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 COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to	
for Secondary Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov	
Cable Systems (Short Form) General instructions are located in the first tab of this workbook.	9/15/22	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.	
A ACCOUNTING PERIOD COVERED	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31		

Period		
В		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.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		CEQUEL COMMUNICATIONS LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		SUDDENLINK COMMUNICATIONS
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)
		(riviniber, suber, rular loute, apartment, or subernamber) TYLER, TX 75701 (City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	1	IDENTIFICATION OF CABLE SYSTEM:
	-	WINNFIELD, LA
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)

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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	CEQUEL COMMUNICATIONS LLC	015028
D	Instructions: List each separate community served by the cable system. A "commu "a separate and distinct community or municipal entity (including unincorporated c discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list as the "first community." Please use it as the first community on all future filings.	ommunities within unincorporated areas and including single, st will serve as a form of system identification hereafter known
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile identified city.	home parks should be reported in parentheses below the
First	CITY OR TOWN WINNFIELD	LA STATE
First Community	JOYCE	
-	WINN PARISH	LA
ld Rows as Necessary		

	1							FORM SA1-			
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:									
	CEQUEL COMMUNICATIONS LLC								01502		
-	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES										
E	In General: The information in s	-		-		•					
0	system, that is, the retransmission										
Secondary Transmission	, . .	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the									
Service: Sub-	last day of the accounting period (June 30 or December 31, as the case may be). 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 secondar	, y transmission	service.	In general, yo	u can con	npute the numbe	r of subso	cribers in			
Rates	each category by counting the n							s charged			
	separately for the particular serv Rate: Give the standard rate of					•	,	ae and the			
	unit in which it is generally billed	-	-	•				-			
	category, but do not include disc	• •	,		iny standa		5 Within a				
	Block 1: In the left-hand block	t in space E, th	e form li	sts the catego	ries of sec	condary transmis	sion servi	ice 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	-		•							
	printed in block 1 (for example, t					•					
	with the number of subscribers a sufficient.	and rates, in the	e rignt-n	and block. A th	vo- or thre	e-wora descripti	on of the	Service IS			
		OCK 1					BLOCK	٢2			
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	RS	RATE	CATI	EGORY OF SEF	VICE	NO. OF SUBSCRIBERS	RATE		
	Residential:	00200142			0,111			000001.000			
	Service to first set		729	50.00							
	 Service to additional set(s) 										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		56	45.95							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC				-		tom'a oon	vises that were			
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										
Other Than	amount of the charge and the ur		usually	billed. If any ra	ates are cl	harged on a varia	able per-p	orogram basis,			
Secondary Fransmissions:	enter only the letters "PP" in the Block 1 : Give the standard rate		he cable	e system for e	ach of the	applicable service	es listed				
Rates		Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. 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	ices in th	e form of a								
	brief (two- or three-word) description and include the rate for each.										
		BLO						BLOCK 2			
	CATEGORY OF SERVICE	RATE		ORY OF SER		RATE	CATEG	ORY OF SERVICE	RATE		
			Installa	tion: Non-res	idential						
	Continuing Services:			al hatal							
	Continuing Services: • Pay cable	17.00	• Mot	,							
	Continuing Services: • Pay cable • Pay cable—add'l channel		• Cor	nmercial							
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	17.00	• Cor • Pay	nmercial cable							
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	17.00	• Cor • Pay • Pay	nmercial cable cable-add'l ch	annel						
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	17.00 19.00	• Cor • Pay • Pay • Fire	nmercial cable cable-add'l ch protection	annel						
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set	17.00 19.00 99.00	• Cor • Pay • Pay • Fire • Bur	nmercial cable cable-add'l ch protection glar protection	annel						
	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	• Cor • Pay • Pay • Fire • Bury Other s	nmercial cable cable-add'l ch protection glar protection services:	annel						
	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	• Cor • Pay • Pay • Fire • Bur • Bur • Rec	nmercial cable cable-add'l ch protection glar protection services: connect	annel	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	• Cor • Pay • Pay • Fire • Bur • Bur • Bur • Rec • Disc	nmercial cable-add'l ch protection glar protection services: connect connect	annel						
	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	• Cor • Pay • Pay • Fire • Bur • Bur • Rec • Disc • Out	nmercial cable cable-add'l ch protection glar protection services: connect		40.00 25.00 99.00					

Name	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTE				
Name	CEQUEL COMMUNIC	ATIONS LLC		01				
	PRIMARY TRANSMITTERS: TELEVISION							
G Primary ransmitters: Television	In General: In space G, ide carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC ru • Do not list the station her station was carried only or • List the station here, and basis. For further informatic Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast) For the meaning of these to Column 4: Give the location	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), 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), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent station, see page (iv) of the general instructions in the paper SA1-2 form.						
	FCC. For Mexican or Cana	adian stations, if any, give the name of t	he community with which the statio	4. LOCATION OF STATION				
	KAQY-1	11	N	COLUMBIA, LA				
	KAQY-HD1	11	N-M	COLUMBIA, LA				
Rows as Necessary	KARD-1	14	I	WEST MONROE, LA				
	KARD-2	14.2	I-M	WEST MONROE, LA				
	KARD-3	14.3	I-M	WEST MONROE, LA				
	KARD-3 KARD-HD1	14.3 14	I-M I-M	WEST MONROE, LA WEST MONROE, LA				
	KARD-HD1	14	I-M	WEST MONROE, LA				
	KARD-HD1 KLTM-1	14 13	I-M E	WEST MONROE, LA MONROE, LA				
	KARD-HD1 KLTM-1 KLTM-2	14 13 13.2	I-M E E-M	WEST MONROE, LA MONROE, LA MONROE, LA				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3	14 13 13.2 13.3	I-M E E-M E-M	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1	14 13 13.2 13.3 13	I-M E E-M E-M E-M	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1	14 13 13.2 13.3 13 13 11	I-M E E-M E-M E-M I	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1	14 13 13.2 13.3 13 11 8	i-M E E-M E-M E-M I N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1 KNOE-3	14 13 13.2 13.3 13 11 8 8 8.3	I-M E E-M E-M E-M I N I N I-M	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA MONROE, LA				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1 KNOE-3 KNOE-4 KNOE-HD1	14 13 13.2 13.3 13 11 8 8.3 8.4 8	I-M E E-M E-M I I N I-M I-M I-M N-M	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1 KNOE-3 KNOE-4 KNOE-HD1 KTVE-1	14 13 13.2 13.3 13 13 13 13 13 13 13 13 13 13 13 13 13 13 14 8 8.3 8.4 8 10	i-M E E-M E-M I I N I-M I-M N-M N N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA MONROE, LA EL DORADO, AR				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1 KNOE-3 KNOE-4 KNOE-HD1	14 13 13.2 13.3 13 11 8 8.3 8.4 8	I-M E E-M E-M I I N I-M I-M I-M N-M	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1 KNOE-3 KNOE-4 KNOE-HD1 KTVE-1	14 13 13.2 13.3 13 13 13 13 13 13 13 13 13 13 13 13 13 13 14 8 8.3 8.4 8 10	i-M E E-M E-M I I N I-M I-M N-M N N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA MONROE, LA EL DORADO, AR				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1 KNOE-3 KNOE-4 KNOE-HD1 KTVE-1	14 13 13.2 13.3 13 13 13 13 13 13 13 13 13 13 13 13 13 13 14 8 8.3 8.4 8 10	i-M E E-M E-M I I N I-M I-M N-M N N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA MONROE, LA EL DORADO, AR				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1 KNOE-3 KNOE-4 KNOE-HD1 KTVE-1	14 13 13.2 13.3 13 13 13 13 13 13 13 13 13 13 13 13 13 13 14 8 8.3 8.4 8 10	i-M E E-M E-M I I N I-M I-M N-M N N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA MONROE, LA EL DORADO, AR				
	KARD-HD1 KLTM-1 KLTM-2 KLTM-3 KLTM-HD1 KMLU-1 KNOE-1 KNOE-3 KNOE-4 KNOE-HD1 KTVE-1	14 13 13.2 13.3 13 13 13 13 13 13 13 13 13 13 13 13 13 13 14 8 8.3 8.4 8 10	i-M E E-M E-M I I N I-M I-M N-M N N	WEST MONROE, LA MONROE, LA MONROE, LA MONROE, LA MONROE, LA COLUMBIA, LA MONROE, LA MONROE, LA MONROE, LA EL DORADO, AR				

EGAL NAME O								SYSTEM 015
	t every radio s	tation ca	arried on a separate and discr nerally receivable by your cat					н
receivable 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 recein t the Co sign of the static ion's sig	I-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 his point, see pa	eadend, and (: enna, during c ge (v) of the g	2) it can certain s eneral ir	be expected, tated intervals. nstructions in the.	Primary Transmitters Radio
Column 4: G	live the statior	n's locati	k mark in the "S/D" column. on (the community to which the the community with which the			C 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: 2022/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	ATIONS L	LC					015028
	SUBSTITUTE CARRIAGI	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
	In General: In space I, ident	ifv everv nor	nnetwork televi.	sion program broadcast by	i a distant sta	tion that v	our cable sve	stem carried on a
_	substitute basis during the a							
Substitute	explanation of the programm	ning that mu	st be included i	n this log, see page (v) of tl	he general ins	structions in	n the paper S	SA1-2 form.
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE				
Special	 During the accounting per 	riod. did vou	ur cable svsten	n carrv. on a substitute ba	sis. anv nonr	network tel	evision proc	aram
Statement and	broadcast by a distant sta		,	, ,	, ,			NO
Program Log	-				<i>(</i>) / "		YES	
	Note: If your answer is "No	," leave the	rest of this pa	ge blank. If your answer is	s "Yes," you r	nust comp	lete the pro	gram
	log in block 2. 2. LOG OF SUBSTITUTE		Me					
	In General: List each subst			ate line. Use abbreviations	s wherever p	ossible if t	heir meanin	a is
	clear. If you need more spa							910
				vision program ("substitute	e program") tl	hat, during	the accoun	ting
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general categor		ovies" or "bask	etball." List specific progra	am titles, for e	example, "	Love Lucy"	' or
	"NBA Basketball: 76ers vs. Column 2: If the program		dcast live. ente	er "Yes." Otherwise enter '	"No."			
				asting the substitute progr				
	Column 4: Give the broa	adcast statio	on's location (t	he community to which the	e station is lie		the FCC or,	, in
	the case of Mexican or Car							
		•	when your sys	stem carried the substitute	e program. Us	se numera	ls, with the i	month
	first. Example: for May 7 giv		o cubatituto pr	ogram was carried by you	r cablo svetov	m List the	timos acou	rately
	to the nearest five minutes.							
	stated as "6:00–6:30 p.m."	_//dimpion (a program can					
		er "R" if the	listed progran	n was substituted for prog	ramming that	your syste	em was <i>requ</i>	uired
	to delete under FCC rules a	and regulati	ions in effect d	uring the accounting perio	d; enter the l	etter "P" if	the listed pr	rogram
				as permitted to delete und	ler FCC rules	and regul	ations in	
	effect on October 19, 1976.				ler FCC rules	and regul	ations in	
						Ũ		
	effect on October 19, 1976.		your system w	as permitted to delete und	WHE	N SUBST	ITUTE	7. REASON FOR
	effect on October 19, 1976.			as permitted to delete und	WHE	N SUBST	ITUTE	7. REASON FOR DELETION
	effect on October 19, 1976.		your system w	as permitted to delete und	WHE	N SUBST	ITUTE SURRED	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	
	effect on October 19, 1976.	UBSTITUT	your system w E PROGRAM 3. STATION'S	as permitted to delete und	WHE CARRI 5. MONTH	N SUBST AGE OCC 6.	ITUTE CURRED TIMES	

Accounting Period:	2022/1 FO	RM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	CEQUEL COMMUNICATIONS LLC	015028
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 t all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission s (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, 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.	ervice
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 \$263,800 • Use block 3 if the amount of gross receipts in space K is more than \$363,800 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-me accounting period is \$52.00.	onth
	Line 1. Royalty fee for accounting period	
	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	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	
	1. Base amount under statutory formula \$ 263,800.00	
	2. Enter amount of gross receipts from space K	
	3. Subtract line 2 from line 1	
	4. Enter the amount of gross receipts from space K	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	
	8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
	1. Enter the amount of gross receipts from space K \$ 433,975.15	
	2. Base amount under statutory formula	
	3. Subtract line 2 from line 1	
	4. Multiply line 3 by .01 \$ 1,701.	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,319.	
	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	3,020.75
	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) \$ 3,020.	75
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	00
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	3,040.75
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyri See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more inform	•

Accounting Period:	2022/1				FORM SA1-2E. PAGE 7.
Name		INER OF CABLE SYSTEM: UNICATIONS LLC			SYSTEM ID# 015028
M Channels	to its subscribers, a 1. Enter the total n	and (2) the cable system's umber of channels on whic	total numl h the cabl	Is on which the cable system carried television broadcast stations ber of activated channels during the accounting period. le	17
	on which the cabl	umber of activated channel le system carried television it services	broadcas	st stations	312
N Individual to Be Contacted		E CONTACTED IF FURTH out this statement of accou		ORMATION IS NEEDED (Identify an individual	
for Further Information	Name F	RODNEY HASKINS		Telephone	903) 579-3152
	() T	3027 S SE LOOP 323 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	, hereby certify that (Check	one, <i>but or</i>	rtified and signed in accordance with Copyright Office regulations <i>nly one</i> , of the boxes.) ip) I am the owner of the cable system as identified in line 1 of spac	
	I have examined the second secon	 a 1 of space B and that the of or partner) I am an officer (a 1 of space B. be statement of account and and correct to the best of m 	owner is n (if a corpo I hereby d	Partnership) I am the duly authorized agent of the owner of the cable of a corporation or partnership; or ration) or a partner (if a partnership) of the legal entity identified as o eclare under penalty of law that all statements of fact contained here ge, information, and belief, and are made in good faith.	wner of the cable system
				/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:		8/24/2022	

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.

counting Period: 2022/1	FORM SA1-2E. PAGE 8
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
EQUEL COMMUNICATIONS LLC	01502
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 Receipts Exclusion
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.	
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 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	

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