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

OTATEM			FOR COPYRI	GHT OFFICE USE ONLY	Return completed workbook by email to		
		OF ACCOUNT			<u>coplicsoa@copyright.gov</u>		
	-	Short Form)	DATE RECEIVED	AMOUNT			
General instru			03/01/2022	\$	For additional information, contact the U.S. Copyright Office Licensing Division at		
in the first tab	of this	s workbook.		ALLOCATION NUMBER	(202) 707-8150.		
A	ACC	OUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))			
			7				
		2021/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31			
			-				
		20212	Barcode Data Filing Period (optiona	I - see instructions)			
		20212		· · · · · · · · · · · · · · · · · · ·			
Accounting Period							
		Instructions:					
В		Give the full legal name of the owner of t of the subsidiary, not that of the parent of		sidiary of another corporation, give the full corp	oorate title		
Owner				the cold contain			
Owner		List any other name or names under whic	ch the owner conducts the business of	the cable system.			
		If there were different owners during the single statement of account and royalty f		the last day of the accounting period should so nting period.	ubmit a		
		Check here if this is the system's first filin	g If not enter the system's ID numbe	r assigned by the Licensing Division	035337		
		LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM	Λ			
		CEQUEL COMMUNICATIONS LLC					
		BUSINESS NAME(S) OF OWNER O	F CABLE SYSTEM (IF DIFFEREN	Т)			
		SUDDENLINK COMMUNICATIONS					
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM				
		3027 S SE LOOP 323					
		(Number, street, rural route, apartment, or suite n TYLER, TX 75701	lumber)				
		(City, town, state, zip)					
С				entify the business and operation of the he system, if different from the address			
System		IDENTIFICATION OF CABLE SYSTEM:	- •	•			
	1	KAUFMAN, TX					
		MAILING ADDRESS OF CABLE SYSTEM	1:				
	2	(Number, street, rural route, apartment, or suite n	number)				

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.

City, town, state, zip code)

Name CEQUEL COMMUNICATIONS LLC Instructions: Ust each separate community served by the cable system. A "community in the same as a "community unit" as early at an distinct community or mulcipal entity (including unincorporated community unit" as early at an distinct community or mulcipal entity (including unincorporated community unit" is the "inst community." Please use it as the first community or all fitter that you its will serve as a form of system identified city. Area Served OCTY OR TOWN Strate First COTY OR TOWN Strate Community Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in part identified city. TX Community OAK GROVE TX	
D "a separate and distinct community or municipal entity (including unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identified as the "first community." The first community on all future filings. Area Served CITY OR TOWN STATE First KAUFMAN TX Community OAK GROVE TX Add Rows as Necessary CITY OR TOWN STATE How as a Necess	03533
Area Identified city. First CITY OR TOWN STATE KAUEMAN TX OAK GROVE TX dd Rows as Necessary Image: Company of the second se	is and including single, ation hereafter known
First Community KAUEMAN TX OAK GROVE TX Juid Rows as Necessary	ntheses below the
First Community KAUFMAN TX OAK GROVE TX Add Rows as Necessary	
Community OAK GROVE TX Add Rows as Necessary	
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Image: Section of the	
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	Т							FORM SA1-				
Name	LEGAL NAME OF OWNER OF C	SYSTEM ID 03533										
	CEQUEL COMMUNICATIONS LLC											
-	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											
Cocondom	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 n		<i>,</i>	0,0		1 0		charged				
	separately for the particular serv Rate: Give the standard rate of					•	,	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											
	with the number of subscribers a sufficient.	and rates, in the	e ngnt-n	Iand Diock. A li	vo- or thre	e-word descript	ion of the s	service is				
		OCK 1					BLOCK	(2				
	CATEGORY OF SERVICE	NO. OF SUBSCRIBI		RATE	CATI	EGORY OF SEF		NO. OF SUBSCRIBERS	RATI			
	Residential:	SUBSCRIDE			CAI		(VICL	SUBSCRIBERS	10411			
	Service to first set		298	34.99								
	Service to additional set(s)			04.00								
	• FM radio (if separate rate)											
	Motel, hotel											
	Commercial		11	45.95								
	Converter			-0.00								
	Residential											
	Non-residential											
	SERVICES OTHER THAN SEC		NSMIS	SIONS: RATE	s							
F	In General: Space F calls for ra		,									
I	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												
Secondary	amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.											
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.											
Rates	Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a											
	brief (two- or three-word) description and include the rate for each.											
	BLOCK 1							BLOCK 2				
	CATEGORY OF SERVICE			ORY OF SER	VICE	RATE	CATEG	DRY OF SERVICE	RATE			
	Continuing Services:		Installa	ation: Non-res	idential							
	• Pay cable	17.00	• Mot	tel, hotel								
	 Pay cable—add'l channel 	19.00	• Cor	nmercial								
	Fire protection		• Pay	/ cable								
	•Burglar protection		• Pay	/ cable-add'l ch	annel							
	Installation: Residential		• Fire	e protection								
	• First set	99.00	• Bur	glar protection								
	 Additional set(s) 	25.00	Other s	services:								
	• FM radio (if separate rate)		• Rec	connect		40.00						
			1				1					
	Converter		• Dise	connect								
	• Converter			connect let relocation		25.00						
	• Converter		• Out		ess	25.00 99.00						

	LEGAL NAME OF OWNER O	JF CABLE SYSTEM:		SYSTE						
Name	CEQUEL COMMUNICATIONS LLC									
	PRIMARY TRANSMITTERS:	TELEVISION								
G	carried by your cable syste	lentify every television station (including tr em during the accounting period, <i>except</i> (s in effect on June 24, 1981, permitting the	(1) stations carried only on a part	rt-time basis under						
Primary	Primary 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 of									
Fransmitters: Television	Substitute Basis Stations	as explained in the next paragraph. s: With respect to any distant stations car	ried by your cable system on a s	substitute program						
	basis under specific FCC r	rules, regulations, or authorizations: re in space G—but do list it in space I (the								
	station was carried only or	n a substitute basis.	-							
		l also in space I, if the station was carried l ion concerning substitute basis stations, s								
	Column 1: List each statio	on's call sign. <i>Do not</i> report origination pro	ogram services such as HBO, ES	SPN, etc. Identify each						
	"WETA-2" as the same on		C 1							
		nel number the FCC assigned to the televi VRC is channel 4 in Washington, D.C.	ision station for broadcasting ove	er the air in its community						
	Column 3: Indicate in each	ch case whether the station is a network st	•							
		tering the letter "N" (for network), "N-M" (fo), "E" (for noncommercial educational), or								
	For the meaning of these to	terms, see page (iv) of the general instruct on of each station. For U.S. stations, list th	tions in the paper SA1-2 form.	,						
		on of each station. For U.S. stations, list tr adian stations, if any, give the name of the	•							
	1. CALL SIGN	4. LOCATION OF STATION								
	KAZD-1	55		LAKE DALLAS, TX						
	KDAF-1	33	l	DALLAS, TX						
d Rows as Necessary	KDAF-2	33.2	I-M	DALLAS, TX						
	KDAF-3	33.3	I-M	DALLAS, TX						
	KDAF-HD1	33	I-M	DALLAS, TX						
	KDFI-1	27	I	DALLAS, TX						
	KDFI-2	27.2	I-M	DALLAS, TX						
	KDFI-3	27.3	I-M	DALLAS, TX						
	KDFI-HD1	27	I-M	DALLAS, TX						
	KDFW-1	4	I	DALLAS, TX						
	KDFW-HD1	4	I-M	DALLAS, TX						
	KDTN-1	2	<u> </u>	DENTON, TX						
	KDTN-HD1	2	I-M	DENTON, TX						
	KDTX-1	58	I	DALLAS, TX						
	KERA-1	13	E	DALLAS, TX						
		13.2	E-M	DALLAS, TX						
	KERA-2	13.2								
	KERA-2 KERA-3	13.3	E-M	DALLAS, TX						
			E-M E-M	DALLAS, TX DALLAS, TX						
	KERA-3 KERA-HD1	13.3 13		DALLAS, TX						
	KERA-3 KERA-HD1 KFWD-1	13.3 13 52	E-M I	DALLAS, TX FORT WORTH, TX						
	KERA-3 KERA-HD1 KFWD-1 KFWD-HD1	13.3 13		DALLAS, TX FORT WORTH, TX FORT WORTH, TX						
	KERA-3 KERA-HD1 KFWD-1 KFWD-HD1 KMPX-1	13.3 13 52 52 29	E-M I I-M I	DALLAS, TX FORT WORTH, TX FORT WORTH, TX DECATUR, TX						
	KERA-3 KERA-HD1 KFWD-1 KFWD-HD1	13.3 13 52 52	E-M I	DALLAS, TX FORT WORTH, TX FORT WORTH, TX						

Name	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTEI 03						
Name	CEQUEL COMMUNICATIONS LLC									
	PRIMARY TRANSMITTERS:	TELEVISION								
G	carried by your cable system	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								
Primary ransmitters:		(e)(2) and (4), or 76.63 (referring to 76.6 as explained in the next paragraph.	61(e)(2) and (4))]; and (2) certain sta	ations carried on a						
Television	Substitute Basis Stations	s: With respect to any distant stations of	carried by your cable system on a sul	bstitute program						
		ules, regulations, or authorizations: re in space G—but do list it in space I (i	the Special Statement and Program	Log)—if the						
	station was carried <i>only</i> on • List the station here, and a	n a substitute basis. also in space I, if the station was carrie	ed both on a substitute basis and also	o on some other						
	basis. For further information	on concerning substitute basis stations	s, see page (v) of the general instruct	tions.						
	multicast stream associated	on's call sign. <i>Do not</i> report origination ad with a station according to its over-th		-						
	"WETA-2" as the same on t Column 2: Give the channe	the form. nel number the FCC assigned to the tel	evision station for broadcasting over	the air in its community						
	of license. For example, WI	/RC is channel 4 in Washington, D.C.	C C							
	educational station, by ente	h case whether the station is a network ering the letter "N" (for network), "N-M"	(for network multicast), "I" (for indep	endent), "I-M"						
), "E" (for noncommercial educational), erms, see page (iv) of the general instr		ional multicast).						
	Column 4: Give the locatio	on of each station. For U.S. stations, lis	st the community to which the station	-						
	FCC. For Mexican or Cana	adian stations, if any, give the name of t	the community with which the station	n is identified.						
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION						
	KSTR-1	49	I	IRVING, TX						
	KSTR-HD1	49	I-M	IRVING, TX						
	KTVT-1	11	N	FORT WORTH, TX						
	КТVТ-2	11.2	I-M	FORT WORTH, TX						
	КТVТ-З	11.3	I-M	FORT WORTH, TX						
	KTVT-HD1	11	N-M	FORT WORTH, TX						
	КТХА-1	21	I	FORT WORTH, TX						
	KTXA-HD1	21	I-M	FORT WORTH, TX						
	KTXD-1	1	I	GREENVILLE, TX						
	KTXD-HD1 1 I-M GREENVILLE, TX									
	KUVN-1	23	I	GARLAND, TX						
	KUVN-HD1	23	I-M	GARLAND, TX						
	KXAS-1	5	Ν	FORT WORTH, TX						
	KXAS-2	5.2	I-M	FORT WORTH, TX						
	KXAS-3	5.3	I-M	FORT WORTH, TX						
	KXAS-HD1	5	N-M	FORT WORTH, TX						
				DALLAS TY						
	KXTX-1	39	l	DALLAS, TX						
			I I-M	DALLAS, TX DALLAS, TX						
	КХТХ-1	39								
	KXTX-1 KXTX-2	39 39.2	I-M	DALLAS, TX						
	KXTX-1 KXTX-2 KXTX-HD1	39 39.2 39	I-M I-M	DALLAS, TX DALLAS, TX						
	KXTX-1 KXTX-2 KXTX-HD1 WFAA-1	39 39.2 39 8	I-M I-M N	DALLAS, TX DALLAS, TX DALLAS, TX						

LEGAL NAME O									SYSTEM 035
	t every radio s	tation ca	arried on a separate and disc nerally receivable by your ca						н
eceivable if (1) on the basis of or detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: li bignal, indicate Column 4: C	it is carried by monitoring, to prmation abou rm. dentify the call state whether t the radio stati this by placing Give the statior	y the sys be rece t the Co sign of the static ion's sig g a chec n's locati	II-Band FM Carriage: Under stem whenever it is received ived at the headend, with the pyright Office regulations on each station carried. on is AM or FM. nal was electronically proces k mark in the "S/D" column. on (the community to which the	at ss th	the system's he ystem's FM antr is point, see page ed by the cable s e station is licen	eadend, and (2 enna, during c ge (v) of the g system as a s sed by the FC	2) it can certain s leneral ii eparate	be expected, tated intervals. hstructions in the. and discrete	Primary Transmitter: Radio
							8/D		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
								·	
								·	
								·	
								·	
			L	-				l	

Accounting Perio	d: 2021/2						FORM	A SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS L	LC					035337
	SUBSTITUTE CARRIAGE	-	-					
I	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the programm	ing that mu	st be included i	n this log, see page (v) of t	he general in	structions in	the paper S	A1-2 form.
Carriage: Special	1. SPECIAL STATEMEN	-						
Statement and	 During the accounting per 		ur cable system	n carry, on a substitute ba	sis, any noni	network tele		
Program Log	broadcast by a distant sta						YES	× NO
	Note: If your answer is "No	," leave the	rest of this pa	ge blank. If your answer is	s "Yes," you ı	nust comple	ete the prog	jram
	log in block 2. 2. LOG OF SUBSTITUTE		MS					
	In General: List each subst	titute progra	am on a separa		s wherever p	ossible, if th	eir meanin	g is
	clear. If you need more spa			rows to the tables. /ision program ("substitute	a program") t	hat during t	he account	ina
	period, was broadcast by a	distant sta	tion and that ye	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.			erball. List specific progra		example, it		01
				er "Yes." Otherwise enter ' asting the substitute progr				
				he community to which th		censed by th	ne FCC or,	in
	the case of Mexican or Car			community with which the stem carried the substitute		,	with the n	aanth
	first. Example: for May 7 give		when your sys		e program. O	se numerais	, with the fi	nontri
	Column 6: State the time to the nearest five minutes.			ogram was carried by you				ately
	stated as "6:00–6:30 p.m."							
	Column 7: Enter the lett to delete under FCC rules a			n was substituted for programing the accounting period				
	was substituted for program							Syram
	effect on October 19, 1976.							
								7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	E PROGRAM 3. STATION'S		5. MONTH	AGE OCCL 6. TI		DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	– то	
						-		
							_	
							_	
						_	_	
							_	
						-	-	
						-	_	
							_	
							_	
							-	

Accounting Period:	2021/2	FORM SA1-2E. PAGE 6.
Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	035337
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 transmissi (as identified in space E) during the accounting period. For a further explanation of how to compute this amorpage (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.	ion service
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 • 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	3,800
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this si accounting period is \$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)	52.00
	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 areas respire from anone K	
	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	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 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)	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 Co See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more in	

Accounting Period:	2021/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 035337
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	47 422
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual we can contact about this statement of account.)	
for Further Information	Name RODNEY HASKINS Telephone	(903) 579-3152
	Address 3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number) TYLER, TX 75701 (City, town, state, zip)	
	Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional)	
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) 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 (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as or 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 here 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)] 	B; or system as identified wner of the cable system
	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)	
	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.

ccounting Period: 2021/2	FORM SA1-2E. PAGE 8
EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID:
EQUEL COMMUNICATIONS LLC	035337
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?	
ΧΝΟ	
YES. Enter the total here and list the satellite carrier(s) below	
Name 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 Assessment
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	
 * 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. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. 	
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	
ID number First community served Accounting period	

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.