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 ACCO	UNT FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to	
for Secondary Transmissions b	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 PERIO	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31		

Accounting Period Instructions: B 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. Ust 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. 040658 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM CeQUEL COMMUNICATIONS LLC BUSINESS NAME(s) OF OWNER OF CABLE SYSTEM (IF DIFFERENT) UNDERSYNAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
B 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. Cowner 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. 040658 LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM CEQUEL COMMUNICATIONS LLC BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT) BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
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CEQUEL COMMUNICATIONS LLC BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
CEQUEL COMMUNICATIONS LLC BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
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)
C INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these 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
System IDENTIFICATION OF CABLE SYSTEM:
BUENA VISTA CORRECTIONAL FACILITY
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
Nume	CEQUEL COMMUNICATIONS LLC	0400
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 sing st will serve as a form of system identification hereafter kno
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile identified city.	home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	BUENA VISTA	СО
Community	(BUENA VISTA CORR)	
dd Rows as Necessary		

								FOR		2E. PAGE	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM									
	CEQUEL COMMUNICA	TIONS LLC							Ľ)4065	
-	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES										
E	In General: The information in s										
Secondary	system, that is, the retransmission										
Secondary Transmission	about other services (including particular about other services (including particular about the accounting period		-		nose exis	ing on the					
Service: Sub-	,	·				,	ole system	, broken			
scribers and	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in										
Rates	each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).										
	Rate: Give the standard rate of					•	,	ge and the			
	unit in which it is generally billed	-	-	•				-	9		
	category, but do not include disc										
	Block 1: In the left-hand block			-		•					
	systems most commonly provide that applies to your system. Not										
	categories, that person or entity			-		-					
	subscriber who pays extra for ca					d in the count un	der "Servi	ce to the			
	first set" and would be counted of	0			()	ann daa that ana	differenti	wave these			
	Block 2: If your cable system printed in block 1 (for example, the system system)	-		•							
	with the number of subscribers a					•					
	sufficient.		-								
	BLO	OCK 1 NO. OF					BLOCK				
	CATEGORY OF SERVICE	SUBSCRIBI		RATE	CATE	EGORY OF SER	VICE	NO. OF SUBSCRIB		RAT	
	Residential:						-				
	Service to first set		0	-							
	 Service to additional set(s) 										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		21	42.41							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC		NSMIS		s						
-	In General: Space F calls for ra					ll your cable sys	tem's serv	vices that wer	e		
F	not covered in space E, that is, t										
Services	service for a single fee. There a furnished at cost or (2) services	•			•		0 (
Other Than									_		
Secondary	amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.										
Secondary ransmissions:	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										
ransmissions: Rates	5	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.									
	listed in block 1 and for which a				ished. List	these other serv					
	listed in block 1 and for which a	ption and inclue	de the ra		ished. List	these other serv		PL OCK	< 2		
	listed in block 1 and for which a brief (two- or three-word) descrip	ption and inclue BLO	de the ra	te for each.			CATEG			RAT	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE	ption and inclue BLO	de the ra CK 1 CATEG		VICE	RATE	CATEG	BLOCK DRY OF SER		RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip	ption and inclue BLO	de the ra CK 1 CATEG Installa	te for each. ORY OF SER	VICE		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot	te for each. ORY OF SER tion: Non-res	VICE		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot • Con	te for each. ORY OF SER tion: Non-res	VICE		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot • Con • Pay	te for each. ORY OF SER tion: Non-res el, hotel nmercial	VICE idential		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay	tte for each. ORY OF SER tion: Non-res el, hotel nmercial cable	VICE idential		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire	ORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch	VICE idential		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	ORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch protection	VICE idential		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burn Other s	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection	VICE idential		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Bur Other s • Rec	ORY OF SER tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection ervices:	VICE idential		CATEG			RATI	
	listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE 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)	ption and inclue BLO	de the ra CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burn Other s • Rec • Disc	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection ervices: onnect	VICE idential		CATEG			RAT	

	2022/1			FORM SA1-2E. PAGE 3				
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#				
Name	CEQUEL COMMUNIC	ATIONS LLC		040658				
	PRIMARY TRANSMITTERS: TELEVISION							
G Primary Transmitters: Television	carried by your cable syster FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations: 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 informatio Column 1: List each station multicast stream associated "WETA-2" as the same on t Column 2: Give the channel 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 location	Iso in space I, if the station was carrie n concerning substitute basis stations 's call sign. <i>Do not</i> report origination with a station according to its over-th	t (1) stations carried only on a part-tin the carriage of certain network progra 51(e)(2) and (4))]; and (2) certain stati arried by your cable system on a sub the Special Statement and Program L ed both on a substitute basis and also , see page (v) of the general instruction program services such as HBO, ESP e-air designation. For example, report evision station for broadcasting over t station, an independent station, or a (for network multicast), "I" (for independent or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station i	me basis under ms [sections ions carried on a stitute program og)—if the on some other ons. N, etc. Identify each rt multistream he air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	KBDI-1	12	E	BROOMFIELD, CO				
			-					
	KCEC-1	14		DENVER, CO				
ows as Necessary	KCNC-1	4	N	DENVER, CO				
	KDVR-1	31	I	DENVER, CO				
	KMGH-1	7	N	DENVER, CO				
	KUSA-1	9	N	DENVER, CO				

EGAL NAME OF									SYSTEM 040
	t every radio s	station ca) arried on a separate and disc anerally receivable by your ca						н
eceivable if (1) on the basis of i for detailed info paper SA1-2 for Column 1: lo Column 2: S	it is carried by monitoring, to prmation abou m. lentify the call tate whether t	y the sys be rece at the Co sign of the statio	II-Band FM Carriage: Under stem whenever it is received a ived at the headend, with the pyright Office regulations on each station carried. on is AM or FM.	at s th	the system's he ystem's FM ante is point, see pag	adend, and (: enna, during c ge (v) of the g	2) it can certain s eneral ir	be expected, tated intervals. nstructions in the.	Primary Transmitter: Radio
ignal, indicate Column 4: G	this by placing ive the statior	g a chec n's locati	nal was electronically proces k mark in the "S/D" column. ion (the community to which t the community with which th	the	e station is licen	sed by the FC			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
				Π					

	d: 2022/1						FORM	I SA1-2E. PAGE 5.
l	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS L	LC					040658
	SUBSTITUTE CARRIAGE	E: SPECIA		NT AND PROGRAM LO	G			
	In General: In space I, ident	ifv everv noi	nnetwork televi	sion program, broadcast by	a distant stat	tion. that you	r cable svst	tem carried on a
-	substitute basis during the a							
Substitute	explanation of the programm	ing that mu	st be included i	n this log, see page (v) of t	he general ins	structions in th	he paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMENT		RNING SUBS	TITUTE CARRIAGE				
Special Statement and	 During the accounting per 	iod, did yoι	ur cable systen	n carry, on a substitute ba	sis, any nonr	etwork telev	rision progr	am
Program Log	broadcast by a distant sta	tion?					YES	× NO
i rogram 20g	Note: If your answer is "No		roct of this na	ao blank. If your answer is	"Voc" vou r			
	-	, leave life	lest of this pa	ge blank. If your answer is	s res, your		te the prog	Ian
	log in block 2. 2. LOG OF SUBSTITUTE		MS					
	In General: List each subst			ate line. Use abbreviations	s wherever po	ossible, if the	eir meaning	a is
	clear. If you need more spa	ce, please	add additional	rows to the tables.			-	-
				vision program ("substitute				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general categor							
	"NBA Basketball: 76ers vs.	Bulls."				1 /	,	
				er "Yes." Otherwise enter				
				asting the substitute progr he community to which th		ensed by th	e ECC or i	in
	the case of Mexican or Car							
				stem carried the substitute			with the m	nonth
	first. Example: for May 7 giv		a aubatituta ar		r achla avetav			tob.
	to the nearest five minutes.			ogram was carried by you ied by a system from 6:01				ately
	stated as "6:00–6:30 p.m."	Example: (a program can			.20.00 p.iii. (
				n was substituted for prog				
	to delete under FCC rules a was substituted for program							ogram
	effect on October 19, 1976.		your system wa	as permitted to delete und	er FCC fules	and regulati		
								1
						N SUBSTIT		
		JBSTITUT 2. LIVE?	E PROGRAM					
	1. TITLE OF PROGRAM	Z. LIVE?				AGE OCCU		7. REASON FOR DELETION
		Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	AGE OCCU 6. TIN FROM —		
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	
		Yes or No		4. STATION'S LOCATION	5. MONTH	6. TIN	MES	

Accounting Period:	2022/1	FORM SA1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
	CEQUEL COMMUNICATIONS LLC	040658
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. End 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.	ission service
L Copyright Royalty Fee	 COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less. Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. 	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 thi 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 \$137,10)	0)
	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 \$527,6	00)
	1. Enter the amount of gross receipts from space K	
	2. Base amount under statutory formula	
	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 For and		
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 o See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more	

Accounting Period:	2022/1				FORM SA1-2E. PAGE 7.
Name		VNER OF CABLE SYSTEM: UNICATIONS LLC			SYSTEM ID# 040658
M Channels	to its subscribers, a 1. Enter the total n	and (2) the cable system's to a sumber of channels on which	total numl h the cabl	is on which the cable system carried television broadcast stations per of activated channels during the accounting period. le	. 6
	on which the cab	number of activated channel le system carried television st services	broadcas	st stations	23
N Individual to Be Contacted		BE CONTACTED IF FURTH out this statement of account		RMATION IS NEEDED (Identify an individual	
for Further Information	Name	RODNEY HASKINS		Telephone	903) 579-3152
	-	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	I, hereby certify that (Check o	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	
	in lin X (Officer in lin • I have examined t	e 1 of space B and that the c or partner) I am an officer (e 1 of space B. the statement of account and and correct to the best of m	owner is n (if a corpo l hereby d	artnership) 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.	wwner 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:		8/23/2022	

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	04065
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 Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	
 * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. 	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number First community served Accounting period	

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.