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

				Return completed workbook by		
STATEME	INT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	email to		
for Seconda	ry Transmissions by	DATE RECEIVED	AMOUNT			
	ms (Short Form)		\$	<u>coplicsoa@copyright.gov</u> For additional information, contact the U.S. Copyright		
General instru	ctions are located	0// = /0.000		Office Licensing Division at		
in the first tab	of this workbook.	9/15/2022	ALLOCATION NUMBER	(202) 707-8150.		
				-		
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YYY	(Y/(Period))			
		1				
	2022/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31			
	20221	Barcode Data Filing Period (optional -	see instructions)			
		J				
Accounting Period						
	Instructions:					
В		-	ry of another corporation, give the full corporate	e title of the		
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 a statement of account and royalty fee paym	<b>.</b>	last day of the accounting period should submit d.	t a single		
	Check here if this is the system's first filing	signed by the Licensing Division.	025721			

		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)
		TYLER, TX 75701 (City, town, state, zip)
С		<b>RUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these s 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:
	I	ANADARKO, OK
		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.

Accounting Period:	2022/1						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#					
	CEQUEL COMMUNICATIONS LLC 02572'						
D Area Served	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.						
	CITY OR TOWN	STATE					
First	ANADARKO	OK					
Community							
Add Rows as Necessary							

	LEGAL NAME OF OWNER OF CABLE SYSTEM:									
Name	CEQUEL COMMUNICATIONS LLC									
_	SECONDARY TRANSMISSION	SERVICE: SU	BSCRIB	ERS AND RAT	ES					
E	In General: The information in s	pace E should	cover al	I categories of s	secondary					
	system, that is, the retransmission									
Secondary Transmission	about other services (including p last day of the accounting period	, , ,	,		,		ose existii	ng on the		
Service: Sub-	Number of Subscribers: Both						e system,	broken		
scribers and	down by categories of secondary	transmission s	service.	In general, you	can com	oute the number	of subscri	bers in		
Rates	each category by counting the nu							charged		
	separately for the particular serve Rate: Give the standard rate c							a 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. Note									
	categories, that person or entity			-		-				
	subscriber who pays extra for ca						•			
	first set" and would be counted o									
	Block 2: If your cable system I									
	printed in block 1 (for example, ti									
	with the number of subscribers a sufficient.	nd rates, in the	e right-ha	and DIOCK. A two	or three	e-wora descriptio	n oi the se	ervice is		
		DCK 1					BLOCK			
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE		RATE	CAT	EGORY OF SEF	VICE	NO. OF SUBSCRIBERS	RAT	
	Residential:						-			
	<ul> <li>Service to first set</li> </ul>		76	50.00						
	<ul> <li>Service to additional set(s)</li> </ul>									
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		28	45.95						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC		NSMISS	IONS: RATES						
F	In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission									
•										
Services	service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the									
Other Than	amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis,									
Secondary ransmissions:	enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed									
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									
	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) descrip									
		BLO						BLOCK 2		
	CATEGORY OF SERVICE	RATE		ORY OF SERV		RATE	CATEG	ORY OF SERVICE	RATE	
	Continuing Services:	47.00		tion: Non-resid	uential					
	Pay cable     Add'l channel	17.00		el, hotel						
	Pay cable—add'l channel     Eire protection	19.00		nmercial						
	Fire protection     Burglar protection		-	cable add'l ch	annel					
	•Burglar protection Installation: Residential		-	cable-add'l cha						
	• First set	99.00		glar protection						
	Additional set(s)	99.00 25.00		giar protection						
	• FM radio (if separate rate)	25.00		connect		40.00				
	• Converter			connect		40.00				
				let relocation		25.00				
	1			iot i ciocationi		23.00				
			• Mov	/e to new addre	ss	99.00				

Name	LEGAL NAME OF OWNER	OF CABLE SYSTEM:		SYSTEM					
Name	CEQUEL COMMUNICATIONS LLC								
	PRIMARY TRANSMITTERS: TELEVISION								
G Primary nsmitters: elevision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, <b>Substitute Basis Station</b>	dentify every television station (including tem during the accounting period, <i>except</i> is in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.67 as explained in the next paragraph. Is: With respect to any distant stations carules, regulations, or authorizations:	(1) stations carried only on a part- e carriage of certain network prog 1(e)(2) and (4))]; and (2) certain sta	time basis under rams [sections ations carried on a					
	station was carried only o			<i></i>					
		also in space I, if the station was carried tion concerning substitute basis stations,							
	Column 1: List each stati	on's call sign. <i>Do not</i> report origination p	rogram services such as HBO, ES	PN, etc. Identify each					
	"WETA-2" as the same or	ed with a station according to its over-the n the form.	e-air designation. For example, rep	oort multistream					
		nel number the FCC assigned to the tele <sup>.</sup> VRC is channel 4 in Washington, D.C.	vision station for broadcasting ove	r the air in its community					
	Column 3: Indicate in eac	ch case whether the station is a network s							
		tering the letter "N" (for network), "N-M" (f t), "E" (for noncommercial educational), o							
	For the meaning of these	terms, see page (iv) of the general instru	ctions in the paper SA1-2 form.						
		ion of each station. For U.S. stations, list adian stations, if any, give the name of th	•	-					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION					
	KAUT-1	43	<u>I</u>	OKLAHOMA CITY, OK					
	KETA-1	13	E	OKLAHOMA CITY, OK					
ows as Necessary	КОСВ-1	34	I	OKLAHOMA CITY, OK					
	KOCM-1	46	I	NORMAN, OK					
	KOCO-1	5	Ν	OKLAHOMA CITY, OK					
	КОКН-1	25	Ι	OKLAHOMA CITY, OK					
	KOPX-1	62	I	OKLAHOMA CITY, OK					
	KSBI-1	52	I	OKLAHOMA CITY, OK					
	KSWO-1	7	N	LAWTON, OK					
	KTBO-1	14	I	OKLAHOMA CITY, OK					
	KTUZ-1	30	I	SHAWNEE, OK					
	KWTV-1	9	N	OKLAHOMA CITY, OK					
	KFOR-1								
		27	N	OKLAHOMA CITY. OK					
		27	<u>N</u>	OKLAHOMA CITY, OK					
		27	N	OKLAHOMA CITY, OK					
		27	<u>N</u>	OKLAHOMA CITY, OK					
		27	N						
		27	N						
		27	N						
		27	N						
			N						
			N						
			N						

EGAL NAME OF								SYSTEM
	t every radio s	tation ca	rried on a separate and discre nerally receivable by your cable				ied on an	Н
eceivable if (1) on the basis of i For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation about m. dentify the call tate whether t the radio stati this by placing Sive the statior	/ the sys be receivent t the Cop sign of e he statio ion's sign a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. In is AM or FM. hal was electronically processes mark in the "S/D" column. on (the community to which the the community with which the	the system's hea ystem's FM anter is point, see page ed by the cable sy e station is licens	adend, and (2) nna, during ce e (v) of the gen 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	
						-,-		
						·		
		<b> </b>						

Accounting Perio	d: 2022/1						FOR	M SA1-2E. PAGE 5.
N	LEGAL NAME OF OWNER OF O	CABLE SYST	EM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LL	.C					025721
_	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG				
	In General: In space I, identif	fy every non	network televisi	on program, broadcast by a	distant static	on, that your	cable system	carried on a
	substitute basis during the ac							
Substitute	explanation of the programmi	-			general instru	ictions in the	e paper SA1-2	2 form.
Carriage: Special	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE							
Statement and	<ul> <li>During the accounting peri</li> </ul>	•	r cable system	carry, on a substitute basis	s, any nonne	twork televi	ision program	
Program Log	broadcast by a distant stat	ion?					YES	X NO
	Note: If your answer is "No,	" leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	ust complete	e the prograr	n
	log in block 2.							
	2. LOG OF SUBSTITUTE							
	In General: List each subst				vherever pos	sible, if thei	ir meaning is	
	clear. If you need more space			ows to the tables. sion program ("substitute p	vrogram") tha	t during the	e accounting	
	period, was broadcast by a							
	under certain FCC rules, reg	gulations, o	r authorizations	s. See page (v) of the gene	ral instruction	ns for furthe	er informatior	
	Do not use general categori		vies" or "baske	tball." List specific program	titles, for ex	ample, "I Lo	ove Lucy" or	
	"NBA Basketball: 76ers vs. Column 2: If the program		Icast live enter	"Yes." Otherwise enter "N	o."			
				sting the substitute program				
				e community to which the			e FCC or, in	
	the case of Mexican or Can			3		,	with the mean	th
	first. Example: for May 7 giv		when your syst	em carried the substitute p	orogram. Use	numerais,	with the mor	าเท
			substitute prog	gram was carried by your c	able system.	List the tim	nes accurate	ly
	to the nearest five minutes.	Example: a	program carrie	ed by a system from 6:01:1	5 p.m. to 6:2	8:30 p.m. s	should be	-
	stated as "6:00–6:30 p.m."	vr"D" if the	liated program	was substituted for progra	mming that w	ourovotom	waa raquira	d
	to delete under FCC rules a			was substituted for progra ring the accounting period:				
	was substituted for program							
	effect on October 19, 1976.							
					\ <b>\</b> /µ	EN SUBSTI		
	s	UBSTITUT	E PROGRAM			IAGE OCC		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	-	TIMES — TO	DELETION
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							_	
							-	

Accounting Period:	2022/1	FORM SA	1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	S	YSTEM ID: 02572
<b>K</b> 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 transm (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.	nission service Imount, see	2,324.93 pss receipts)
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 \$2 • Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than s527,600. See page (vi) of the general instructions located in the paper SA1-2 form for more information.	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 t accounting period is \$52.00.	his 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 \$137,1	00)	
	1. Base amount under statutory formula		
	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		
	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	4. Daughu Fao Daughla fao Assaurting Davied (ferm kinds 4. 0 0 h )	52.00	
Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)		
	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 See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for m		

Accounting Period:	2022/1				FORM SA1-2E. PAGE 7
Name		OWNER OF CABLE SYSTEM:			SYSTEM ID# 025721
M Channels	to its subscrib 1. Enter the to system car 2. Enter the to on which th	ers, and (2) the cable system otal number of channels on wh ried television broadcast station otal number of activated channe ne cable system carried televis	ions	he accounting period.	13 128
N Individual to Be Contacted		TO BE CONTACTED IF FUR ct about this statement of acc	RTHER INFORMATION IS NEEDED (Identify a sount.)	an individual	
for Further Information	Name	RODNEY HASKINS	)	Telephone (903)	579-3152
	Address 	3027 S SE LOOP 32 (Number, street, rural route, apa TYLER, TX 75701 (City, town, state, zip)	-		
	Email	RODNEY.HAS	SKINS@ALTICEUSA.COM	Fax (optional	
0	CERTIFICATIO	N (This statement of account i	must be certified and signed in accordance wi	ith Copyright Office regulations)	
Certification			x one, <i>but only one</i> , of the boxes.) <b>r partnership)</b> I am the owner of the cable syste	em as identified in line 1 of space B; or	
		in line 1 of space B and that	the owner is not a corporation or partnership; or		
	<ul> <li>I have examin are true, comp</li> </ul>	in line 1 of space B. ed the statement of account an	r (if a corporation) or a partner (if a partnership) nd hereby declare under penalty of law that all sta f my knowledge, information, and belief, and are n	atements of fact contained herein	Cadle system
			X /s/ Alan Dannenbaum Enter an electronic signature on the line above Enter signature using an "/s/ signature" (e.g., /		
		Typed or printe	ed name: ALAN DANNENBAUM		
		Title:	SVP, PROGRAMMING (Title of official position held in corporation or partnership	p)	
		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.

Accounting Period: 2022/1	FORM SA1-2E. PAGE 8
EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
CEQUEL COMMUNICATIONS LLC	025721
<ul> <li>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 following 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 subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."     </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
YES. Enter the total here and list the satellite carrier(s) below.       \$         Name       Mailing Address	
INTEREST ASSESSMENT 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. Line 1 Enter the amount of late payment or underpayment	Q 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>* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.</li> <li>** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.</li> </ul>	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
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 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.