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	FNT	OF ACCOUNT	FOR COPYRIC	GHT OFFICE USE ONLY	Return completed workbook by email to
-		ansmissions by	DATE RECEIVED	AMOUNT	-
	-	Short Form)			<u>coplicsoa@copyright.gov</u>
-		,		\$	For additional information, contact the U.S. Copyright
General instru			03/01/2022		Office Licensing Division at
n the first tab	o of this	s workbook.		ALLOCATION NUMBER	(202) 707-8150.
Α	ACC	OUNTING PERIOD COVEREI	D BY THIS STATEMENT: (Y	YYY/(Period))	
		_	_		
		2021/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
			_		
			Denne de Dete Fillere Derie d'Arrel		
		2021	2 Barcode Data Filing Period (optional	- see instructions)	
Accounting Period					
Fenou					
В		Instructions: Give the full legal name of the owner of of the subsidiary, not that of the parent		idiary of another corporation, give the full cor	porate title
Owner		List any other name or names under wh	ich the owner conducts the business of	the cable system.	
		-	ne accounting period, only the owner on fee payment covering the entire accour	the last day of the accounting period should s	ubmit a
		<b>T</b>			004439
		Check here if this is the system's first fil	ing. If not, enter the system's ID number	r assigned by the Licensing Division.	
		LEGAL NAME OF OWNER/MAILI	NG ADDRESS OF CABLE SYSTEM	1	
		CEQUEL COMMUNICATIONS LLC			
		BUSINESS NAME(S) OF OWNER (	OF CABLE SYSTEM (IF DIFFERENT	Т)	
		SUDDENLINK COMMUNICATIONS			
		MAILING ADDRESS OF OWNER O			
		3027 S SE LOOP 323			
		(Number, street, rural route, apartment, or suite <b>TYLER, TX 75701</b> (City, town, state, zip)	number)		
•	INST		siness or trade names used to ide	entify the business and operation of the	e system unless these
С	name	es already appear in space B. In lin	e 2, give the mailing address of the	he system, if different from the address	s given in space B
System	1				
		HEARNE, TX	M.		
		MAILING ADDRESS OF CABLE SYSTE	IVI.		
	2	(Number, street, rural route, apartment, or suite	number)		
		(City, town, state, zip code)			
	1	(· ), ·····, ····, -···, ···			

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 ID#
	CEQUEL COMMUNICATIONS LLC	004439
D	Instructions: List each separate community served by the cable system. A "com "a separate and distinct community or municipal entity (including unincorporat discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that yo as the "first community." Please use it as the first community on all future filing	ed communities within unincorporated areas and including single, ou list will serve as a form of system identification hereafter known gs.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mo identified city.	blie nome parks should be reported in parentneses below the
	CITY OR TOWN	STATE
First	HEARNE	ТХ
Community		
ows as Necessary		
	กลายการการการการการการการการการการการการการก	

								FORM SA1-		
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:							
	CEQUEL COMMUNICAT	FIONS LLC							00443	
-	SECONDARY TRANSMISSION	I 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 particular about other services (including particular about the second particular				-		hose exis	ting on the		
Service: Sub-	Number of Subscribers: Bot						ole system	n, broken		
scribers and	down by categories of secondar	•					,	,		
Rates	each category by counting the n			0,0				s charged		
	separately for the particular serv					•	,	as and the		
	Rate: Give the standard rate of unit in which it is generally billed	-	-	•				-		
	category, but do not include disc				ny standa		5 Within a			
	Block 1: In the left-hand block				ies of sec	ondary transmis	sion servi	ce that cable		
	systems most commonly provide									
	that applies to your system. Not			-		-				
	categories, that person or entity subscriber who pays extra for ca									
	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					•				
	with the number of subscribers a	and rates, in the	e right-h	nand block. A tv	vo- or thre	e-word descript	on of the	service is		
	sufficient. BLC	DCK 1					BLOCK	< 2		
		NO. OF		DATE	0.4.7			NO. OF		
	CATEGORY OF SERVICE Residential:	SUBSCRIBI	EKS	RATE	CAT	EGORY OF SEF	<b>VICE</b>	SUBSCRIBERS	RATE	
	Service to first set		109	34.99						
	Service to additional set(s)		103	34.99						
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		12	45.95						
	Converter		14	45.55						
	Residential									
	Non-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	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.									
Rales	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.									
		BLO	CK 1					BLOCK 2		
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATE	
	Continuing Services:		Installa	ation: Non-res	idential					
	• Pay cable	17.00	• Mo	tel, hotel						
	<ul> <li>Pay cable—add'l channel</li> </ul>	19.00	• Co	mmercial						
	Fire protection		• Pay	y cable						
	<ul> <li>Burglar protection</li> </ul>		• Pay	y cable-add'l ch	annel					
	Installation: Residential		• Fire	e protection						
	• First set	99.00	• Bur	rglar protection						
	<ul> <li>Additional set(s)</li> </ul>	25.00	Other	services:						
	• FM radio (if separate rate)		• Re	connect		40.00				
	Converter		• Dis	connect						
			• Ou	tlet relocation		25.00				
			• Mo	ve to new addr	ess	99.00				

Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#					
	CEQUEL COMMUNIC	ATIONS LLC		004439					
	PRIMARY TRANSMITTERS: TELEVISION								
G rimary smitters: evision	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(et substitute program basis, an <b>Substitute Basis Stations</b> basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatic <b>Column 1:</b> List each station multicast stream associated	also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	t (1) stations carried only on a part- ne carriage of certain network progr (1(e)(2) and (4))]; and (2) certain state arried by your cable system on a su he Special Statement and Program d both on a substitute basis and als see page (v) of the general instruct program services such as HBO, ES	time basis under rams [sections ations carried on a ubstitute program Log)—if the so on some other tions. PN, etc. Identify each					
	of license. For example, WF Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the locatio	the form. el number the FCC assigned to the tele RC is channel 4 in Washington, D.C. a case whether the station is a network s ering the letter "N" (for network), "N-M" ( "E" (for noncommercial educational), c erms, see page (iv) of the general instru n of each station. For U.S. stations, list dian stations, if any, give the name of th	station, an independent station, or a (for network multicast), "I" (for indep or "E-M" (for noncommercial educat uctions in the paper SA1-2 form. the community to which the station	a noncommercial bendent), "I-M" tional multicast). n is licensed by the					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION					
	KAGS-1	23	N	BRYAN, TX					
	KAGS-1 KAMU-1	23 15	E	BRYAN, TX COLLEGE STATION, TX					
Necessary									
Vecessary	KAMU-1	15	E	COLLEGE STATION, TX					
lecessary	KAMU-1 KBTX-1	15 3	E	COLLEGE STATION, TX BRYAN, TX					
ecessary	KAMU-1 KBTX-1 KBTX-2	15 3 3.2	E N I-M	COLLEGE STATION, TX BRYAN, TX BRYAN, TX					
Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1	15 3 3.2 40	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX					
is as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
<i>i</i> s as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
is as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
<i>i</i> s as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
s as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
s as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
is as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
<i>i</i> s as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
<i>i</i> s as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					
is as Necessary	KAMU-1 KBTX-1 KBTX-2 KRHD-1 KWKT-1	15 3 3.2 40 44	E N I-M N	COLLEGE STATION, TX BRYAN, TX BRYAN, TX BRYAN, TX WACO, TX					

LEGAL NAME O								SYSTEM 004
	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 fo Column 1: lo Column 2: S Column 3: lf	it is carried by monitoring, to prmation about rm. dentify the call state whether to the radio stat	y the sys be rece It the Co sign of the static ion's sig	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 ł system's FM ar this point, see p	neadend, and ( ntenna, 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: O	Give the station	n's locati	k mark in the "S/D" column. ion (the community to which the 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	od: 2021/2					FORM	A SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS L	LC				004439
	SUBSTITUTE CARRIAGI	E: SPECIA	L STATEME	NT AND PROGRAM LO	G		
	In General: In space I, ident	ify every noi	nnetwork televi	<i>sion program,</i> broadcast by	a distant sta	tion, that your cable sys	tem carried on a
	substitute basis during the a						
Substitute Carriage:	explanation of the programm				le general ins	structions in the paper 5	A 1-2 10111.
Special	1. SPECIAL STATEMEN	-				atwark talavisian prog	
Statement and	During the accounting per		I Cable System	in carry, on a substitute bas	sis, any nom		
Program Log	broadcast by a distant sta	uon?				YES	NO
	Note: If your answer is "No	," leave the	rest of this pa	ge blank. If your answer is	"Yes," you r	nust complete the prog	Iram
	log in block 2.						
	2. LOG OF SUBSTITUTE			ata lina. I lag abbroviationa	wherever	aacibla if their meening	- ia
	In General: List each subsicient clear. If you need more spa				wherever p	ossible, if their meaning	g is
				/ision program ("substitute	program") ti	nat, during the account	ing
	period, was broadcast by a						
	under certain FCC rules, re Do not use general categor						
	"NBA Basketball: 76ers vs.					scample, Theore Eucy	
				er "Yes." Otherwise enter "			
				asting the substitute progr he community to which the		censed by the ECC or	in
	the case of Mexican or Car		```	5			
	Column 5: Give the mor	nth and day		stem carried the substitute			nonth
	first. Example: for May 7 giv				achla avata	n list the times see	atalı.
	to the nearest five minutes.			ogram was carried by your ied by a system from 6:01			atery
	stated as "6:00-6:30 p.m."				•		
				n was substituted for progr			
	to delete under FCC rules a was substituted for program						ogram
	effect on October 19, 1976	• •		·		5	
	SI	UBSTITUT	E PROGRAM			N SUBSTITUTE AGE OCCURRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	
						_	
						_	
			·				
			·····		 		

Accounting Period:	2021/2	FORM SA1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
	CEQUEL COMMUNICATIONS LLC	004439
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmi (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ission service
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 \$2</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>	263,800
	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.	s 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 \$527,60	00)
	1. Enter the amount of gross receipts from space K	
	2. Base amount under statutory formula \$ 263,800.00	
	3. Subtract line 2 from line 1	
	4. Multiply line 3 by .01	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00
	6. Interest charge. Enter the amount from line 4, space Q, page 8	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)	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 See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more	

Accounting Period:	2021/2				FORM SA1-2E. PAGE 7.
Name		INER OF CABLE SYSTEM: UNICATIONS LLC			SYSTEM ID# 004439
M Channels	to its subscribers, 1. Enter the total n system carried te	and (2) the cable system's umber of channels on whic	total numl h the cab	Is on which the cable system carried television broadcast stations ber of activated channels during the accounting period. le	. 7
		le system carried television		st stations	37
N Individual to Be Contacted		BE CONTACTED IF FURTH out this statement of accou		ORMATION IS NEEDED (Identify an individual	
for Further Information	Name I	RODNEY HASKINS		Telephone	903) 579-3152
	-	3027 S SE LOOP 32: Number, street, rural route, apart TYLER, TX 75701 City, town, state, zip)		te number)	
	Email	RODNEY.HAS	KINS@A	LTICEUSA.COM Fax (optional)	
O Certification	I, the undersigned     (Owner of the other state)     (Agent of the other state)	, hereby certify that (Check other than corporation or p f owner other than corpor	one, <i>but or</i> partnersh ation or p	rtified and signed in accordance with Copyright Office regulations <i>nly one</i> , of the boxes.) <b>ip)</b> I am the owner of the cable system as identified in line 1 of space <b>partnership)</b> I am the duly authorized agent of the owner of the cable of a corporation or partnership; or	e B; or
	X (Officer in line • I have examined t	or partner) I am an officer e 1 of space B. he statement of account and and correct to the best of m	(if a corpo I hereby d	ration) or a partner (if a partnership) of the legal entity identified as c eclare under penalty of law that all statements of fact contained here ge, information, and belief, and are made in good faith.	
				/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.

	FORM SA1-2E. PAGE
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
QUEL COMMUNICATIONS LLC	00443
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?	
XNO	
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	
x days	—
x days Line 3 Multiply line 2 by the number of days late and enter the sum here	_
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here       -         x 0.00274         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	

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.