This form is effective beginning with the January 1 to June 30, 2017, accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEM	FNT	OF ACCOUNT	FOR COPYRI	GHT OFFICE USE ONLY	Return completed workbook by email to			
		ransmissions by	DATE RECEIVED	AMOUNT	_			
Cable Systems (Short Form) General instructions are located in the first tab of this workbook.			9/15/22	\$ ALLOCATION NUMBER	<u>coplicsoa@copyright.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.			
A	ACC	OUNTING PERIOD COVERED	BY THIS STATEMENT: ()	(YYY/(Period))				
		2022/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31				
Accounting Period		20221	20221 Barcode Data Filing Period (optional - see instructions)					
В		Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent or		sidiary of another corporation, give the full corp	porate title			
Owner		List any other name or names under whic		the cable system.				
		If there were different owners during the single statement of account and royalty fe		n the last day of the accounting period should sunting period.	ubmit a			
		Check here if this is the system's first filing	g. If not, enter the system's ID numbe	r assigned by the Licensing Division.	060206			
		LEGAL NAME OF OWNER/MAILING	G ADDRESS OF CABLE SYSTEM	Λ				
		CEQUEL COMMUNICATIONS LLC						
		BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFEREN	Т)				
		SUDDENLINK COMMUNICATIONS						
		MAILING ADDRESS OF OWNER OF	CABLE SYSTEM					
		3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite nu	imber)					
	TYLER, TX 75701							
	INST	(City, town, state, zip)	ass or trade names used to id	entify the business and operation of the	system unless these			
C				the system, if different from the address				
System	1	IDENTIFICATION OF CABLE SYSTEM:						
		ST. MARIES, ID MAILING ADDRESS OF CABLE SYSTEM						
	2							

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.

City, town, state, zip code)

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#					
	CEQUEL COMMUNICATIONS LLC	060206					
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including s 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 k 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 th						
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or n identified city.	obile home parks should be reported in parentheses below the					
	CITY OR TOWN	STATE					
First	ST. MARIES	ID					
Community							
dd Rows as Necessary							

Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:						TEM ID			
	CEQUEL COMMUNICAT			06020								
-	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCR	IBERS AND R	ATES							
E	In General: The information in space E should cover all categories of secondary transmission service of the cable											
	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the											
Secondary Fransmission	last day of the accounting period						hose exis	ting on the				
Service: Sub-	Number of Subscribers: Bot						ole system	n, broken				
scribers and	down by categories of secondar						,	,				
Rates	each category by counting the n		-					s charged				
	separately for the particular serv					•	,	as and the				
	Rate: Give the standard rate of unit in which it is generally billed	-	-	•				-				
	category, but do not include disc	· ·		,	ny standa		o within a					
	Block 1: In the left-hand block				ies of sec	condary transmis	sion servi	ce that cable				
	systems most commonly provide											
	that applies to your system. Not			-		-						
	categories, that person or entity subscriber who pays extra for ca											
	first set" and would be counted of											
	Block 2: If your cable system					service that are	different	from those				
	printed in block 1 (for example, t					•	,					
	with the number of subscribers a	and rates, in th	e right-h	nand block. A tv	/o- or thre	e-word descript	ion of the	service is				
	sufficient. BLC	DCK 1					BLOC	< 2				
		NO. OF		DATE	0.01			NO. OF	DATE			
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEF	RVICE	SUBSCRIBERS	RATE			
	Service to first set		37	50.00								
	Service to additional set(s)		- 37	50.00								
	• FM radio (if separate rate)											
	Motel, hotel											
	Commercial		10	45.95								
	Converter			43.33								
	Residential											
	Non-residential											
	Honrooldoniidi											
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	5							
F	In General: Space F calls for ra		,		•							
•	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	enter only the letters "PP" in the rate column.											
ransmissions: 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											
Rales	listed in block 1 and for which a											
	brief (two- or three-word) descrip											
		BLO	CK 1					BLOCK 2	BLOCK 2			
	CATEGORY OF SERVICE	RATE		GORY OF SER	/ICE	RATE	CATEG	ORY OF SERVICE	RATE			
	Continuing Services:		Installa	ation: Non-resi	dential							
	• Pay cable	17.00	• Mo	tel, hotel								
	 Pay cable—add'l channel 	19.00	• Co	mmercial								
	Fire protection		• Pay	/ cable								
	 Burglar protection 		• Pay	/ cable-add'l ch	annel							
	Installation: Residential		• Fire	e protection								
	• First set	99.00	• Bur	glar protection								
	 Additional set(s) 	25.00	Other	services:								
	• FM radio (if separate rate)		• Re	connect		40.00						
	Converter		• Dis	connect								
			• Ou	tlet relocation		25.00						
			• Mo	ve to new addre	ess	99.00						

				FORM SA1-2E. PAGE 3					
Name	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM ID#					
	CEQUEL COMMUNIC	ATIONS LLC		060206					
	PRIMARY TRANSMITTERS: TELEVISION								
G Primary ransmitters: Television	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), 76.61(e)(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 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 noncommercial educational multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning								
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION					
	KAYU-1	28	<u> </u>	SPOKANE, WA					
	KHQ-1	6	N	SPOKANE, WA					
dd Rows as Necessary		6.2	I-M						
Rows as Necessary	KHQ-2			SPOKANE, WA					
ws as Necessary	KREM-1	2	N	SPOKANE, WA					
ws as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
is as Necessary	KREM-1	2	N	SPOKANE, WA					
ws as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
ws as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
ws as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
ws as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
ows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
ows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
ows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
I Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
I Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					
d Rows as Necessary	KREM-1	2	N	SPOKANE, WA					
	KSPS-1	7	E	SPOKANE, WA					
	KUID-1	12	E	MOSCOW, ID					

EGAL NAME OF									SYSTEM 060
	t every radio s	station ca	arried on a separate and disc enerally 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 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 th 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	
	7 UN OF 1 W	5,6		Ħ	OF LE OFON		5,0		
			·					·	
								·	

	od: 2022/1						FORM	A SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS L	LC					060206
	SUBSTITUTE CARRIAGE	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
	In General: In space I, ident	ifv everv nor	nnetwork televi	s <i>ion program</i> , broadcast by	a distant stat	tion. that voi	ur cable svs	tem 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 t	he general ins	structions in	the paper S	A1-2 form.
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE				
Special	 During the accounting per 	iod. did vou	ur cable svsten	n carrv. on a substitute ba	sis. anv nonr	network tele	vision proa	ram
Statement and	broadcast by a distant sta				, ,			XNO
Program Log	-						YES	
	Note: If your answer is "No log in block 2.	," leave the	rest of this pa	ge blank. If your answer is	s "Yes," you r	nust comple	ete the prog	Iram
	2. LOG OF SUBSTITUTE		MS					
	In General: List each subst			ate line. Use abbreviations	s wherever po	ossible. if th	eir meaning	a is
	clear. If you need more spa					,		, ,
				/ision program ("substitute				
	period, was broadcast by a							
	under certain FCC rules, re Do not use general categor							
	"NBA Basketball: 76ers vs.		DVIES OF DASK	etball. List specific progra	ani ulles, ioi e	stample, T	Love Lucy	01
			dcast live, ente	er "Yes." Otherwise enter '	"No."			
				asting the substitute progr				
				he community to which th			ne FCC or,	in
	the case of Mexican or Car			stem carried the substitute			with the n	aanth
	first. Example: for May 7 give	•	when your sys		e program. Os		, with the fi	Ionun
			e substitute pro	ogram was carried by you	r cable syster	n. List the t	mes accura	ately
	to the nearest five minutes.							
	stated as "6:00-6:30 p.m."							
				n was substituted for program				
	to delete under FCC rules a							ogram
				as permitted to delete und	ier et .t. rilles			
	effect on October 19, 1976.		your system w	as permitted to delete und	ler FCC rules	anu regula		
	effect on October 19, 1976.		your system wa	as permitted to delete und	ier FCC rules	anu regula		
					WHE		TUTE	
		UBSTITUT	E PROGRAM		WHE CARRI	N SUBSTI	IUTE JRRED	7. REASON FOR DELETION
					WHE	N SUBSTI	TUTE	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	
	SI	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S		WHE CARRI 5. MONTH	N SUBSTI AGE OCCU 6. TI	TUTE JRRED MES	

Accounting Period:	2022/1 FORM SA1-2	2E. PAGE 6.
Name		TEM ID#
Hume	CEQUEL COMMUNICATIONS LLC	060206
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 total c all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se 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.	56.55 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 \$263,800 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than s527,600 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-month	
	accounting period is \$52.00.	<u>52.00</u> 0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	
	1. Base amount under statutory formula \$ 263,800.00	
	2. Enter amount of gross receipts from space K	
	3. Subtract line 2 from line 1	
	4. Enter the amount of gross receipts from space K	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	
		0.00
	8. Interest charge. Enter the amount from line 4, space Q, page 8 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	0.00
	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	
	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)	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	
	FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	67.00
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.	

Accounting Period:	2022/1					FORM SA1-2E. PAGE 7.
Name		WNER OF CABLE SYSTEM: IUNICATIONS LLC				SYSTEM ID# 060206
M Channels	to its subscribers, 1. Enter the total is system carried to 2. Enter the total is	and (2) the cable system's number of channels on which	total num h the cab 		stations	7
		-				130
N Individual to Be Contacted		BE CONTACTED IF FURTH pout this statement of accou		RMATION IS NEEDED (Identify an individual		
for Further Information	Name	RODNEY HASKINS		Τ	elephone	(903) 579-3152
	Address	3027 S SE LOOP 323 (Number, street, rural route, apart TYLER, TX 75701 (City, town, state, zp)		e number)		
	Email	RODNEY.HAS	KINS@A	TICEUSA.COM Fax (optional)		
0				tified and signed in accordance with Copyright Office re	gulations))
Certification		d, hereby certify that (Check other than corporation or p		p) I am the owner of the cable system as identified in line	1 of space	e B; or
				artnership) I am the duly authorized agent of the owner of t a corporation or partnership; or	the cable	e system as identified
		r or partner) I am an officer ne 1 of space B.	(if a corpo	ation) or a partner (if a partnership) of the legal entity iden	tified as o	wner of the cable system
		, and correct to the best of m		eclare under penalty of law that all statements of fact conta ge, information, and belief, and are made in good faith.	iined here	sin
			X	/s/ Alan Dannenbaum		
				electronic signature on the line above to certify this statemen ature using an "/s/ signature" (e.g., /s/ John Smith)	t.	
		Typed or printed	d name:	ALAN DANNENBAUM		
		Title: (Title of o		ROGRAMMING neld 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.

EQUEL COMMUNICATIONS LLC D60201 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 sectores and amounts onlected from subscribers end 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.° P 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. Special Statement Concerning Gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? N Mo Special Statement Maing Address Name Maining Address Name Maining Address During the tox 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	ounting Period: 2022/1	FORM SA1-2E. PAGE 8
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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? Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carriers(s) below. Image: Comparison of the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers (s) below. Image: Comparison of cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers (s) below. Image: Comparison of cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers (s) below. Image: Comparison of cable system exclude any amounts of gross receipts for secondary transmissions and and the paper SA1-2 form.	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-	- Special Statement Concerning Gross
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Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6 - * 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		
Line 3 Multiply line 2 by the number of days late and enter the sum here		
in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	Line 3 Multiply line 2 by the number of days late and enter the sum here	
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.	in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	
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