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

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
9/15/2022	\$ ALLOCATION NUMBER					

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	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:										
Accounting Period	2022/1										
	Instructions:										
B Owner	Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.										
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM										
	CEQUEL COMMUNICATIONS LLC										
				00791220221							
				007912 2022/1							
	3027 S SE LOOP 323 TYLER, TX 75701										
С	INSTRUCTIONS: In line 1, give any business or trade names used to										
C	names already appear in space B. In line 2, give the mailing address of	f the system, if dit	ferent from the address giv	en in space B.							
System	IDENTIFICATION OF CABLE SYSTEM:										
	PARKERSBURG MAILING ADDRESS OF CABLE SYSTEM:										
	MAILING ADDRESS OF CABLE SYSTEM:										
	2 (Number, street, rural route, apartment, or suite number)										
	(City, town, state, zip code)										
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on page 1b							
Area	with all communities.										
Served	CITY OR TOWN	STATE									
First	PARKERSBURG	wv									
Community	Below is a sample for reporting communities if you report multiple ch	· · · · · · · · · · · · · · · · · · ·		T							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#							
Sample	Alda Alliance	MD MD	A B	1 2							
	Gering	MD	В	3							

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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 fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 007912 CEQUEL COMMUNICATIONS LLC

Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.

D Area Served

Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.

If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).

When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number

CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
PARKERSBURG	WV	В	4	Fir
ADDISON	WV	E	7	Comn
BELMONT	WV	С	5	
BELPRE	WV	В	4	
BOAZ	WV	В	4	
CHESHIRE	ОН	Е	7	See instructi
CHESHIRE VILLAGE	ОН	Е	7	additional in
DAVISVILLE	WV	В	4	on alphabeti
ELIZABETH	WV	D	6	
GALLIPOLIS	ОН	Е	7	
GALLIPOLIS TOWNSHIP	ОН	Е	7	
HARTFORD	WV	Е	7	Add rows as
HENDERSON	WV	Е	7	
JACKSON COUNTY	WV	Е	7	
MARIETTA	ОН	В	4	
WARIETTA TOWNSHIP	ОН	В	4	
WASON	WV	Е	7	
MASON COUNTY	WV	E	7	
MIDDLEPORT	WV	E	7	
NEW HAVEN	WV	E	7	
NEW MARTINSVILLE	WV	A	1	
NORTH HILLS	WV	В	4	
PADEN	WV	A	1	
PLEASANTS COUNTY	WV	C	5	
POMEROY	OH	E	7	
PT. PLEASANT	WV	E	7	
RACINE	OH	E	7	
RAVENSWOOD	WV	E	7	
RENO	OH	В	4	
RIPLEY	WV	E	7	
ROANE COUNTY	WV		8	
RUTLAND	OH	E	7	
SISTERVILLE	WV	Δ	2	
SPENCER	WV	A E	8	
SPRINGFIELD	OH	F	7	
	WV	E		
ST. MARY'S		C	5 7	
SYRACUSE	OH	E	7	
TYLER COUNTY VIENNA	WV WV	A B	3	

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ecessary.

WAVERLY	WV	В	4
WETZEL COUNTY	WV	Α	1
WILLIAMSTOWN	WV	В	4
WIRT COUNTY	WV	D	6
WOOD COUNTY	wv	В	4

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CEQUEL COMMUNICATIONS LLC

SYSTEM ID# 007912

E

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the 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 and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLO	OCK 1			BLOCK 2			
	NO. OF			П		NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	Ш	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:							
Service to first set	27,171	\$	50.00				
Service to additional set(s)				I"			
• FM radio (if separate rate)							
Motel, hotel							
Commercial	835	\$	45.95				
Converter							
Residential							
Non-residential				"			
		†		1 1			

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission 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 amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

	BLOCK 2					
CATEGORY OF SERVICE	F	RATE	CATEGORY OF SERVICE	RATE		CATEGORY OF SERVICE RATE
Continuing Services:			Installation: Non-residential			
• Pay cable	\$	17.00	Motel, hotel			
 Pay cable—add'l channel 	\$	19.00	Commercial			
Fire protection			• Pay cable			
 Burglar protection 			Pay cable-add'l channel			
Installation: Residential			Fire protection			
• First set	\$	99.00	Burglar protection			
Additional set(s)	\$	25.00	Other services:			
• FM radio (if separate rate)			Reconnect	\$	40.00	
Converter			Disconnect			
			Outlet relocation	\$	25.00	
			Move to new address	\$	99.00	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007912 CEQUEL COMMUNICATIONS LLC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on ε **Primary** substitute program basis, as explained in the next paragraph Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identifi each multicast stream associated with a station according to its over-the-air designation. For example, report multi cast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast) Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercia educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex planation of local service area, see page (v) of the general instructions located in the paper SA3 form Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representin the cable system and a primary transmitter or an association representing the primary transmitter, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a furthe explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) WNPB-1 24 Ε No MORGANTOWN, WV WNPB-2 24.2 E-M No MORGANTOWN, WV See instructions for additional information WNPB-3 E-M No 24.3 MORGANTOWN, WV on alphabetization. WNPB-HD1 24 E-M No MORGANTOWN, WV WPGH-1 0 53 I Yes PITTSBURGH, PA WTAE-1 4 Ν Yes 0 PITTSBURGH, PA WTOV-1 Ν STEUBENVILLE, OH 9 No WTOV-2 9.2 I No STEUBENVILLE, OH 9.3 WTOV-3 I-M No STEUBENVILLE, OH WTOV-HD1 9 N-M No STEUBENVILLE, OH WTOV-HD2 9.2 I-M No STEUBENVILLE, OH WTRF-1 7 Ν No WHEELING, WV WTRF-2 7.2 I-M No WHEELING, WV WTRF-3 7.3 N-M No WHEELING, WV WTRF-HD1 7 N-M No WHEELING, WV

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CEQUEL COMMUNICATIONS LLC

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [section: 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on ε substitute program basis, as explained in the next paragraph

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some othe basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which you cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity

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Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by th FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AB			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
WCHS-1	8	N	No		CHARLESTON, WV		
WCHS-HD1	8	N-M	No		CHARLESTON, WV		
WIYE-1	47	N	No		PARKERSBURG, WV		
WIYE-2	47.2	I-M	No		PARKERSBURG, WV		
WIYE-HD1	47	N-M	No		PARKERSBURG, WV		
WOUB-1	20	E	No		ATHENS, OH		
WOUB-HD1	20	E-M	No		ATHENS, OH		
WOVA-1	22	I	No		PARKERSBURG, WV		
WOVA-2	22.2	I-M	No		PARKERSBURG, WV		
WOVA-HD1	22	I-M	No		PARKERSBURG, WV		
WOVA-HD2	22.2	I-M	No		PARKERSBURG, WV		
WOWK-1	13	N	No		HUNTINGTON, WV		
WOWK-2	13.2	I-M	No		HUNTINGTON, WV		
WOWK-3	13.3	I-M	No		HUNTINGTON, WV		
WOWK-HD1	13	N-M	No		HUNTINGTON, WV		
WSAZ-1	3	N	No		HUNTINGTON, WV		
WSYX-1	6	N	Yes	0	COLUMBUS, OH		
WTAP-1	15	N	No		PARKERSBURG, WV		
WTAP-2	15.2	I-M	No		PARKERSBURG, WV		
WTAP-HD1	15	N-M	No		PARKERSBURG, WV		
WVPB-1	33	Е	Yes	0	HUNTINGTON, WV		
WVPB-2	33.2	E-M	Yes	0	HUNTINGTON, WV		
WVPB-3	33.3	E-M	Yes	0	HUNTINGTON, WV		
WVPB-HD1	33	E-M	Yes	E	HUNTINGTON, WV		

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CEQUEL COMMUNICATIONS LLC

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement 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, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WCHS-1	8	N	No		CHARLESTON, WV
WCHS-HD1	8	N-M	No		CHARLESTON, WV
WIYE-1	47	N	No		PARKERSBURG, WV
WIYE-2	47.2	I-M	No		PARKERSBURG, WV
WIYE-HD1	47	N-M	No		PARKERSBURG, WV
WNPB-1	24	Е	Yes	0	MORGANTOWN, WV
WNPB-2	24.2	E-M	Yes	0	MORGANTOWN, WV
WNPB-3	24.3	E-M	Yes	0	MORGANTOWN, WV
WNPB-HD1	24	E-M	Yes	Е	MORGANTOWN, WV
WOVA-1	22	I	No		PARKERSBURG, WV
WOVA-2	22.2	I-M	No		PARKERSBURG, WV
WOVA-HD1	22	I-M	No		PARKERSBURG, WV
WOVA-HD2	22.2	I-M	No		PARKERSBURG, WV
WOWK-1	13	N	Yes	0	HUNTINGTON, WV
WOWK-2	13.2	I-M	Yes	0	HUNTINGTON, WV
WOWK-3	13.3	I-M	Yes	0	HUNTINGTON, WV
WOWK-HD1	13	N-M	Yes	Е	HUNTINGTON, WV
WSAZ-1	3	N	Yes	0	HUNTINGTON, WV
WTAP-1	15	N	No		PARKERSBURG, WV
WTAP-2	15.2	I-M	No		PARKERSBURG, WV
WTAP-HD1	15	N-M	No		PARKERSBURG, WV

G

Primary Transmitters: Television

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CEQUEL COMMUNICATIONS LLC

SYSTEM ID#

Name

Name

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-N" (for network multicast), "I" (for independent, "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the neperal instructions located in the pager SA3 form

For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement 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, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WCHS-1	8	N	No		CHARLESTON, WV
WCHS-2	8.2	I-M	No		CHARLESTON, WV
WCHS-3	8.3	I-M	No		CHARLESTON, WV
WCHS-4	8.4	I-M	No		CHARLESTON, WV
WCHS-HD1	8	N-M	No		CHARLESTON, WV
WLPX-1	29	I	No		CHARLESTON, WV
WLPX-HD1	29	I-M	No		CHARLESTON, WV
WOUB-1	20	E	Yes	0	ATHENS, OH
WOWK-1	13	N	Yes	0	HUNTINGTON, WV
WOWK-2	13.2	I-M	Yes	0	HUNTINGTON, WV
WOWK-3	13.3	I-M	Yes	0	HUNTINGTON, WV
WOWK-HD1	13	N-M	Yes	E	HUNTINGTON, WV
WQCW-1	30	I	No		PORTSMOUTH, OH
WQCW-2	30.2	I	No		PORTSMOUTH, OH
WQCW-HD1	30	I-M	No		PORTSMOUTH, OH
WSAZ-1	3	N	Yes	0	HUNTINGTON, WV
WSAZ-2	3.2	I-M	No		HUNTINGTON, WV
WSAZ-3	3.3	I-M	No		HUNTINGTON, WV
WSAZ-HD1	3	N-M	No		HUNTINGTON, WV
WTAP-1	15	N	No		PARKERSBURG, WV
WTSF-1	61	I	No		ASHLAND, KY
WVAH-1	11	I	No		CHARLESTON, WV
WVAH-2	11.2	I-M	No		CHARLESTON, WV
WVAH-3	11.3	I-M	No		CHARLESTON, WV
WVPB-1	33	E	Yes	0	HUNTINGTON, WV
WVPB-2	33.2	Е-М	Yes	0	HUNTINGTON, WV
WVPB-3	33.3	Е-М	Yes	0	HUNTINGTON, WV
WVPB-HD1	33	E-M	Yes	Е	HUNTINGTON, WV

G

Primary Transmitters: Television

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **CEQUEL COMMUNICATIONS LLC** 007912

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on ϵ substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program asis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in ts community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M' (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) or the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex-

anation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your able system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system arried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement 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, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AE	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WCHS-1	8	N	No		CHARLESTON, WV
WCHS-2	8.2	I-M	No		CHARLESTON, WV
WCHS-3	8.3	I-M	No		CHARLESTON, WV
WCHS-4	8.4	I-M	No		CHARLESTON, WV
WCHS-HD1	8	N-M	No		CHARLESTON, WV
WJOS-1	58	I	No		POMEROY, OH
WLPX-1	29	ı	No		CHARLESTON, WV
WLPX-HD1	29	I-M	No		CHARLESTON, WV
WOUB-1	20	E	No		ATHENS, OH
WOWK-1	13	N	No		HUNTINGTON, WV
WOWK-2	13.2	I-M	No		HUNTINGTON, WV
WOWK-3	13.3	I-M	No		HUNTINGTON, WV
WOWK-HD1	13	N-M	No		HUNTINGTON, WV
WQCW-1	30	ı	No		PORTSMOUTH, OH
WQCW-2	30.2	ı	No		PORTSMOUTH, OH
WQCW-HD1	30	I-M	No		PORTSMOUTH, OH
WSAZ-1	3	N	No		HUNTINGTON, WV
WSAZ-2	3.2	I-M	No		HUNTINGTON, WV
WSAZ-3	3.3	I-M	No		HUNTINGTON, WV
WSAZ-HD1	3	N-M	No		HUNTINGTON, WV
WTAP-1	15	N	No		PARKERSBURG, WV
WTSF-1	61	I	No		ASHLAND, KY
WVAH-1	11	ı	No		CHARLESTON, WV
WVAH-2	11.2	I-M	No		CHARLESTON, WV
WVAH-3	11.3	I-M	No		CHARLESTON, WV
WVPB-1	33	E	No		HUNTINGTON, WV
WVPB-2	33.2	E-M	No		HUNTINGTON, WV
WVPB-3	33.3	E-M	No		HUNTINGTON, WV
WVPB-HD1	33	E-M	No		HUNTINGTON, WV

G

Primary Transmitters: Television

Form SA3E Long Form (Rev. 05-17) U.S. Copyright Office

G

Primary

Transmitters:

Television

Form SA3E Long Form (Rev. 05-17)

U.S. Copyright Office

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **CEQUEL COMMUNICATIONS LLC** 007912

PRIMARY TRANSMITTERS: TELEVISION

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on ϵ substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program asis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in ts community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channe on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M' (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast) or the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an ex-

anation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your able system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system arried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement 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, enter the designa tion "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AF	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
WCHS-1	8	N	No		CHARLESTON, WV
WCHS-2	8.2	I-M	No		CHARLESTON, WV
WCHS-3	8.3	I-M	No		CHARLESTON, WV
WCHS-4	8.4	I-M	No		CHARLESTON, WV
WCHS-HD1	8	N-M	No		CHARLESTON, WV
WJOS-1	58	I	No		POMEROY, OH
WLPX-1	29	ı	No		CHARLESTON, WV
WLPX-HD1	29	I-M	No		CHARLESTON, WV
WOUB-1	20	E	Yes	0	ATHENS, OH
WOWK-1	13	N	No		HUNTINGTON, WV
WOWK-2	13.2	I-M	No		HUNTINGTON, WV
WOWK-3	13.3	I-M	No		HUNTINGTON, WV
WOWK-HD1	13	N-M	No		HUNTINGTON, WV
WQCW-1	30	I	No		PORTSMOUTH, OH
WQCW-2	30.2	I	No		PORTSMOUTH, OH
WQCW-HD1	30	I-M	No		PORTSMOUTH, OH
WSAZ-1	3	N	No		HUNTINGTON, WV
WSAZ-2	3.2	I-M	No		HUNTINGTON, WV
WSAZ-3	3.3	I-M	No		HUNTINGTON, WV
WSAZ-HD1	3	N-M	No		HUNTINGTON, WV
WTAP-1	15	N	No		PARKERSBURG, WV
WTSF-1	61	I	No		ASHLAND, KY
WVAH-1	11	I	No		CHARLESTON, WV
WVAH-2	11.2	I-M	No		CHARLESTON, WV
WVAH-3	11.3	I-M	No		CHARLESTON, WV
WVPB-1	33	E	No		HUNTINGTON, WV
WVPB-2	33.2	E-M	No		HUNTINGTON, WV
WVPB-3	33.3	E-M	No		HUNTINGTON, WV
WVPB-HD1	33	E-M	No		HUNTINGTON, WV

ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007912 **CEQUEL COMMUNICATIONS LLC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). 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 CEQUEL COMMUNICA					S	YSTEM ID# 007912	Name			
						007312				
SUBSTITUTE CARRIAGI In General: In space I, ident substitute basis during the a explanation of the programm form.	tify every non	nnetwork televi	sion program broadcast by ecific present and former F0	a distant statio CC rules, regu	lations, or authorizations.	For a further	I Substitute			
	T CONCER	NING SURS	TITLITE CARRIAGE				Carriage:			
 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? 										
Note: If your answer is "No log in block 2.	", leave the	rest of this pa	ge blank. If your answer is	"Yes," you m	nust complete the progra	m	Program Log			
period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love I Column 2: If the prograr Column 3: Give the call Column 4: Give the broatthe case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progratice, please of every no distant stategulations, contion. Do not be distant stategulations, contion. Do not be distant stategulations and day ove "5/7." Les when the Example: a ler "R" if the land regulation of gramming	am on a separa attach addition nnetwork televicion and that your authorization at use general abasetball: dcast live, entestation broadca on's location (tlons, if any, the when your system a program carrolisted program cons in effect di	al pages. rision program (substitute pour cable system substitute pour cable system substitute pour cable system substitute pour categories like "movies", or 76ers vs. Bulls." er "Yes." Otherwise enter "leasting the substitute programe community to which the community with which the stem carried the substitute or gram was carried by your lied by a system from 6:01 in was substituted for programing the accounting period	orogram) that ed for the pro neral instructi r "basketball" No." am. station is lice station is ide program. Us cable system 15 p.m. to 6: amming that d; enter the le	ensed by the FCC or, in entified). e numerals, with the more times accurate 28:30 p.m. should be your system was require etter "P" if the listed pro	nth bly				
	UDOTITUT	TE DROODAN			EN SUBSTITUTE	7. REASON				
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	IAGE OCCURRED 6. TIMES FROM — TO	FOR DELETION				
	163 01 140	CALL SIGN	4. STATIONS ESCATION	AND DAT						
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ACCOUNTING PERIOD: 2022/1 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007912 **CEQUEL COMMUNICATIONS LLC** PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation 'app." Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN** HOURS HOURS ТО FROM DATE FROM TO DATE

	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CE	QUEL COMMUNICATIONS LLC	007912	Name
Inst all a (as i	DSS 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 co e (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	dary transmission service	K Gross Receipts
IMP	during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	\$ 7,737,226.03 (Amount of gross receipts)	
• Con • Con • If yo fee to accord	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: plete block 1, showing your minimum fee. plete 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 amornom 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 ompanying this form and attach the schedule to your statement of account.	ts of the DSE Schedule	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	
▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block $\sf C$ should be er low.	ntered 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 least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	is 1.064 percent of the	
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 7,737,226.03	
	Enter the result here. This is your minimum fee.	\$ 82,324.08	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the i 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 control of the con	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	\$ 66,044.99	
3	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	\$ 66,044.99	
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	\$ 82,324.08	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 the Licensing
	Line 4. FILING FEE	\$ 725.00	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	\$ 83,049.08	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 tall	. • ()	

ACCOUNTING PERIOD: 2022/1

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC 0079
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations 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. 55
	Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)
for Further Information	Name RODNEY HASKINS Telephone (903) 579-3152
	Address 3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number) TYLER, TX 75701
	(City, town, state, zip) Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional)
•	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified 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 identified as owner of the cable system 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 herein 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)]
	X /s/ Alan Dannenbaum
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.
	Typed or printed name: ALAN DANNENBAUM
	Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)
	Date: August 29, 2022

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on the 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 telephon numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and 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 suffciency of the fling, a determination that would be made by a court of land.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CEQUEL COMMUNICATIONS LLC	007912	Name
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 add lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall no scribers and amounts collected from subscribers receiving secondary transmissions pursuant to secondary transmissions on when to exclude these amounts, see the note on page (vii) of the general instruction.	the basic t include sub- tion 119."	Special Statement Concerning Gross Receipts
paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for secondary tramade by satellite carriers to satellite dish owners?		Exclusion
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form	. ,	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	-	
(in	terest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assis contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	tance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright C please list below the owner, address, first community served, accounting period, and ID number as given in 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 Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2022/1

DSE SCHEDULE. PAGE 10.

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, non-commercial 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.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE

1.064% of gross receipts

0.330% 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.
 - 2. Identify the communities/areas represented by each subscriber group.
- 3. 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

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:

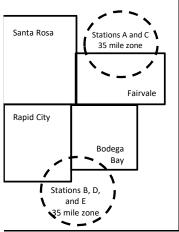
- · When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



Distant Stations Carr	ied	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

Minimum Fee Total Gross Receipts \$600,000.00 x .01064 \$6,384,00

First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)		
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00	
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	
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80	
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 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	

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

DSE SCHEDULE. PAG	E 11. (CONTINUED)												
4	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTE												
1	CEQUEL COMMUNICATIONS LLC												
	SUM OF DSEs OF CATEGOR	RY "O" STATION	S:										
	 Add the DSEs of each station 												
	Enter the sum here and in line 1 of part 5 of this schedule.												
	Instructions:												
2	In the column headed "Call S	Sign": list the cal	signs of all distant station	s identified by th	ne letter "O" in column 5								
0	of space G (page 3).												
Computation of DSEs for	In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."												
Category "O"	CATEGORY "O" STATIONS: DSEs												
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE							
	WNPB-1	0.250											
	WNPB-2	0.250											
	WNPB-3	0.250											
	WOUB-1	0.250											
A alal	WOWK-1	0.250											
Add rows as	WOWK-2	1.000											
necessary. Remember to copy	WOWK-3	1.000											
all formula into new	WPGH-1	1.000											
rows.	WSAZ-1	0.250											
	WSYX-1	0.250											
	WTAE-1	0.250											
	WVPB-1	0.250											
	WVPB-2	0.250											
	WVPB-3	0.250											
	101000000000000000000000000000000000000												
	1010101010101010101010101010101010101010												
Ī	I	. L		<u> </u>		L							

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•	•	••••••••••	•••••

	LEGAL NAME OF C	OWNER OF CABLE SYSTEM:						S	YSTEM ID#	
Name	CEQUEL COMMUNICATIONS LLC 007912									
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all dista 2: For each station, give to correspond with the info 3: For each station, give to the color of	he number of houmation given in some total number of the total number of the figure and point. This is station, give the figure and 4 by the figure number of the figure number o	irs your cable syste pace J. Calculate or of hours that the state in column 3, and the "basis of carriag type-value" as "1.0." ure in column 5, and the pack is the pack in the column 5, and the pack is the pack is the pack is the pack in the pack is the pack	m carried the stanly one DSE for oftion broadcast over give the result in ge value" for the standard reach netwood give the result in	ntion during the each station. yer the air during decimals in column station. or noncomm or column 6. Ro	g the accou umn 4. This ercial educa und to no le	nting period. s figure must ational station,		
Capacity		C	CATEGORY L	AC STATIONS:	COMPUTAT	ION OF DSE	s			
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEN	JRS ED BY M	NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	GE .	5. TYPE VALUE	6. DS	E	
			÷		=	X		=		
			÷ -		= 	X				
			÷ ÷		=	x x				
			÷		=	x		=		
			÷		=	x		=		
			÷		=	x		=		
			÷		=	Х		=		
	Add the DSEs	s OF CATEGORY LAC S of each station. Im here and in line 2 of p		dule,			0.00			
Computation of DSEs for Substitute-Basis Stations	Was carried tions in efference broadcast of space I). Column 2: at your option. Column 3: Column 4:	re the call sign of each stands by your system in substant on October 19, 1976 (one or more live, nonnetwork). This figure should correst that the number of days Divide the figure in column This is the station's DSE	itution for a progras shown by the ork programs during number of live, in spond with the infection to the calendar years 2 by the figure	am that your systen letter "P" in column ng that optional carr connetwork program formation in space I. year: 365, except in in column 3, and gi	n was permitted of page (as shown by as carried in substance). a leap year. we the result in c	to delete under d the word "Yes" stitution for prog olumn 4. Round	FCC rules a in column 2 or rams that w	of vere deleted than the third	m).	
	1	SU	BSTITUTE-BA	ASIS STATION	S: COMPUTA	ATION OF D	SEs			
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMB OF PROG		3. NUMBER OF DAYS IN YEAR	4. DSE	
		÷					÷		=	
							÷ ÷		=	
			• • • • • • • • • • • • • • • • • • • •				÷		=	
				=			÷		=	
	Add the DSEs	OF SUBSTITUTE-BAS	IS STATIONS:				0.00			
5	TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system.									
Total Number	1. Number of DSEs from part 2 ● ▶ 5.75									
of DSEs		f DSEs from part 3 ●				· •		0.00		
		f DSEs from part 4 ●				•		0.00		
	TOTAL NUMBE	R OF DSEs							5.75	

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2022/1

	OWNER OF CABLES						S'	YSTEM ID# 007912	Name
	ck A must be comp	leted.							
•	"Yes," leave the re	mainder of p	eart 6 and part 7	of the DSE sched	ule blank and	l complete par	t 8, (page 16) of the	e	6
schedule. • If your answer if	"No," complete blo	cks B and C	below.						
				TELEVISION MA					Computation of 3.75 Fee
ls the cable syster effect on June 24,	,	utside of all r	major and smal	er markets as defir	ned under sed	ction 76.5 of F	CC rules and regul	ations in	
Yes—Com	plete part 8 of the	schedule—[OO NOT COMP	LETE THE REMAI	NDER OF PA	ART 6 AND 7.			
X No—Comp	olete blocks B and	C below.							
		BLO	CK B: CARR	IAGE OF PERM	MITTED DS	SEs			
Column 1: CALL SIGN	under FCC rules	and regulation e DSE Sche	ons prior to Jun dule. (Note: Th	part 2, 3, and 4 of t e 25, 1981. For furl e letter M below ref Act of 2010.)	ther explanat	ion 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 static C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station previous	les and regued pursuant les and sediment as defined al education (76. r DSE schedunt to individually carried HF station with the station with	lations cited be to the FCC mard in 76.5(kk) (76 al station [76.5965) (see paragrulle). ual waiver of FC ad on a part-tim grade-B c	e or substitute basi ontour, [76.59(d)(5)	e in effect on .57, 76.59(b) (1), 76.63(a) 3(a) referring stitution of gra	June 24, 1981, 76.61(b)(c), 7 referring to 76 to 76.61(d)] andfathered state 25, 1981	6.63(a) referring to .61(e)(1) ations in the		
Column 3:		stations ide	ntified by the le	parts 2, 3, and 4 of htter "F" in column 2			orksheet on page 1	4 of 3. DSE	
SIGN	BASIS		SIGN	BASIS		SIGN	BASIS		
WNPB-1 WNPB-2	C M		WOWK-3 WPGH-1	M D	1.00 1.00	WVPB-2 WVPB-3	M M	0.25 0.25	
WNPB-3	M	0.25		D	0.25			0.20	
WOUB-1	С	0.25	WSYX-1	D	0.25				
WOWK-1 WOWK-2	D M	0.25 1.00	WTAE-1 WVPB-1	D C	0.25 0.25				
						<u> </u>		5.75	
			BLOCK C: CC	MPUTATION OF	3.75 FEE				
ine 1: Enter the	e total number of	DSEs from	part 5 of this	schedule					
ine 2: Enter the	sum of permitted	d DSEs from	n block B abo	ve			111-		
				of DSEs subject 7 of this schedule		rate.	,		
ine 4: Enter gro	oss receipts from	space K (p	age 7)				x 0.03	75	Do any of the DSEs represen
ine 5: Multiply I	ine 4 by 0.0375 a	ınd enter sı	ım here						partially permited/ partially
ine 6: Enter tot	al number of DSE	s from line	3				х		nonpermitted carriage? If yes, see par
ino 7: Multiply l	ine 6 by line 5 an	d enter her	e and on line	2, block 3, space	I (page 7)			0.00	9 instructions.

	FOWNER OF CABLE OMMUNICATION						S'	YSTEM ID# 007912	NI
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	IUED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee

			1	1	L	Ш		I	

ACCOUNTING PERIOD: 2022/1

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **CEQUEL COMMUNICATIONS LLC** 007912 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Computating 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. the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute -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)). Carriage 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. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE **PERIOD** CARRIAGE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. of the Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . X No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE CALL SIGN DSE DSE DSE 0.00 0.00 **TOTAL DSEs** TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007912	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	7,737,226.03	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? 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? Tyes—Complete part 9 of this schedule. No—Complete the applicable section below.	S-	
	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 DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	ÞE	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure 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		
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.		
	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 DS 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)	SE .	
	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		

Name			SYSTEM ID# 007912
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 Syndicated Exclusivity		A. Enter 0.00300 of gross receipts (the amount in section 1)	
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. \$\$\\$\\$\$	
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	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 particle checked "Yes," use the total number of DSEs from part 5. bock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ur answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B belock 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 service area," see page (v) of the general instructions.	ow
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	_	our cable system retransmit the signals of any partially distant television stations during the accounting period? No—Complete the following sections.	
	L	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section	BEOOK B. NOT AKTIALLY DISTANT STATIONS—COMIT STATION OF BASE NATE 1 EL	
	1	Enter the amount of gross receipts from space K (page 7)	
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (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)	
		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	0.00

	EDULE. PAGE 17.		3 PERIOD: 2022/1
	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CEQL	JEL COMMUNICATIONS LLC	007912	
Section	If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts		8
	(the amount in section 1)		
		_	
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) ▶ \$		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	
	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broa stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multip	U	
	Space G.	ic charmer inte-	9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate	e fee, to exclude	Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To tal	re advantage of	of
this exc	clusion, you must:		Base Rate Fee
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are dista		and Syndicated
	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Detern and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fe		Exclusivity
	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		Surcharge
NOTE:	If any portion of your cable system is located within the top 100 television market and the station is not exemp	t in part 7 you	for Partially
must a	so compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A er, if your cable system is wholly located outside all major television markets, complete block A only.		Distant 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	Stations
	to that community.		
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers we the station's local service area. A subscriber located outside the local service area of a station is distant to the ne token, the station is distant to the subscriber.)		
Step 3	: Divide your subscribers into subscriber groups according to the complement of stations to which they are dist	ant. Each	
	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. No will have only one subscriber group when the distant stations it carried have local service areas that coincide.	e that a cable	
_	Iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your ber groups.	system's	
In each	section:		
• Identi	fy the communities/areas represented by each subscriber group.		
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant the bers in the group.	o all of the	
• If:			
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gaven If this schedule; or,	e it in parts 2, 3,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it 6 of this schedule.	in block B,	
• Add tl	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the gene paper SA3 form.	ral instructions	
page. DSEs f	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group or that group's complement of stations and total gross receipts from the subscribers in that group). You do not ctual calculations on the form.	(that is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007912 **CEQUEL COMMUNICATIONS LLC** 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 distant 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 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 a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate 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 agreement 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.

CEQUEL CON								S	YSTEM ID# 007912	Name
	В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR	EACH	SUBSCRI	BER GROUP		
		FIRST	SUBSCRIBER GROU	Р			SECOND	SUBSCRIBER GROU	JP	•
COMMUNITY/ AF	REA	SUBSC	RIBER GROUP 1	COMMUNITY/ AREA SUBSCI		RIBER GROUP 2		9 Computation		
CALL SIGN		DSE	CALL SIGN DSE		CALL SIGN DSE CALL SIGN DSE			DSE	of	
WPGH-1	Α	1.00	07122 01011	202	WPGH-1	D	1.00	07122 07011	202	Base Rate Fee
					WTAE-1	D	0.25	_		and
						<u> </u>	J			Syndicated
										Exclusivity
										-
										Surcharge
										for
							.			Partially
							.	_		Distant
										Stations
								_		
							.			
]			
Total DSEs				1.00	Total DSEs				1.25	
Gross Receipts F	irst Gro	oup	\$ 587	,248.61	Gross Receipts	Second	d Group	\$ 86,089.49		
Base Rate Fee F	irst Gro			,248.33	Base Rate Fee	Second		\$	1,066.86	
			SUBSCRIBER GROU	Р				SUBSCRIBER GROU	JP	
COMMUNITY/ AF	REA	SUBSC	RIBER GROUP 3		COMMUNITY/	AREA	SUBSC	RIBER GROUP 4		
CALL SIGN		DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE	
WPGH-1	D	1.00			WSYX-1	D	0.25			
WTAE-1	D	0.25			WVPB-1	С	0.25			
					WVPB-2	M	0.25			
					WVPB-3	М	0.25			

							•			
							•			
			•				•			
Total DSEs				1.25	Total DSEs				1.00	
Gross Receipts T	hird Gr	oup	\$ 14	,162.69	Gross Receipts	Fourth	Group	\$ 4.7	86,099.92	
Gross Receipts Third Group \$ 14,162.69 Base Rate Fee Third Group \$ 175.51			Base Rate Fee Fourth Group \$ 50,924.10							
			e fees for each subscri	ber group a	as shown in the bo	oxes abo	ove.			
Enter here and in	block	3, line 1, s _l	pace L (page 7)					\$	66,044.99	

		IICATIOI							007912	Name
	BL		COMPUTATION OF		TE FEES FOR	EACH				
FIFTH SUBSCRIBER GROUP				SIXTH SUBSCRIBER GROUP				JP	9	
COMMUNITY/ AREA SUBSCRIBER GROUP 5			COMMUNITY/ AREA SUBSCI		SUBSCR	RIBER GROUP 6		Computatio		
CALL SIGN	<u></u>	DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE	of
WNPB-1	С	0.25			WVPB-1	С	0.25			Base Rate Fo
WNPB-2	M	0.25			WVPB-2	M	0.25			and
WNPB-3	М	0.25			WVPB-3	М	0.25			Syndicated
WOWK-1	D	0.25								Exclusivity
WOWK-2	М	1.00								Surcharge
WOWK-3	М	1.00								for
WSAZ-1	D	0.25	•							Partially
										Distant
				i						Stations
										Stations
			-	<u> </u>						
Total DSEs				3.25	Total DSEs				0.75	
Gross Receipts	First Gro	oup	\$ 237	,927.30	Gross Receipts	Second	d Group	\$ 1	04,939.75	
Base Rate Fee	Eirot Cr	au n		,284.25	Base Rate Fee	Sacana	Croup		837.42	
Dase Rate ree	riist Git	лир	\$ 6	,204.25	Dase Rate Fee	Second	Gloup	\$	037.42	
	S	EVENTH	SUBSCRIBER GROU	JP			EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/	\REA	SUBSC	RIBER GROUP 7		COMMUNITY/	AREA	SUBSCR	RIBER GROUP 8		
CALL SIGN		DSE	CALL SIGN	DSE	CALL SIGN		DSE	CALL SIGN	DSE	
					WOUB-1	С	0.25			
		1 1								
			-	·						
								-		
Total DSEs				0.00	Total DSEs				0.25	
	Third Gr	oup	\$ 1,729	0.00	Total DSEs Gross Receipts	≨ Fourth	Group	\$	0.25	
Total DSEs Gross Receipts	Third Gr	oup	s 1,729			s Fourth	Group	\$ 1	-	
			s 1,729				·	s 1	-	
iross Receipts	Third Gr	roup	\$	0.00	Gross Receipts Base Rate Fee	Fourth	Group	\$	91,171.19	
Gross Receipts Base Rate Fee Base Rate Fee	Third Gr	oup	\$ 1,729 \$ e fees for each subscipace L (page 7)	0.00	Gross Receipts Base Rate Fee	Fourth	Group	\$ 1 \$	91,171.19	

LEGAL NAME OF OWNE			·			SY	STEM ID# 007912	Name
E	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCRI	BER GROUP		
FIRST SUBSCRIBER GROUP				SECOND SUBSCRIBER GROUP				•
COMMUNITY/ AREA	JNITY/ AREA SUBSCRIBER GROUP 1			COMMUNITY/ AREA	SUBSCRIBER GROUP 2			9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
		-						and
		-						Syndicated
								Exclusivity
		-			•		6	Surcharge
					•		d	for
		-						Partially
						H		Distant
						-	<u> </u>	Stations
						H		Stations
						H	ļ	
						H		
					•			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 587,	248.61	Gross Receipts Second	d Group	\$ 86	6,089.49	
3ase Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA	SUBSC	RIBER GROUP 3		COMMUNITY/ AREA SUBSCRIBER GROUP 4				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•			
		-						

		-			†		(
						H	b	
							ļ	
					.		ļ	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	<u>\$ 14,</u>	162.69	Gross Receipts Fourth	Group	\$ 4,786	6,099.92	
Base Rate Fee Third Group \$ 0.00			0.00	Base Rate Fee Fourth	Group	\$	0.00	
		e fees for each subscr pace L (page 7)	iber group a	as shown in the boxes ab	oove.	\$	0.00	

Name	STEM ID# 007912	51				TO LLO	IICA HOI	CEQUEL COMMUN	
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (В	
0	SIXTH SUBSCRIBER GROUP				FIFTH SUBSCRIBER GROUP				
9 Computat	SUBSCRIBER GROUP 6			COMMUNITY/ AREA	CRIBER GROUP 5		COMMUNITY/ AREA SUBSCRIB		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate									
and									
Syndicat									
Exclusiv						-			
Surchar									
for							-		
Partiall						-			
Distan		_				-			
Station							-		
Station		H							
	<u> </u>								
	<u> </u>								
						-	ļ		
	<u> </u>								
							.		
	0.00			Total DSEs	0.00			Γotal DSEs	
		\$ 104	l Group	Gross Receipts Second	927.30	\$ 237,	oup	Gross Receipts First Gr	
	4,939.75		. О. опр	0.000 . 1000.p.0 0000.10					
	4,939.75		. О. оцр	O. 000 1 1000 p.to 0000					
	0.00	\$		Base Rate Fee Second	0.00	\$	oup	3ase Rate Fee First Gr	
	0.00	\$ SUBSCRIBER GROUP	l Group		'	\$ SUBSCRIBER GROU			
	0.00		I Group		'		SEVENTH		
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP	I Group	Base Rate Fee Second	'	SUBSCRIBER GROU	SEVENTH		
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	0.00	SUBSCRIBER GROUP 8	I Group EIGHTH	Base Rate Fee Second	P	SUBSCRIBER GROUP 7	SEVENTH	COMMUNITY/ AREA	
	DSE	SUBSCRIBER GROUP 8 CALL SIGN	EIGHTH SUBSCR	COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP 7 CALL SIGN	DSE	COMMUNITY/ AREA	

ACCOUNTING PERIOD: 2022/1

FORM SA3E, PAGE 20.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007912
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9 Computation	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none ent Step 3: In line 3, subtract line 2 from line 1. This is the total number of Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts fig your actual calculations on this form.	for the VHF Grade B contour stations that were classified as ter zero. of DSEs used to compute the surcharge.
	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 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Second Group
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation
	SURCHARGE Third Group\$ SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for 6	SURCHARGE Fourth Group\$ each subscriber group as shown
	in the boxes above. Enter here and in block 4, line 2 of space L (page	

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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 007912				
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY 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 Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	□ First 50 major television market □ Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified an Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 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 section 3 or 4 or part 7 of this schedule.					
	FIFTH SUBSCRIBER GROUP	SIXTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation				
	total number of DSEs for this subscriber group subject to the surcharge computation					