste	m was <i>requ</i>	ired
	to delete under FCC rules a							
		nming that y		as permitted to delete und		and regula	tions in	
	was substituted for program effect on October 19, 1976.	nming that y				and regula	tions in	
		nming that y			ler FCC rules	Ū		
	effect on October 19, 1976.	UBSTITUT	your system w	as permitted to delete und	ler FCC rules WHE CARRI	N SUBSTI	TUTE JRRED	7. REASON FOR
	effect on October 19, 1976.	nming that y	your system w	as permitted to delete und	ler FCC rules	N SUBSTI	TUTE	7. REASON FOR DELETION
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI, 5. MONTH	N SUBSTI AGE OCCI 6. T	TUTE JRRED IMES	

Accounting Period:	2021/2	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	023505
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmiss (as identified in space b) during the accounting period. For a further explanation of how to compute this an 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.	sion service nount, se
L Copyright Royalty Fee	<ul> <li>COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe</li> <li>Complete block 1, block 2, or block 3.</li> <li>Use block 1 if the amount of gross receipts in space K is \$137,100 or less.</li> <li>Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$26</li> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600</li> <li>See page (vi) of the general instructions located in the paper SA1-2 form for more information.</li> </ul>	3,800
	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 accounting period is \$52.00.	six-month
	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	0)
		.,
	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)	,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	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)	15.00
	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 C See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more i	

Accounting Period:	2021/2				FORM SA1-2E. PAGE 7.
Name		VNER OF CABLE SYSTEM:			SYSTEM ID# 023505
M Channels	to its subscribers, 1. Enter the total n system carried te	and (2) the cable system's number of channels on which	total num h the cab	ls on which the cable system carried television broadcast stations ber of activated channels during the accounting period. le	9
		ble system carried television st services		st stations	59
N Individual to Be Contacted		BE CONTACTED IF FURTH out this statement of account		DRMATION IS NEEDED (Identify an individual	
for Further Information	Name	RODNEY HASKINS		Telephone	903) 579-3152
		3027 S SE LOOP 323 (Number, street, rural route, apart TYLER, TX 75701 (City, town, state, zip)		le number)	
	Email	RODNEY.HAS	KINS@A	LTICEUSA.COM Fax (optional)	
O Certification	• I, the undersigned	d, hereby certify that (Check o	one, <i>but o</i> i		
	(Agent c	of owner other than corpora	ation or p	ip) I am the owner of the cable system as identified in line 1 of space partnership) I am the duly authorized agent of the owner of the cable of a corporation or partnership; or	
	X (Officer in lin • I have examined t	r <b>or partner)</b> I am an officer ( ie 1 of space B. the statement of account and	(if a corpo I hereby d	ration) or a partner (if a partnership) of the legal entity identified as o leclare under penalty of law that all statements of fact contained here lge, information, and belief, and are made in good faith.	
	[18 U.S.C., Section		y Knowled		
				/s/ Alan Dannenbaum electronic signature on the line above to certify this statement. nature using an "/s/ signature" (e.g., /s/ John Smith)	-
		Typed or printed	d name:	ALAN DANNENBAUM	
		Title: (Title of o		PROGRAMMING on held in corporation or partnership)	
		Date:		2/1/2022	

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

ounting Period: 2021/2	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
QUEL COMMUNICATIONS LLC	02350
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.	Receipts Exclusion
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	•
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	
<ul> <li>* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.</li> <li>** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.</li> </ul>	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, 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 filing, a determination that would be made by a court of law.