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.

SA3E Long Form

Return completed workbook by email to:

coplicsoa@copyright.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	AC	C	CC	co	JNT	IN) P	ER	OD) C	ov	ER	ED	B	Y TI	HIS	5 ST	ТАТ	ſEN	MEI	NT:																
Accounting Period			2	20	22/	1																															
B Owner	rate	ate	e ti L	Give title List <i>If th</i>	of the any c ere и state	sut thei ere nen	sidia nan <i>diffe</i>	ary, ne o <i>rent</i> acco	not i r na <i>owi</i> unt i	that mes <i>ners</i> and	of the solution of the solutio	he p der v <i>ring t</i> <i>alty i</i>	oarer whic <i>the a</i> <i>fee µ</i>	nt co ch th <i>acco payl</i>	orpo he ov counti men	oratio wnei <i>ting µ</i> nt co	on. r coi <i>perio</i> verii	nduc od, o ng th	cts ti o <i>nly</i> ne el	he b <i>the</i> entire	ousin <i>own</i> e acc	iess ier or count	ubsidia of the <i>n the l</i> a ting pe	cabl ast d eriod.	e sys ay of	tem. <i>the a</i>	acc	ouni	ting j	oerioo	l sho					06	0248
	LI														ss o LLC		ABL	.E S`	YST	ГЕМ	I																
																																	06	i02	48	20	221
																																	06	0248	B	202	2/1
					27 S LEF	-				323	\$																										
С										0													entify he sy										,				e
System	1	1			ITIFIC UCI)F C	ABL	E S'	YSTE	EM:																									
			N	MAI	ING	ADD	RES	s oi	CA	BLE	SY	STE	M:																								
	2	2	()	(Nun	ber, sl	reet,	ural r	oute	apar	tmer	nt, or	suite	num	ıber)																							
			(0	(City	town,	state	zip c	ode)																													
D								•	lete	e sp	ace	∍D i	instr	truc	tion	IS, S	ee p	page	e 1k	b. Id	lent	ify o	nly th	e frs	st co	mmu	init	y se	erve	d bel	ow a	and	relis	t on p	bag	e 1b	
Area Served	wit																					0															
First					/ OR UCI																	-															
Community					-			for	ron	orti	ing	corr		uniti		if vo	u re	nor	t m	ultir			nel lii	2011	ne ir	Sn	200	G									
	-				/ OR				-		ng v	COII	intu		103 1	ii yo	uie	pon		սոր				TATE			ace		HL	NE U	Р			S	JB	GRP#	ŧ
	Alc		_							_/														MD	-					A .	-				-		
Sample	All	llia	ian	nce																				MD						в					:	2	
	Ge	ieri	rin	ng																				MD						в					;	3	
			_	_		_	_	_	_	_	_		_	_			_		_	_	_							_	_			_		_	_		
Privacy Act Notic form in order to pro- numbers. By provid search reports pre- completed record of	ocess ding F pared	s y PII ed fo	yoı PII, I for	our s , you or the	tatem are a publ	ent o gree c. Tl	f acc ng to e eff	oun the ect o	rout	is a ine i t pro	ny pe use c ovidin	ersor of it to ng the	nal in to est ie PII	inforr stabli II req	matio lish ai queste	on tha Ind m ted is	at ca nainta s that	in be ain a t it ma	use pub ay de	ed to olic re elay	iden ecoro proc	tify or 1, whi essin	trace ch incl ig of yo	an ind udes our sta	dividu appea ateme	al, su aring ent of	ch a in th acc	as na ne O ount	ame, ffce's and	addre public	ss an c inde	d tel exes	ephor and ir	ie			

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

9/15/2022

STATEMENT OF ACCOUNT for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
CEQUEL COMMUNICATIONS LLC			060248	
Instructions: List each separate community served by the cable system. A "community in FCC rules: "a separate and distinct community or municipal entity (including unincorpor areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first of system identification hereafter known as the "first community." Please use it as the first	brated communiti t community that	es within unincorp you list will serve	orated	D Area Served
Note: Entities and properties such as hotels, apartments, condominiums, or mobile hom below the identified city or town.	e parks should b	e reported in pare	ntheses	
If all communities receive the same complement of television broadcast stations (i.e., on all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each rel designated by a number (based on your reporting from Part 9).	e column blank. I	f you report any st	ations	
When reporting the carriage of television broadcast stations on a community-by-community-hannel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns be	a subscriber gro			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#]
TRUCKEE	СА			First
EL DORADO COUNTY WEST	СА			Community
NEVADA COUNTY SUMMIT	СА			
NORTH STAR - PLACER	СА			
OLD GREENWOOD	СА			
PLACER COUNTY SUMMIT	CA			See instructions for
PLACER COUNTY TRUCKEE	CA			additional information
PLACER COUNTY WEST	CA			on alphabetization.
				Add rows as necessary.
				I

		(/	/	1
	J	1	/	/	1
	J	ſ	/	1	1
	J	1	1	/	1
	ļ	Ţ		1	1

Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	YSTEM IC					
Name	CEQUEL COMMUNICAT	TIONS LLC							06024					
_	SECONDARY TRANSMISSION	SERVICE: S	UBSCR	RIBERS AND F	RATES									
E	In General: The information in s	space E should	d cover	all categories of	of seconda	ry transmission	service of	the cable						
	system, that is, the retransmissi													
Secondary	about other services (including p						those exis	sting on the						
Transmission	last day of the accounting period						blo ovetor	n brokon						
Service: Sub- scribers and	Number of Subscribers: Bot down by categories of secondar						-							
Rates	each category by counting the n													
	separately for the particular serv		-			•	-							
	Rate: Give the standard rate of	-						-						
	unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.													
	Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable													
	systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different													
	categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential													
	subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the													
	first set" and would be counted once again under "Service to additional set(s)."													
	Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together													
						•	,	-						
	with the number of subscribers a sufficient.	and rates, in th	ie right-	nanu Diock. A	two- or three	ee-word descrip	uon oi uie	Service is						
		DCK 1		-			BLOC		-					
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEF	RVICE	NO. OF SUBSCRIBERS	RATE					
1	Residential:						-							
	Service to first set		9,132	\$ 50.00										
	 Service to additional set(s) 													
	• FM radio (if separate rate)													
	Motel, hotel													
	Commercial	171 \$ 45.9												
	Converter													
	Residential													
	Non-residential													
								•	1					
	SERVICES OTHER THAN SEC In General: Space F calls for ra		-		-		stom's sou	vices that were						
F	not covered in space E, that is,													
_						,	,							
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													
Services	furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis.													
Other Than	amount of the charge and the u	nit in which it is	s usuall					orogram basis,						
Other Than Secondary	amount of the charge and the up enter only the letters "PP" in the	nit in which it is rate column.		y billed. If any	rates are c	harged on a var	iable per-p	-						
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra	nit in which it is rate column. te charged by	the cab	y billed. If any i	rates are c each of the	harged on a var applicable serv	iable per-p ices listed							
Other Than Secondary	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services that	nit in which it is rate column. te charged by t your cable sy	the cab /stem fu	y billed. If any le system for e irnished or offe	rates are c each of the ered during	harged on a var applicable serv the accounting	iable per-p ices listed period tha	at were not						
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra	nit in which it is rate column. te charged by t your cable sy separate charg	the cab /stem fu ge was	y billed. If any t le system for e irnished or offe made or estab	rates are c each of the ered during	harged on a var applicable serv the accounting	iable per-p ices listed period tha	at were not						
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a	nit in which it is rate column. te charged by t your cable sy separate char ption and inclu	the cab vstem fu ge was de the i	y billed. If any t le system for e irnished or offe made or estab	rates are c each of the ered during	harged on a var applicable serv the accounting	iable per-p ices listed period tha	at were not ne form of a						
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a	nit in which it is rate column. te charged by t your cable sy separate charg	the cab vstem fu ge was de the i CK 1	y billed. If any t le system for e irnished or offe made or estab	rates are c each of the pred during lished. Lis	harged on a var applicable serv the accounting	iable per-p ices listed period tha rvices in th	at were not	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descri	nit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO	the cab vstem fu ge was de the i CK 1 CATEC	y billed. If any t le system for e urnished or offe made or estab rate for each.	rates are c each of the rred during lished. Lis	harged on a var applicable serv the accounting t these other se	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable	nit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO	the cab vstem fu ge was de the r CK 1 CATEC	y billed. If any the system for each or offer innished or offer made or estaburate for each.	rates are c each of the rred during lished. Lis	harged on a var applicable serv the accounting t these other se	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	nit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE	the cab ystem fu ge was de the r CK 1 CATE(Install • Mo	y billed. If any the system for each or offer made or estable for each.	rates are c each of the rred during lished. Lis	harged on a var applicable serv the accounting t these other se	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	nit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE \$ 17.00	the cab /stem fu ge was de the i CK 1 CATE(Install • Mo • Co • Pa	y billed. If any t ole system for e urnished or offe made or estab rate for each. GORY OF SEF ation: Non-reso otel, hotel mmercial y cable	rates are c each of the ered during lished. Lis RVICE sidential	harged on a var applicable serv the accounting t these other se	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection • Burglar protection	nit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE \$ 17.00	the cab ystem fu ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Pa	y billed. If any i ile system for e urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res otel, hotel mmercial y cable y cable-add'l c	rates are c each of the ered during lished. Lis RVICE sidential	harged on a var applicable serv the accounting t these other se	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential	nit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE \$ 17.00 \$ 19.00	the cab ystem fu ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Pa • Fire	y billed. If any i ole system for e urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res otel, hotel immercial y cable y cable-add'l c e protection	rates are c each of the ered during lished. Lis RVICE sidential	harged on a var applicable serv the accounting t these other se	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set	hit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE \$ 17.00 \$ 19.00 \$ 99.00	the cab ystem fu ge was de the r CK 1 CATEC Install • Mo • Co • Pa • Pa • Fir • Bu	y billed. If any i ole system for e urnished or offe made or estab rate for each. GORY OF SEF ation: Non-reso otel, hotel immercial y cable y cable y cable-add'l c e protection rglar protectior	rates are c each of the ered during lished. Lis RVICE sidential	harged on a var applicable serv the accounting t these other se	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	nit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE \$ 17.00 \$ 19.00	the cab ystem fu ge was de the i CK 1 CATEC Install • Mc • Co • Pa • Pa • Fin • Bu Other	y billed. If any i ile system for e urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res otel, hotel mmercial y cable y cable-add'l c e protection rglar protectior services:	rates are c each of the ered during lished. Lis RVICE sidential	harged on a var applicable serv the accounting t these other se RATE	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Pay cable • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	hit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE \$ 17.00 \$ 19.00 \$ 99.00	the cab ystem fu ge was de the i CK 1 CATEO Install • Mo • Co • Pa • Pa • Fin • Bu Other • Re	y billed. If any i ile system for e urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res- otel, hotel mmercial y cable y cable-add'l c e protection rglar protectior services: connect	rates are c each of the ered during lished. Lis RVICE sidential	harged on a var applicable serv the accounting t these other se	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	hit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE \$ 17.00 \$ 19.00 \$ 99.00	the cab ystem fu ge was de the r CK 1 CATE(Install • Mo • Co • Pa • Pa • Fin • Bu Other • Re • Dis	y billed. If any i ole system for e urnished or offe made or estab rate for each. GORY OF SEF ation: Non-reso otel, hotel mmercial y cable y cable-add'I c e protection rglar protectior services: iconnect sconnect	rates are c each of the ered during lished. Lis RVICE sidential	harged on a var applicable serv the accounting t these other serv RATE	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					
Other Than Secondary ransmissions:	amount of the charge and the un enter only the letters "PP" in the Block 1 : Give the standard ra Block 2 : List any services tha listed in block 1 and for which a brief (two- or three-word) descri CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable • Pay cable • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	hit in which it is rate column. te charged by t your cable sy separate char ption and inclu BLO RATE \$ 17.00 \$ 19.00 \$ 99.00	the cab ystem fu ge was de the n CK 1 CATEC Install • Mo • Co • Pa • Pa • Fin • Bu • Bu • Cother • Re • Dis • Ou	y billed. If any i ile system for e urnished or offe made or estab rate for each. GORY OF SEF ation: Non-res- otel, hotel mmercial y cable y cable-add'l c e protection rglar protectior services: connect	rates are c each of the ered during lished. Lis RVICE sidential	harged on a var applicable serv the accounting t these other se RATE	iable per-p ices listed period tha rvices in th	at were not ne form of a BLOCK 2	RATE					

		ACCOUNTING PERI
F	FORM SA3E. PAGE 3.	
	LEGAL NAME OF OWNER OF CARLE SYSTEM:	SYSTEM ID#

	NER OF CABLE SY				SYSTEM ID	Name
CEQUEL COM					06024	ō
PRIMARY TRANSMIT						
carried by your cable FCC rules and regula	system during th tions in effect on	e accounting June 24, 198	period except (1 81, permitting the	1) stations carried e carriage of certa	and low power television stations) l only on a part-time basis under ain network programs [section: and (2) certain stations carried on a	G Primary
substitute program ba				corried by your o	able avetom on a substitute program	Transmitters:
basis under specifc F				carried by your ca	able system on a substitute program	Television
Do not list the statio	n here in space (G—but do list		e Special Stateme	ent and Program Log)—if the	
basis. For further i in the paper SA3 f Column 1: List ea	, and also in span nformation conce orm. ch station's call s	ce I, if the stat erning substitu sign. Do not re	ute basis station	s, see page (v) of program services	ute basis and also on some othe f the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multi	
cast stream as "WET. WETA-simulcast).	A-2". Simulcast s	treams must	be reported in c	olumn 1 (list each	on for broadcasting over-the-air i	
its community of licer	ise. For example	, WRC is Cha	-		may be different from the channe	
on which your cable s Column 3: Indicat			ation is a networ	k station an inde	pendent station, or a noncommercia	
educational station, b	y entering the let	ter "N" (for ne	etwork), "N-M" (fe	or network multica	ast), "I" (for independent), "I-M	
(for independent mult For the meaning of th	, · · · ·				mmercial educational multicast)	
					e paper SA3 form s". If not, enter "No". For an ex	
planation of local serv						
					stating the basis on which you ering "LAC" if your cable syster	
carried the distant sta	ition on a part-tim	ne basis beca	use of lack of a	ctivated channel c	apacity	
					payment because it is the subjec stem or an association representin	
the cable system and	a primary transm	nitter or an as	sociation repres	senting the primar	y transmitter, enter the designa	
,					her basis, enter "O." For a furthe	
					d in the paper SA3 form to which the station is licensed by th	
			,	,		
					which the station is identifed	
		nel line-ups, u		space G for each		_
	ng multiple chan 2. B'CAST CHANNEL	nel line-ups, u	use a separate s	5. BASIS OF CARRIAGE		_
Note: If you are utilizi 1. CALL SIGN	2. B'CAST CHANNEL NUMBER	nel line-ups, u CHANN 3. TYPE OF STATION	LINE-UP EL LINE-UP 4. DISTANT? (Yes or No)	AA 5. BASIS OF	channel line-up.	_
Note: If you are utilizi 1. CALL SIGN KCRA-1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3	nel line-ups, u CHANN 3. TYPE OF STATION N	use a separate s EL LINE-UP 4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA	
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3	nel line-ups, t CHANN 3. TYPE OF STATION N N-M	EL LINE-UP 4. DISTANT? (Yes or No) No	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA	
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1 KMAX-1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I	EL LINE-UP 4. DISTANT? (Yes or No) No No No	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA	
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1 KMAX-1 KMAX-HD1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 31	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M	EL LINE-UP 4. DISTANT? (Yes or No) No No No No	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA	additional information o
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1 KMAX-1 KMAX-HD1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I	EL LINE-UP 4. DISTANT? (Yes or No) No No No	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 31	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M	EL LINE-UP 4. DISTANT? (Yes or No) No No No No	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 31 5	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I I-M E	EL LINE-UP 4. DISTANT? (Yes or No) No No No No No	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV	additional information o
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1 KMAX-1 KMAX-HD1 KNPB-1 KNPB-HD1 KOLO-1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 31 31 5 5	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M	EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV	additional information o
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1 KMAX-1 KMAX-HD1 KNPB-1 KNPB-HD1 KOLO-1 KOLO-HD1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 31 31 5 5 8	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N	EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No	5. BASIS OF CARRIAGE	channel line-up.	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 31 31 5 5 8 8 8	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M	EL LINE-UP 4. DISTANT? (Yes or No) No	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13	nel line-ups, u CHANN 3. TYPE OF STATION N-M I I-M E E-M N N-M N-M	EL LINE-UP 4. DISTANT? (Yes or No) No No No No No No No No No No	5. BASIS OF CARRIAGE	channel line-up.	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 31 5 5 8 8 8 13 13	nel line-ups, u CHANN 3. TYPE OF STATION N-M I I-M E E-M N N-M N-M	EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 58	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M N N-M I I I-M	EL LINE-UP 4. DISTANT? (Yes or No) No	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA	additional information o
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1 KMAX-1 KMAX-HD1 KMPB-1 KNPB-HD1 KOLO-1 KOLO-1 KOVR-HD1 KQCA-1 KQCA-HD1 KQCA-HD1 KQCA-1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 9	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E N N-M N N-M N N I I I-M E	EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	5. BASIS OF CARRIAGE	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 31 5 5 8 8 8 13 13 58 58 58 9 64	nel line-ups, u CHANN 3. TYPE OF STATION N-M I I-M E E-M N N-M N N-M I I I-M I I I-M	EL LINE-UP 4. DISTANT? (Yes or No) No	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SAN FRANCISCO, CA	additional information o
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1 KMAX-1 KMAX-HD1 KMPB-1 KNPB-HD1 KOLO-1 KOLO-HD1 KOVR-HD1 KOVR-HD1 KQCA-1 KQCA-1 KQCA-HD1 KQED-1 KTFK-1 KTXL-1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 9 64 40	nel line-ups, u CHANN 3. TYPE OF STATION N-M I I-M E E-M N N-M I I-M I I-M I I I-M I I I I I I I I I	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SACRAMENTO, CA	additional information of
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-HD1 KMAX-1 KMAX-HD1 KNPB-1 KNPB-HD1 KOLO-1 KOLO-HD1 KOVR-1 KOVR-HD1 KQCA-1 KQCA-1 KQCA-1 KQCA-1 KQCA-1 KQCA-1 KTFK-1 KTXL-1 KTXL-2	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 9 64 40 40.2	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M I I I-M I I I-M E I I I-M	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SAN FRANCISCO, CA STOCKTON, CA SACRAMENTO, CA	additional information of
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 9 64 40 40.2 40	nel line-ups, u CHANN 3. TYPE OF STATION N-M I I-M E E-M N N-M I I-M I I-M I I I-M I I I I I I I I I	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SAN FRANCISCO, CA STOCKTON, CA SACRAMENTO, CA SACRAMENTO, CA	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 9 64 40 40.2	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M I I-M I I I-M I I I I-M I I I I I I I	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SAN FRANCISCO, CA STOCKTON, CA SACRAMENTO, CA	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 9 64 40 40.2 40	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M I I I-M I I I-M E I I I-M	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SAN FRANCISCO, CA STOCKTON, CA SACRAMENTO, CA SACRAMENTO, CA	additional information of
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 8 13 13 58 58 9 64 40 40 19	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M I I-M I I I-M I I I I-M I I I I I I I	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA	additional information of
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 9 64 40 40.2 40 19 6	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M I I-M I I I-M I I I I I I I I I I I I	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up.	additional information o
Note: If you are utilizi	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 9 64 40 40 2 40 19 6 6.2	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M I I I-M I I I-M E I I I I-M E I I I I E E I I I I E I I I I E	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA	additional information o
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-11 KMAX-1 KMAX-1 KMAX-1 KNPB-1 KNPB-1 KOLO-1 KOLO-1 KOUC-1 KOVR-1 KOVR-1 KQCA-1 KQCA-1 KQCA-1 KQCA-1 KQCA-1 KQCA-1 KUVE-1 KTXL-2 KTXL-1 KUVS-1 KVIE-2 KVIE-2 KVIE-HD1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 13 13 58 58 58 9 64 40 40 19 6 6.2 6	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I-M E E-M N N-M I I I-M I I I-M I I I-M I E E I I I I-M I E I I I I I-M N N-M N N-M N N N N N N N N N N N N N	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA	additional information o
Note: If you are utilizi 1. CALL SIGN KCRA-1 KCRA-11 KCRA-HD1 KMAX-HD1 KMAX-HD1 KNPB-1 KNPB-HD1 KOLO-1 KOLO-1 KOU-HD1 KOVR-HD1 KQCA-1 KQCA-1 KQCA-1 KQCA-1 KQCA-1 KQED-1 KTFK-1 KTXL-2 KTXL-1 KTXL-2 KTXL-HD1 KVIE-1 KVIE-1 KVIE-2 KVIE-HD1 KXTV-1	ng multiple chan 2. B'CAST CHANNEL NUMBER 3 3 31 5 5 8 8 8 13 13 58 58 9 64 40 40 40 19 6 6.2 6 10	nel line-ups, u CHANN 3. TYPE OF STATION N N-M I I I-M E E-M N N-M N N-M I I I-M I I I-M I I I-M I E E I I I-M E E I I I I-M E E I I I I I-M E I I I I I I I I I I I I I I I I I I	ISE A SEPARATE S EL LINE-UP 4. DISTANT? (Yes or No) NO NO NO NO NO NO NO NO NO NO	AA 5. BASIS OF CARRIAGE (If Distant)	channel line-up. 6. LOCATION OF STATION SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA RENO, NV RENO, NV RENO, NV RENO, NV RENO, NV STOCKTON, CA STOCKTON, CA STOCKTON, CA STOCKTON, CA SAN FRANCISCO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA SACRAMENTO, CA	additional information o

Name	LEGAL NAME OF							SYSTEM ID# 060248
H Primary Transmitters: Radio	all-band basis of Special Instru- receivable if (1) on the basis of For detailed inf located in the p Column 1: lo Column 2: S Column 3: li signal, indicate Column 4: C	t every radio s whose signals ctions Conce) it is carried b monitoring, to formation about paper SA3 form dentify the cal State whether f the radio sta this by placin Sive the statio	station ca were "g erning A by the syster be rece ut the static tion's sig g a chec n's locati	arried on a separate and disc enerally receivable" by your of II-Band FM Carriage: Under stem whenever it is received a ived at the headend, with the copyright Office regulations each station carried. on is AM or FM. Inal was electronically proces k mark in the "S/D" column. ion (the community to which the the community with which the	able system duri Copyright Office at the system's h system's FM an on this point, se sed by the cable he station is lice	ing the accou regulations, a leadend, and tenna, during e page (vi) of system as a nsed by the F	nting pe an FM si (2) it can certain the gen separate	riod. gnal is generally n be expected, stated intervals. eral instructions
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION

FORM SA3E. PAGE 5.			ACCOUNTING PERIOD: 2022/1
LEGAL NAME OF OWNER OF CABLE SYST		S	YSTEM ID# 060248 Name
In General: In space I, identify every no substitute basis during the accounting p	AL STATEMENT AND PROGRAM LOG onnetwork television program broadcast by a eriod, under specific present and former FC ist be included in this log, see page (v) of the	a distant station that your cable system C rules, regulations, or authorizations.	For a further
broadcast by a distant station? Note: If your answer is "No", leave the log in block 2. 2. LOG OF SUBSTITUTE PROGRA In General: List each substitute progra clear. If you need more space, please Column 1: Give the title of every no period, was broadcast by a distant stat under certain FCC rules, regulations, of SA3 form for futher information. Do no titles, for example, "I Love Lucy" or "NI Column 2: If the program was broad Column 3: Give the call sign of the Column 4: Give the broadcast statif the case of Mexican or Canadian statif Column 5: Give the month and day first. Example: for May 7 give "5/7." Column 6: State the times when the to the nearest five minutes. Example: stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the to delete under FCC rules and regulat	ur cable system carry, on a substitute bas e rest of this page blank. If your answer is AMS am on a separate line. Use abbreviations attach additional pages. onnetwork television program (substitute p tion and that your cable system substitute or authorizations. See page (vi) of the gen ot use general categories like "movies", or	Yes ["Yes," you must complete the program wherever possible, if their meaning is program) that, during the accounting d for the programming of another stat ieral instructions located in the paper "basketball". List specific program do." im. station is licensed by the FCC or, in station is licensed by the saccurated 15 p.m. to 6:28:30 p.m. should be amming that your system was required i; enter the letter "P" if the listed pro	X No Program Log ion th y
SUBSTITUT	TE PROGRAM	WHEN SUBSTITUTE CARRIAGE OCCURRED	7. REASON FOR
1. TITLE OF PROGRAM 2. LIVE? Yes or No	3. STATION'S CALL SIGN 4. STATION'S LOCATION	5. MONTH 6. TIMES AND DAY FROM — TO 	

Name	LEGAL NAME OF	OWNER OF CABLI							SYSTEM ID# 060248
J Part-Time Carriage Log	In General: Th time carriage du hours your syst Column 1 (C column 5 of spa Column 2 (E curred during th "4/10." • State the start television statio "app." Example	ue to lack of act em carried that Call sign): Give ace G. Dates and hour : he accounting put th and day wher thing and ending in's broadcast d : "12:30 a.m 3	with column 5 of spa ivated channel capa station. If you need the call sign of ever s of carriage): For e eriod. In the carriage occurr times of carriage to ay, you may give an	city, you are rec more space, ple y distant station each station, list red. Use numera the nearest qua approximate en	the als, v rter	ed to complete the eattach additionators base basis of carr dates and hours with the month fi hour. In any cas g hour, followed	iis log giving the al pages. iage you identifi s when part-time rst. Example: fo e where carriag by the abbrevia	e total dates and ed by "LAC" in e carriage oc- r April 10 give e ran to the end tion	of the
		I	DATES	AND HOURS	DF F	PART-TIME CAF	RIAGE		
	CALL SIGN	WHEN	I CARRIAGE OCCU	IRRED		CALL SIGN	WHEN	I CARRIAGE OC	CURRED
	CALL SIGN	DATE	HOUF FROM	RS TO		CALL SIGN	DATE	HC FROM	URS TO
			-						_
									_
									<u>–</u>
									<u> </u>
									-
									_
			_						_
			_						_
									_
									<u> </u>
									<u> </u>
									-
			_						_
			_						_
			_						_
									<u> </u>
									<u> </u>
									-
			_						_
			_						_
									_
			_						_

FORM	SA3E. PAGE 7.		
	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CE	QUEL COMMUNICATIONS LLC	060248	
Inst all a (as page	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount y mounts (gross receipts) paid to your cable system by subscribers for the system's secon dentifed in space E) during the accounting period. For a further explanation of how to core (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	dary transmission service	K Gross Receipts
 Instru Con Con If yo If yo If yo 	'RIGHT ROYALTY FEE ctions : Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. ur system did not carry any distant television stations, leave block 3 blank. Enter the amo from block 1 on line 1 of block 4, and calculate the total royalty fee. ur system did carry any distant television stations, you must complete the applicable part pompanying this form and attach the schedule to your statement of account.		L Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.	entered on line 1 of	
	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be en low.	itered on line 2 in block	
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	d be entered on line	
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee i system's gross receipts for the accounting period.		
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 2,525,565.94	
	This is your minimum fee.	\$ 26,872.02	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the is space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule. No—Leave block 3 below blank and complete the DSE schedule.	n 4, you must check d?	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ 20,154.02	
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00	
	Line 3. Add lines 1 and 2 and enter here	\$ 20,154.02	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 26,872.02	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	0.00	submitting additional
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 27,597.02	appropriate form for submitting the
	EFT Trace # or TRANSACTION ID #		additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form and the Excel instructions tal		

	00: 2022/1	FORM SA3E. PAGE 8
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 060248
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast state to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations	ations 24
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	350
N Individual to Be Contacted for Further Information	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.) Name RODNEY HASKINS Telephone (statement of account.)	903) 579-3152
	Address 3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number) TYLER, TX 75701 (City, town, state, zip) TYLER, TX 75701 Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional)	
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulat I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owne in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained for are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	or stem as identified or of the cable system
	Image: Symplectic state in the symplecting state in the symplectic state in the symplectic stat	
form in order to proc numbers. By providi search reports prep	e: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information cess your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, i ling PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's pared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law	address and telephon public indexes and

U.S. Copyright Office

	SYSTEM ID# 060248	Name						
CEQUEL COMMUNICATIONS LLC	000240							
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."								
For more information on when to exclude these amounts, see the note on page (vii) of the ge paper SA3 form.	neral instructions in the	Concerning Gross Receipts Exclusion						
During the accounting period did the cable system exclude any amounts of gross receipts for made by satellite carriers to satellite dish owners?	secondary transmissions							
YES. Enter the total here and list the satellite carrier(s) below								
Name Mailing Address Mailing Address								
You must complete this worksheet for those royalty payments submitted as a result of a late For an explanation of interest assessment, see page (viii) of the general instructions in the pa		Q						
Line 1 Enter the amount of late payment or underpayment	x	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	xdays							
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	(interest charge)							
* To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf.</i> For contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	r further assistance please							
** This is the decimal equivalent of 1/365, which is the interest assessment for one day la	te.							
NOTE: If you are filing this worksheet covering a statement of account already submitted to the please list below the owner, address, first community served, accounting period, and ID num filing.								
Owner Address								
First community served Accounting period								
ID number								
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the perso	nally 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 Offce'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.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical value given by the Copyright Act to each distant television station carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3E (LONG FORM)

Step 1: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of account (page 3), a distant station is:

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25

Note that local stations are not counted at all in computing DSEs.

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3E (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particular station's DSE for the accounting period.

TOTAL OF DSEs

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee and the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment.

The 3.75 Fee. If a cable system located in whole or in part within a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable systems fling SA3E (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable.

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.

2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station that it was authorized to carry or was lawfully carrying prior to March 31, 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate, but is subject to the Base Rate, and where applicable, the Syndicated Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or part-time basis only and complete the log to determine the portion of the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE— PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100 major television market as defined by the FCC rules and regulations in effect on June 24, 1981. If no portion of the cable system is located in a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24, 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

DSE SCHEDULE. PAGE 11.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distant that is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSE
 1.064% of gross receipts

Each of the second, third, and fourth DSEs0.701% of gross receiptsThe fifth and each additional DSE0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE • If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

 Identify the communities/areas represented by each subscriber group.
 For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule; or

If any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule.

4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.

6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.

7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows: • When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains

- unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

The example below is intended to supplement the instructions for calculating only the base rate fee for partially distant stations. The cable system would also be subject to the Syndicated Exclusivity Surcharge for partially distant stations, if any portion is located within a major television market.

EXAMPLE:

COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS

		Distant Stations Carried			of Subscriber	Groups		
In most cases under current FCC		STATION	DSE	CITY	OUTSIDE LO	CAL	GRO	SS RECEIPTS
rules, all of Fairvale would be within		A (independent)	1.0		SERVICE AR	EA OF	FROM SUBSCRIB	
the local service	ce area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B,	C, D ,E		\$310,000.00
A and C and a	II of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A an	d C		100,000.00
dega Bay wou	uld be within the local	D (part-time)	0.139	Bodega Bay	Stations A an	d C		70,000.00
service areas	of stations B, D, and E.	E (network)	<u>0.25</u>	Fairvale	Stations B, D	, and E		120,000.00
		TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
	1>	Minimum Fee Total Gross	Receipts		\$600,000.00			
Santa Rosa	Stations A and C				x .01064			
	35 mile zone				\$6,384.00			
		First Subscriber Group	Second Subscriber Group			Third Subscriber Group		
		(Santa Rosa)		(Rapid City and	l Bodega Bay)		(Fairvale)	
	Fairvale							
		Gross receipts	\$310,000.00	Gross receipts		\$170,000.00	Gross receipts	\$120,000.00
Rapid City		DSEs	2.472	DSEs		1.083	DSEs	1.389
		Base rate fee	\$6,497.20	Base rate fee		\$1,907.71	Base rate fee	\$1,604.03
	Bodega	\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
 	Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
		Base rate fee	\$6,497.20	Base rate fee		\$1,907.71	Base rate fee	\$1,604.03
Statio	ns B, D,			4 . 04 004 00	* 40.000.04			
	id E	Total Base Rate Fee: \$6,4						
35 mi	le zone	In this example, the cable s	system would ent	er \$10,008.94 in	space L, block	3, line 1 (page	7)	

DSE SCHEDULE. PAGE 11. (CONTINUED)

4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#										
1	CEQUEL COMMUNICAT	IONS LLC				060248					
	SUM OF DSEs OF CATEGOR		NS:								
	 Add the DSEs of each station Enter the sum here and in line 	0.75									
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5										
O a manufaction	of space G (page 3). In the column headed "DSE"	, for each inden	andant station, give the DSE	- oo "1 0": for	and notwork or noncom						
Computation of DSEs for	mercial educational station, giv			as 1.0, 101	each network of noncom-						
Category "O"			CATEGORY "O" STATION	IS: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	KQED-1	0.250									
	KVIE-1	0.250									
	KVIE-2	0.250									
Add rows as											
necessary.											
Remember to copy											
all formula into new											
rows.											

	L		

		OWNER OF CABLE SYSTEM:					DSE SCHEDU	
Name		OMMUNICATIONS LL	_C				5	YSTEM ID# 060248
3 Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 2 be carried ou Column 2 give the type- Column 0	st the call sign of all dist. 2: For each station, give correspond with the info 3: For each station, give 4: Divide the figure in col t at least to the third deci 5: For each independent value as ".25." 3: Multiply the figure in col	the number of hours rmation given in spat the total number of umn 2 by the figure imal point. This is the station, give the "ty olumn 4 by the figure	s your cable system ace J. Calculate on hours that the stati in column 3, and g e "basis of carriag pe-value" as "1.0." e in column 5, and	n carried the stat ly one DSE for e on broadcast over ive the result in o e value" for the s For each networ give the result in	ach station. ach station. er the air during the acco decimals in column 4. Th	unting period. is figure must cational station, less than the	
Capacity			CATEGORY LA	C STATIONS:	COMPUTATIO	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HO CARRII SYSTE	URS C ED BY S M C	NUMBER DF HOURS STATION DN AIR	4. BASIS OF CARRIAG VALUE	E VALUE		E
			÷	=		x	=	
			÷	=		x	=	
						X	=	
			÷			×	=	
			÷	=		X	=	
			÷			x	=	
			÷	=		X	=	
				-		x	-	
	Add the DSEs	S OF CATEGORY LAC of each station. um here and in line 2 of p		ıle,		0.00		
4 Computation of DSEs for Substitute- Basis Stations	Was carried tions in eff Broadcast space I). Column 2: at your option. Column 3: Column 4:	ect on October 19, 1976 one or more live, nonnetv For each station give the This figure should corre Enter the number of day Divide the figure in colur	titution for a program (as shown by the levork programs during e number of live, no espond with the inforts in the calendar ye nn 2 by the figure in	m that your system tter "P" in column i ; that optional carri nnetwork program mation in space I. ar: 365, except in a column 3, and giv	was permitted to of space I); and age (as shown by s carried in subst a leap year. e the result in co	o delete under FCC rules	2 of were deleted s than the third	m).
		SL	JBSTITUTE-BA	SIS STATION	S: COMPUTA	TION OF DSEs		
	1. CALL	2. NUMBER	3. NUMBER	4. DSE	1. CALL	2. NUMBER	3. NUMBER	4. DSE
	SIGN	OF	OF DAYS		SIGN	OF	OF DAYS	
		PROGRAMS	IN YEAR			PROGRAMS	IN YEAR	L
			÷	=		÷		=
			÷			÷		=
			- -					-
				- <u>-</u>		•		Ē
			÷	=		÷		=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of p		le,	·	0.00		
5		ER OF DSEs: Give the an sapplicable to your syste		s in parts 2, 3, and	4 of this schedule	and add them to provide	the total	
Total Number	1. Number o	of DSEs from part 2 ●			•	•	0.75	
of DSEs		of DSEs from part 3 ●			^	·	0.00	
01 2023		-				·		
	3. Number o	of DSEs from part 4 ●)	•	0.00	
	TOTAL NUMBE	ER OF DSEs						0.75

							YSTEM ID# 060248	Name	
Instructions: Block A must be completed. In block A: • If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule. • If your answer if "No," complete blocks B and C below. BLOCK A: TELEVISION MARKETS									
effect on June 24,	1981?	utside of all m schedule—D(ajor and smal	ler markets as definent the second seco	ned under sec		CC rules and regul	lations in	Computation of 3.75 Fee
		BLOO	CK B: CARF		MITTED DS	Es			
Column 1: CALL SIGN	under FCC rules	of distant sta and regulation of DSE Sched	itions listed in ns prior to Jun lule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For fur e letter M below re	this schedule ther explanati	that your syste on of permitte	d stations, see the	-	
Column 2: BASIS OF PERMITTED CARRIAGE	 (Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty statio C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station pre 	les and regula ed pursuant to on as defined al educational d station (76.6 r DSE schedu ant to individu viously carried IHF station wi	ations cited be o the FCC mar In 76.5(kk) (70 I station [76.59 5) (see paragu ule). al waiver of F(d on a part-tim thin grade-B c	e or substitute bas ontour, [76.59(d)(5	e in effect on 5.57, 76.59(b),)(1), 76.63(a) 3(a) referring stitution of gra is prior to Jun	June 24, 1981 76.61(b)(c), 7 referring to 76 to 76.61(d)] indfathered sta e 25, 1981	6.63(a) referring to .61(e)(1) ations in the		
Column 3:		e stations ider	ntified by the le	parts 2, 3, and 4 o etter "F" in column 2			orksheet on page 1	l4 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
KQED-1	C	0.25							
KVIE-1	C .	0.25							
KVIE-2	M	0.25							
								0.75	
		В	LOCK C: CC	MPUTATION OF	= 3.75 FEE				
Line 1: Enter the	total number of	DSEs from p	part 5 of this	schedule				0.75	
Line 2: Enter the	sum of permitte	d DSEs from	n block B abo	ve				0.75	
				of DSEs subject 7 of this schedule		ate.		0.00	
Line 4: Enter gro	ss receipts from	space K (pa	ige 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply l	ine 4 by 0.0375 a	and enter su	m here					-	partially permited/ partially
Line 6: Enter tota	al number of DSE	Es from line :	3				x	-	nonpermitted carriage? If yes, see part
Line 7: Multiply l	ne 6 by line 5 an	nd enter here	e and on line	2, block 3, space	L (page 7)			0.00	9 instructions.

DSE SCHEDULE. PAGE 13.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CEQUEL COMMUNICATIONS LLC 060248									
1. CALL	2. PERMITTED		1. CALL	2. PERMITTED		1. CALL	2. PERMITTED	3. DSE	6
SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		Computation
									3.75 Fee
		•			+	h			1

						DSE SCHEDULE. PAGE 14.					
Name						SYSTEM ID#					
		MUNICATIONS L	LC			060248					
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1), 76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. 										
				IED ON A PART-TIME AN							
	1. CALL	2. PRIOR	3. ACCOUNTING	4. BASIS OF	5. PRESENT	6. PERMITTED					
	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE					
	Instructions: Block A										
7	In block A:	a musi de completeu									
Computation		"Yes," complete blog									
of the	If your answer is	"No," leave blocks E		e part 8 of the DSE sched							
Syndicated			BLOCK A: MAJOF	R TELEVISION MARK	ΈT						
Exclusivity Surcharge	 Is any portion of the of 	cable system within a	top 100 major television ma	arket as defned by section 7	76.5 of FCC rules in effect	June 24, 1981?					
0		blocks B and C .		No—Proceed to							
		-									
	BLOCK B: C	arriage of VHF/Grad	e B Contour Stations	BLOC	K C: Computation of Exe	mpt DSEs					
	Is any station listed in commercial VHF stati or in part, over the ca	ion that places a gra	e primary stream of a de B contour, in whole	Was any station listed in block B of part 7 carried in any commu- nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159)							
			propriate permitted DSE		tation below with its approp	riate permitted DSE					
		and proceed to part 8.			and proceed to part 8.						
	CALL SIGN	DSE C	ALL SIGN DSE	CALL SIGN	DSE CALL S	IGN DSE					
					L						
			TAL DSEs 0.00		TOTAL						
			TAL DSEs 0.00	<u>а II</u>	TOTAL	DSEs 0.00					

LEGAL NA	AME OF OWNER OF CABLE SYSTEM: SYSTEM: CEQUEL COMMUNICATIONS LLC 06	EM ID# 60248	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	65.94	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule. X No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

ACCOUNTING PERIOD	. 2022/1	DSE SCHEDULE. PAG	€ 16.
Name		ME OF OWNER OF CABLE SYSTEM: SYSTEM:	
	(CEQUEL COMMUNICATIONS LLC 060	248
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.	
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1)	
Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here	
		D. Enter 0.00089 of gross receipts (the amount in section 1)	
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here	
		F. Multiply line D by line E and enter here	
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)	
		Syndicated Exclusivity Surcharge	<u></u>
8	You m 6 was	ctions: ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.	
Computation	-	ar answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of Base Rate Fee	 If you blank 	ar answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	
2000 1100 100	What i were lo	is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local e area," see page (v) of the general instructions.	
	Dista	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Dia y	our cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.	
	2	(If block A of part 6 was checked "Yes,"	
		use the total number of DSEs from part 5.)	
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.	
		A. Enter 0.01064 of gross receipts	
		(the amount in section 1)▶ <u>\$ 20,154.02</u>	
		B. Enter 0.00701 of gross receipts (the amount in section 1)	
		C. Subtract 1.000 from total DSEs	
		(the figure in section 2) and enter here	
		D. Multiply line B by line C and enter here	
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)	
		Base Rate Fee)2

LEGAL N	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID#					
CEQI	JEL COMMUNICATIONS LLC 060248	Name				
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.					
4		8				
	 A. Enter 0.01064 of gross receipts (the amount in section 1) 					
	B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$	Computation of				
		Base Rate Fee				
	C. Multiply line B by 3.000 and enter here					
	D. Enter 0.00330 of gross receipts					
	(the amount in section 1)					
	E. Subtract 4.000 from total DSEs					
	(the figure in section 2) and enter here					
	F. Multiply line D by line E and enter here					
	G. Add lines A, C, and F. This is your base rate fee					
	Enter here and in block 3, line 1, space L (page 7) Base Rate Fee \$ 0.00					
	Base Rate Fee					
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals					
	stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line- Space G.	9				
-	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	_				
receipt	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of	Computation of				
this exe	clusion, you must:	Base Rate Fee				
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of	and Syndicated				
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	Exclusivity Surcharge				
Finally	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	for				
	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below.	Partially Distant				
	er, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and				
How to	Identify a Subscriber Group for Partially Distant Stations	for Partially Permitted				
•	For each community served, determine the local service area of each wholly distant and each partially distant station you to that community	Stations				
carried to that community. Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located						
outside	the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by					
	ne token, the station is distant to the subscriber.) : Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each					
subscr	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable					
system	will have only one subscriber group when the distant stations it carried have local service areas that coincide.					
•	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's ber groups.					
	i section:					
 Identi 	fy the communities/areas represented by each subscriber group.					
	he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the bers in the group.					
• lf:						
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3,					
	if this schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B					
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.					
• Add t	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.					
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.						
	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding					
DSEs f	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the tota or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show stual calculations on the form.					

News	LEGAL NAME OF OWNER OF CABLE SYSTEM: S	SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	060248
	Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals	
	Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and	
	partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant.	
	Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distar	ıt
	signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by	
	.0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported	ł
	for each part 9 used in steps 1 and 2 must equal the amount reported in space K.	
	Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant	
	signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams	
	Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from	ı
	a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Ra	ite
	and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream.	
	You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreemen	t
	entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary	
	transmitter or an association representing the primary transmitter.	

LEGAL NAME OF OWNER							693750 SYSTEM ID# 060248	N
BI				TE FEES FOR EAC				
	FIRST	SUBSCRIBER GROU				SUBSCRIBER GRO		
COMMUNITY/ AREA 0			0	COMMUNITY/ ARE	A		0	Con
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								Base
								_
								Syn Exc
						n <mark>-</mark>		Sur
								Pa
								Di
								Sta
						n <mark>-</mark>		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First Gro	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIRD SUBSCRIBER GROUP				FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fou	th Group	\$	0.00		
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fou	th Group	\$	0.00	
	·	L.			· ·	Ţ		

0 COMMUNITY/ AREA 0 9 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Computation Computation Computation of Base Rate Fee and Syndicated Computation Computation Computation of Base Rate Fee and Computation Computation Computation Computation of Base Rate Fee and Computation Computation Computation Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations O.00 Total DSEs O.00 Social Computation Social Computation Social Computation O.00 Base Rate Fee Second Group Social Computation Social Computation Social Computation BSCRIBER GROUP COMMUNITY/ AREA O O O O O	LEGAL NAME OF OWNE						S	615333333333333333333333333333333333333	Name
0 COMMUNITY/AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Call Call SIGN DSE CALL SIGN DSE and Call Call SIGN DSE CALL SIGN DSE and Call SIGN Call SIGN Call SIGN DSE Call SIGN DSE Call SIGN Call SIGN Call SIGN Call SIGN DSE Call SIGN Call SIGN DSE CALL SIGN DSE Call SIGN DSE Call SIGN DSE CALL SIGN DSE Call SIGN DSE Call SIGN DSE CALL SIGN DSE Call SIGN DSE Call SIGN DSE CALL SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN DSE Call SIGN Call SIGN	E	LOCK A:		BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
Community // NEX Computation of Base Rate Fee Second Group Constraint of Stations ALL SIGN DSE CALL SIGN DSE Call SiGN DSE ALL SIGN DSE CALL SIGN DSE and Syndicated Exclusivity Surcharge for Partially Distances Image: Station of Computation of Comp		FIRST	SUBSCRIBER GROU	IP		SECOND	SUBSCRIBER GRO	UP	0
DALL SIGN DSE CALL SIGN DSE CALL SIGN DSE and and syndicated and and and syndicated and and and and and and and and and and and syndicated and and <	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	-
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations 0.00 0.00 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CALL SIGN	DSE						DSE	
and	CALL SIGN	DGL	CALL SIGN	DSL	CALL SIGN	DSL	CALL SIGN	DGL	
Syndicated Exclusivity Surcharge for Partially Distant Stations			-						
Exclusivity Image: Second Group									
image: second			-						
Partially			-						Surcharge
Distant Stations Distant Distant Distant Stations Distant Distant Distant Stations Distant Distant Stations Distant Distant<									for
Stations Statistics Statistics Statistics <tr< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>Partially</td></tr<>									Partially
0.00 Total DSEs 0.00 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0 COMMUNITY/ AREA 0 2ALL SIGN DSE CALL SIGN DSE 0 CALL SIGN DSE CALL SIGN DSE 2ALL SIGN DSE CALL SIGN DSE 0 Communication 0 0 2ALL SIGN DSE CALL SIGN DSE 0 Communication 0 0 2ALL SIGN DSE CALL SIGN DSE 0 Communication 0 0 0 2ALL SIGN DSE CALL SIGN DSE 0 Communication 0 0 0 2ALL SIGN DSE CALL SIGN DSE 0 Communication 0 0 2ALL SIGN DSE CALL SIGN DSE 0 Communication 0 0 0 Communication 0 0 0 Communication 0 0 0 Communication 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>n =</td> <td></td> <td>Distant</td>							n =		Distant
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group G									Stations
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group Group G									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group Group Group <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group Group Group <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Group Group Group Group Group Group Group <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN </td <td>Total DSEs</td> <td></td> <td></td> <td>0.00</td> <td></td> <td></td> <td></td> <td>0.00</td> <td></td>	Total DSEs			0.00				0.00	
0.00 Base Rate Fee Second Group \$ 0.00 BSCRIBER GROUP FOURTH SUBSCRIBER GROUP 0 0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE O O O O Coll SIGN DSE CALL SIGN DSE O O O O Coll SIGN DSE CALL SIGN DSE O O O O Coll SIGN DSE CALL SIGN DSE O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O									
BSCRIBER GROUP COMMUNITY/ AREA O CALL SIGN DSE CALL SIGN	Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
0 COMMUNITY/ AREA 0 CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Comparison of the second secon	Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Image: Call Sign DSE Image: Call Sign DSE Image: Call Sign DSE Image: Call Sign DSE Image: Call Sign DSE Image: Call Sign DSE Image: Call Sign Image: Call Sign Image: Call Sign DSE Image: Call Sign Image: Call Sign Image: Call Sign DSE Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign Image: Call Sign		THIRD	SUBSCRIBER GROU	IP		FOURTH	I SUBSCRIBER GRO	UP	
	COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-						
							. –		
			-						
0.00 Gross Receipts Fourth Group \$ 0.00	Total DSEs 0.00			0.00	Total DSEs			0.00	
	Gross Receipts Third Group \$ 0.00		Gross Receipts Fourt	th Group	\$	0.00			
0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fourt	th Group	\$	0.00		
	Base Rate Fee: Add th Enter here and in block			iber group	as shown in the boxes	above.	\$	0.00	

		FORM SA3E. PAGE 20.							
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 060248							
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP								
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television ma by section 76.5 of FCC rules in effect on June 24, 1981:								
Computation of	First 50 major television market	Second 50 major television market							
Base Rate Fee and	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme								
Syndicated	this schedule.								
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.								
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number	of DSEs used to compute the surcharge.							
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.								
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs							
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1							
	and enter here. This is the	and enter here. This is the							
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group							
	subject to the surcharge	subject to the surcharge							
	computation	computation							
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY							
	SURCHARGE	SURCHARGE							
	First Group	Second Group							
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP							
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs							
	Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1							
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for							
	this subscriber group	this subscriber group							
	subject to the surcharge	subject to the surcharge							
	computation	computation							
	SURCHARGE Third Group	SURCHARGE Fourth Group							
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page								

U.S. Copyright Office