This form is effective beg	ginning with the J	anuary 1 to June 30	, 2017, accoun	ting period (2017/1)
If you are filing for a prior a	accounting period,	contact the Licensing	Division for the	correct form.

## **SA1-2E** Short Form

STATEME	ENT OF ACCOUNT	FOR COPYRIC	GHT OFFICE USE ONLY	Return completed workbook by email to
for Seconda	ry Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov
General instru	rms (Short Form) ctions are located of this workbook.	9/15/2022	\$ ALLOCATION NUMBER	Copies Copyright 2007 For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY	′YY/(Period))	
	2022/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20222	Barcode Data Filing Period (optional	- see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of th subsidiary, not that of the parent corpora	-	ary of another corporation, give the full corporate	title of the
Owner	List any other name or names under whic	n the owner conducts the business of th	e cable system.	
	If there were different owners during the statement of account and royalty fee pays		e last day of the accounting period should submit a iod.	. single
	Check here if this is the system's first filing	g. If not, enter the system's ID number a	ssigned by the Licensing Division.	015159
	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 n	umber)		

С names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: System 1 MT. VERNON, TX 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

INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these

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.

**TYLER, TX 75701** City, town, state, zip)

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	015159
D Area Served	Instructions: List each separate community served by the cable system. A "communi separate and distinct community or municipal entity (including unincorporated com- unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serv community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile h city.	nunities within unincorporated areas and including single, discrete e as a form of system identification hereafter known as the "first
	CITY OR TOWN	STATE
First Community	MT. VERNON FRANKLIN COUNTY	TX TX
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM							A1-2E. PAGE		
Name								01	01515		
Е	SECONDARY TRANSMISSION										
	In General: The information in s 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 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 Rates	down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged										
Rates	separately for the particular servi							charged			
	Rate: Give the standard rate c	-	-	-			-				
	unit in which it is generally billed.				y standaro	d rate variations	within a p	articular rate			
	category, but do not include disc Block 1: In the left-hand block				es of seco	ndary transmiss	ion servic	e that cable			
	systems most commonly provide										
	that applies to your system. Note	e: Where an inc	dividual	or organization	is receivir	ng service that fa	alls under	different			
	categories, that person or entity										
	subscriber who pays extra for ca first set" and would be counted o					In the count und	ier Servio	ce to the			
	Block 2: If your cable system h					service that are	different fi	rom those			
	printed in block 1 (for example, ti					,	,,	, 0			
	with the number of subscribers a	ind rates, in the	e right-ha	and block. A tw	o- or three	-word description	on of the s	ervice is			
	sufficient.	DCK 1					BLOC	К 2			
		NO. OF					DLOO	NO. OF			
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RATE		
	Residential:										
	Service to first set		545	50.00							
	Service to additional set(s)										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		28	45.95							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	SIONS: RATES							
F	In General: Space F calls for rat										
Г	not covered in space E, that is, the										
Services	service for a single fee. There are furnished at cost or (2) services of										
Other Than	amount of the charge and the un										
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 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	-	ORY OF SER	/ICE	RATE	CATEG	GORY OF SERVIC	E RATE		
	Continuing Services:		Installa	tion: Non-resi	dential						
	• Pay cable	17.00	• Mot	el, hotel							
		19.00	• Cor	nmercial							
	<ul> <li>Pay cable—add'l channel</li> </ul>		• Pav	cable							
	Pay cable—add'l channel     Fire protection	10100	,	ouble							
				cable-add'l ch	annel						
	Fire protection		• Pay		annel						
	Fire protection     Burglar protection	99.00	• Pay • Fire	v cable-add'l ch	annel						
	• Fire protection •Burglar protection Installation: Residential	99.00	• Pay • Fire • Bur	v cable-add'l ch e protection	annel						
	<ul> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> </ul>	99.00	• Pay • Fire • Bur Other s	v cable-add'l ch e protection glar protection	annel	40.00					
	<ul> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> </ul>	99.00	• Pay • Fire • Bur Other s	e cable-add'l ch e protection glar protection services:	annel	40.00					
	<ul> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>	99.00	• Pay • Fire • Bur • Bur • Rec • Disc	e cable-add'l ch e protection glar protection services: connect	annel	40.00					

ting Period: 2	-			FORM SA1-2E. PA
Name	LEGAL NAME OF OWNER O			015 <sup>,</sup>
G Primary Ismitters: levision	carried by your cable system FCC rules and regulations 76.59(d)(2) and (4), 76.61(e substitute program basis, a <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 basis. For further informatic <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on <b>Column 2:</b> Give the chann of license. For example, W <b>Column 3:</b> Indicate in each educational station, by ente (for independent multicast). For the meaning of these te <b>Column 4:</b> Give the location	also in space I, if the station was carried on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination pro d with a station according to its over-the-	(1) stations carried only on a part- e carriage of certain network progra (e)(2) and (4))]; and (2) certain stat ried by your cable system on a su e Special Statement and Program both on a substitute basis and als see page (v) of the general instruct ogram services such as HBO, ES air designation. For example, rep ision station for broadcasting over tation, an independent station, or or network multicast), "I" (for indep "E-M" (for noncommercial educations in the paper SA1-2 form. he community to which the station	time basis under rams [sections ations carried on a ubstitute program a Log)—if the so on some other ctions. PN, etc. Identify each bort multistream r the air in its community 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
	KDKJ-1	27	1	TYLER, TX
	KERA-1	13	E	DALLAS, TX
as Necessary	KERA-HD1	13	E-M	DALLAS, TX
	KETK-1	56	N	JACKSONVILLE, TX
	KETK-2	56.2	I-M	JACKSONVILLE, TX
	KETK-3	56.3	I-M	JACKSONVILLE, TX
	KETK-HD1	56	N-M	JACKSONVILLE, TX
	KFXK-1	51	I	LONGVIEW, TX
	KFXK-HD1	51	I-M	LONGVIEW, TX
	KLTV-1	7		
		1	N	TYLER, TX
	KLTV-2	7.2	I-M	TYLER, TX TYLER, TX
		7.2 7.3	N I-M I-M	
	KLTV-2			TYLER, TX
	KLTV-2 KLTV-3	7.3	I-M	TYLER, TX TYLER, TX
	KLTV-2 KLTV-3 KLTV-4	7.3 7.4	I-M I-M	TYLER, TX TYLER, TX TYLER, TX
	KLTV-2 KLTV-3 KLTV-4 KLTV-HD1	7.3 7.4 7	I-M I-M N-M	TYLER, TX TYLER, TX TYLER, TX TYLER, TX
	KLTV-2 KLTV-3 KLTV-4 KLTV-HD1 KLTV-HD3	7.3 7.4 7 7.3	I-M I-M N-M	TYLER, TX TYLER, TX TYLER, TX TYLER, TX TYLER, TX TYLER, TX
	KLTV-2 KLTV-3 KLTV-4 KLTV-HD1 KLTV-HD3 KSHV-1	7.3 7.4 7 7.3 45	I-M I-M N-M I-M I	TYLER, TX TYLER, TX TYLER, TX TYLER, TX TYLER, TX SHREVEPORT, LA
	KLTV-2 KLTV-3 KLTV-4 KLTV-HD1 KLTV-HD3 KSHV-1 KSHV-HD1	7.3 7.4 7 7.3 45 45	I-M I-M N-M I-M I I-M	TYLER, TX TYLER, TX TYLER, TX TYLER, TX TYLER, TX SHREVEPORT, LA SHREVEPORT, LA
	KLTV-2 KLTV-3 KLTV-4 KLTV-HD1 KLTV-HD3 KSHV-1 KSHV-1 KSHV-HD1	7.3 7.4 7 7 7.3 45 45 45 12	I-M I-M N-M I-M I I-M N	TYLER, TX TYLER, TX TYLER, TX TYLER, TX TYLER, TX SHREVEPORT, LA SHREVEPORT, LA
	KLTV-2 KLTV-3 KLTV-4 KLTV-HD1 KLTV-HD3 KSHV-1 KSHV-HD1 KSLA-1 KTBS-1	7.3 7.4 7 7.3 45 45 12 3	I-M I-M N-M I-M I I I-M N N	TYLER, TX TYLER, TX TYLER, TX TYLER, TX TYLER, TX SHREVEPORT, LA SHREVEPORT, LA SHREVEPORT, LA
	KLTV-2 KLTV-3 KLTV-4 KLTV-HD1 KLTV-HD3 KSHV-1 KSHV-HD1 KSLA-1 KTBS-1 KXAS-1	7.3 7.4 7 7 7.3 45 45 45 12 3 5	I-M I-M I-M I-M I I I-M N N N N	TYLER, TX TYLER, TX TYLER, TX TYLER, TX TYLER, TX SHREVEPORT, LA SHREVEPORT, LA SHREVEPORT, LA SHREVEPORT, LA FORT WORTH, TX
	KLTV-2 KLTV-3 KLTV-4 KLTV-HD1 KLTV-HD3 KSHV-1 KSHV-HD1 KSLA-1 KTBS-1 KXAS-1 KXAS-1 KYTX-1	7.3 7.4 7 7 7.3 45 45 12 3 5 19	I-M I-M N-M I-M I I I-M N N N N N N	TYLER, TX TYLER, TX TYLER, TX TYLER, TX TYLER, TX SHREVEPORT, LA SHREVEPORT, LA SHREVEPORT, LA SHREVEPORT, LA FORT WORTH, TX NACOGDOCHES, TX

CEQUEL CO	F OWNER OF C								SYSTEM I 0151
n General: Lis		tation ca	rried on a separate and discre erally receivable by your cabl					ied on an	н
eceivable if (1) n the basis of or detailed info aper SA1-2 fo Column 1: lo Column 2: S Column 3: li ignal, indicate Column 4: C	i it is carried by monitoring, to prmation abou rm. dentify the call State whether t the radio stati this by placing Sive the statior	/ the syst be receiv t the Cop sign of e he statio on's sigr a check d's locatio	-Band FM Carriage: Under C tem whenever it is received at yed at the headend, with the s pyright Office regulations on the each station carried. In is AM or FM. hal was electronically processor mark in the "S/D" column. on (the community to which the he community with which the	t ti sys his sec	he system's hea stem's FM anter s point, see page d by the cable sy station is licens	adend, and (2) nna, during ce e (v) of the ge ystem as a sep ed by the FCC	it can b rtain sta neral ins parate a	e expected, ted intervals. tructions in the. nd discrete	Primary Transmitters: Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
				-					
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Accounting Perio							FOF	RM SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF							SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LL	_C					015159
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG				
	In General: In space I, identi	-	-			on. that vou	r cable svste	m carried on a
	substitute basis during the a	ccounting pe	eriod, under spe	cific present and former FC	C rules, regula	ations, or au	uthorizations.	. For a further
Substitute	explanation of the programm	ing that mus	st be included in	this log, see page (v) of the	e general instr	uctions in th	ne paper SA	1-2 form.
Carriage: Special	1. SPECIAL STATEMENT	-						
Statement and	<ul> <li>During the accounting per</li> </ul>	iod, did you	ır cable system	carry, on a substitute bas	sis, any nonne	etwork tele	ision progra	
Program Log	broadcast by a distant stat	ion?					YES	× NO
	Note: If your answer is "No	," leave the	rest of this pag	ge blank. If your answer is	"Yes," you m	ust comple	te the progr	am
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subsicient clear. If you need more spa				wherever po	ssible, if th	eir meaning	is
				ision program ("substitute	program") th	at. durina t	he accountii	na
	period, was broadcast by a	distant stat	ion and that yo	ur cable system substitute	ed for the prog	gramming o	of another st	tation
	under certain FCC rules, re							
	Do not use general categor "NBA Basketball: 76ers vs.		DVIES OF DASKE	abali. List specific program	m uties, for ex	kampie, TL	Love Lucy C	Л
	Column 2: If the program	n was broad	dcast live, ente	r "Yes." Otherwise enter "I	No."			
				sting the substitute progra		مراجع مراجع		_
	the case of Mexican or Car			ne community to which the community with which the				1
	Column 5: Give the mor	nth and day		tem carried the substitute			, with the m	onth
	first. Example: for May 7 giv				aabla ayataya			hall i
	to the nearest five minutes.	es when the Example: a	e substitute pro	gram was carried by your ed by a system from 6:01:	·15 n m to 6:	i. List the til 28:30 n m	mes accura should be	tery
	stated as "6:00–6:30 p.m."							
				was substituted for progra				
					d. euter the le	iffer "P" if fr	he listed pro	aram
	to delete under FCC rules a							gram
	to delete under FCC rules a was substituted for program effect on October 19, 1976.	nming that y						gram
	was substituted for progran	nming that y			er FCC rules a	and regulat	tions in	
	was substituted for progran effect on October 19, 1976	nming that y			er FCC rules a		tions in	7. REASON FOR
	was substituted for progran effect on October 19, 1976	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	AN SUBST	ITUTE URRED TIMES	-
	was substituted for progran effect on October 19, 1976 S	UBSTITUT	our system wa		er FCC rules a WHE CARRI	and regulat N SUBST	ITUTE	7. REASON FOR
	was substituted for progran effect on October 19, 1976 S	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	AN SUBST	ITUTE URRED TIMES	7. REASON FOR
	was substituted for progran effect on October 19, 1976 S	UBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	AN SUBST	ITUTE URRED TIMES	7. REASON FOR
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	was substituted for progran effect on October 19, 1976 S	BUBSTITUT	E PROGRAM	s permitted to delete unde	WHE CARRI 5. MONTH	AN SUBST	ITUTE URRED TIMES	7. REASON FOR

Accounting Period:	2022/1	FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
	CEQUEL COMMUNICATIONS LLC		015159
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. I all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary tran (as identified in space E) during the accounting period. For a further explanation of how to compute this 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.	smission service s amount, see	<b>4,441.87</b> ross receipts)
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</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 fo accounting period is \$52.00.	r this six-month	
	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 \$13	7,100)	
	1. Base amount under statutory formula	0	
	2. Enter amount of gross receipts from space K \$ 164,441.8	37	
	3. Subtract line 2 from line 1	3	
	4. Enter the amount of gross receipts from space K	164,441.87	
	5. Enter the amount from line 3	99,358.13	
	6. Subtract line 5 from line 4	65,083.74	
	7. Multiply line 6 by .005 (enter figure here)		325.42
	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		325.42
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$5	27,600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula	0	
	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 Due	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	325.42	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	345.42
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for		

Accounting Period:	2022/1	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 015159
M Channels	<ul> <li>CHANNELS</li> <li>Instructions: You must give (1) the number of channels on which the cable to its subscribers, and (2) the cable system's total number of activated chan</li> <li>1. Enter the total number of channels on which the cable system carried television broadcast stations</li> <li>2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services</li> </ul>	24
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEED we can contact about this statement of account.)	ED (Identify an individual
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 a <ul> <li>I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.)</li> <li>(Owner other than corporation or partnership) I am the owner of the owner other than corporation or partnership) I am the owner of the in line 1 of space B and that the owner is not a corporation or partner (if a in line 1 of space B.</li> <li>I have examined the statement of account and hereby declare under penalty of Is are true, complete, and correct to the best of my knowledge, information, and be [18 U.S.C., Section 1001(1986)] K /s/ Alan Danne Enter an electronic signature or Enter signature using an "/s/ signature using an</li></ul>	e cable system as identified in line 1 of space B; or Ily authorized agent of the owner of the cable system as identified artnership; or partnership) of the legal entity identified as owner of the cable system aw that all statements of fact contained herein lief, and are made in good faith.
	Typed or printed name: ALAN DANNE Title: SVP, PROGRAMMING (Title of official position held in corporat	
	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 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	015159
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:         <ul> <li>"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 subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."</li> </ul> </li> <li>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.</li> <li>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?</li> </ul>	P Special Statement Concerning Gross Receipts Exclusion
X       NO         YES. Enter the total here and list the satellite carrier(s) below.       \$	
Name     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	
<ul> <li>(interest charge)</li> <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> <li>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.</li> </ul>	
Owner	
Address	
ID number	

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