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

SA1-2E Short Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

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

FOR COPYRIGH	Return completed workbook by email to	
DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov
2/28/2023	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.

Α	ACC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting Period		20222 Barcode Data Filing Period (optional - see instructions)
В		Instructions: 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.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the 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
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		SUDDENLINK COMMUNICATIONS
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)
		TYLER, TX 75701 (City, town, state, zip)
	INST	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
С		s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
	-	NEWPORT, AR
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)
	1	hear and a second se

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

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	004413
D	Instructions: List each separate community served by the cable system. A "comm separate and distinct community or municipal entity (including unincorporated counicorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will s community." Please use it as the first community on all future filings.	ommunities within unincorporated areas and including single, discrete serve as a form of system identification hereafter known as the "first
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobi	le home parks should be reported in parentheses below the identified
Served	city.	
	CITY OR TOWN	STATE
First Community	NEWPORT CAMPBELL STATION	AR
Community	DIAZ	AR AR
Add Rows as Necessary	JACKSON COUNTY	AR
Add Rows as Necessary	JACKSONPORT	AR
	TUCKERMAN	AR

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:							1-2E. PAGE		
Name	CEQUEL COMMUNICATIONS LLC										
_	SECONDARY TRANSMISSION	SERVICE: SU	BSCRIB	ERS AND RA	TES						
E	In General: The information in s					/ transmission s	ervice of th	ne cable			
	system, that is, the retransmission										
Secondary	about other services (including p						nose existi	ng on the			
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						le system	broken			
scribers and							, ,				
Rates	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 servi							a and the			
	Rate: Give the standard rate c unit in which it is generally billed.	-	-	•			-				
	category, but do not include disc	· ·	,		ly otanidan		mann a p				
	Block 1: In the left-hand block	•		-		•					
	systems most commonly provide that applies to your system. Note										
	categories, that person or entity			•		•					
	subscriber who pays extra for ca					0,					
	first set" and would be counted o	0			()						
	Block 2: If your cable system h	-		•							
	printed in block 1 (for example, ti with the number of subscribers a										
	sufficient.										
	BLC	DCK 1					BLOC				
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	RS	RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RATI		
	Residential:										
	Service to first set	1	1,411	50.00							
	 Service to additional set(s) 										
	 FM radio (if separate rate) 										
	Motel, hotel										
	Commercial		84	45.95							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SECO	ONDARY TRAN	NSMISS	IONS: RATES							
F	In General: Space F calls for rat										
	not covered in space E, that is, the service for a single fee. There are										
Services	furnished at cost or (2) services	•			•		• • • •				
Other Than	amount of the charge and the un										
Secondary	enter only the letters "PP" in the			f			1:-41				
ransmissions: Rates	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: List any services that your cable system furnished or offered during the accounting period that were not										
Huloo	listed in block 1 and for which a s				-						
	brief (two- or three-word) descrip										
		BLO	CK 1					BLOCK 2			
	CATEGORY OF SERVICE	RATE		ORY OF SER		RATE	CATEG	ORY OF SERVICE	RATE		
	Continuing Services:			tion: Non-resi	idential						
	• Pay cable	17.00		el, hotel							
	Pay cable—add'l channel Eire protection	19.00		nmercial							
	Fire protection Burglar protection			cable add'l ch	annal						
				cable-add'l ch							
	e .			protection							
	Installation: Residential	99.00		protection							
	Installation: Residential First set 	99.00 25.00	• Burg	glar protection							
	Installation: Residential • First set • Additional set(s)	99.00 25.00	• Burg Other s	-		40.00					
	Installation: Residential First set 	••••••	• Burg Other s • Rec	glar protection		40.00					
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	••••••	• Burg Other s • Rec • Disc	glar protection ervices:		40.00					

Name	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:		SY	STEM
Name	CEQUEL COMMUNIC	CATIONS LLC			0044
G		TELEVISION entify every television station (including tr em during the accounting period, except (
-	FCC rules and regulations	in effect on June 24, 1981, permitting the	e carriage of certain network progr	ams [sections	
Primary ansmitters:		e)(2) and (4), or 76.63 (referring to 76.61) as explained in the next paragraph.	(e)(2) and (4))]; and (2) certain sta	tions carried on a	
Television	Substitute Basis Stations	s: With respect to any distant stations car	ried by your cable system on a su	bstitute program	
		ules, regulations, or authorizations: re in space G—but do list it in space I (the	e Special Statement and Program	Log)—if the	
	station was carried only or	n a substitute basis. also in space I, if the station was carried	both on a substitute basis and als	e en como othor	
	basis. For further informati	on concerning substitute basis stations, s	see page (v) of the general instruc	tions.	
		on's call sign. <i>Do not</i> report origination pro ed with a station according to its over-the-	-	-	
	"WETA-2" as the same on	the form.	.		
	of license. For example, W	el number the FCC assigned to the telev /RC is channel 4 in Washington, D.C.	C C	,	
		h case whether the station is a network st ering the letter "N" (for network), "N-M" (fo	•		
	(for independent multicast), "E" (for noncommercial educational), or	"E-M" (for noncommercial educat		
		erms, see page (iv) of the general instruc on of each station. For U.S. stations, list t		n is licensed by the	
	FCC. For Mexican or Cana	adian stations, if any, give the name of the	e community with which the station	n is identified.	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATIO	N
	KAIT-1	8	N	JONESBORO, AR	
	KAIT-HD1	8	N-M	JONESBORO, AR	
Rows as Necessary	KARK-1	4	N	LITTLE ROCK, AR	
	KARK-2	4.2	I-M	LITTLE ROCK, AR	
	KARK-3	4.3	I-M	LITTLE ROCK, AR	
	KARK-4	4.4	I-M	LITTLE ROCK, AR	
	KARK-HD1	4	N-M	LITTLE ROCK, AR	
	KARZ-1	42	<u>I</u>	LITTLE ROCK, AR	
	KARZ-2	42.2	I-M	LITTLE ROCK, AR	
	KARZ-HD1	42	1.84		
			I-M	LITTLE ROCK, AR	
	KASN-1	38	I-WI	PINE BLUFF, AR	
			I I I-M		
	KASN-1	38	l	PINE BLUFF, AR	
	KASN-1 KASN-2	38 38.2	l I-M	PINE BLUFF, AR PINE BLUFF, AR	
	KASN-1 KASN-2 KASN-4	38 38.2 38.4	I I-M I-M	PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR	
	KASN-1 KASN-2 KASN-4 KASN-5	38 38.2 38.4 38.5	I I-M I-M I-M	PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR	
	KASN-1 KASN-2 KASN-4 KASN-5 KASN-HD1	38 38.2 38.4 38.5 38	I I-M I-M I-M I-M	PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR	
	KASN-1 KASN-2 KASN-4 KASN-5 KASN-HD1 KATV-1	38 38.2 38.4 38.5 38 7	I I-M I-M I-M I-M N	PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR LITTLE ROCK, AR	
	KASN-1 KASN-2 KASN-4 KASN-5 KASN-HD1 KATV-1 KATV-2	38 38.2 38.4 38.5 38 7 7 7.2	I I-M I-M I-M I-M N I-M	PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR LITTLE ROCK, AR LITTLE ROCK, AR	
	KASN-1 KASN-2 KASN-4 KASN-5 KASN-HD1 KATV-1 KATV-2 KATV-3	38 38.2 38.4 38.5 38 7 7.2 7.3	I I-M I-M I-M I-M N I-M I-M I-M	PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR LITTLE ROCK, AR LITTLE ROCK, AR LITTLE ROCK, AR	
	KASN-1 KASN-2 KASN-4 KASN-5 KASN-HD1 KATV-1 KATV-2 KATV-3 KATV-4	38 38.2 38.4 38.5 38 7 7.2 7.3 7.4	I I-M I-M I-M I-M N I-M I-M I-M	PINE BLUFF, AR LITTLE ROCK, AR	
	KASN-1 KASN-2 KASN-4 KASN-5 KASN-HD1 KATV-1 KATV-2 KATV-2 KATV-3 KATV-4 KATV-HD1	38 38.2 38.4 38.5 38 7 7.2 7.3 7.4	I I-M I-M I-M I-M N I-M I-M I-M	PINE BLUFF, AR LITTLE ROCK, AR	
	KASN-1 KASN-2 KASN-2 KASN-5 KASN-HD1 KATV-1 KATV-2 KATV-3 KATV-4 KATV-4 KATV-HD1 KKAP-1	38 38.2 38.4 38.5 38 7 7.2 7.3 7.4 7 36	I I-M I-M I-M I-M N I-M I-M I-M	PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR PINE BLUFF, AR INE BLUFF, AR LITTLE ROCK, AR	
	KASN-1 KASN-2 KASN-4 KASN-5 KASN-HD1 KATV-1 KATV-2 KATV-3 KATV-4 KATV-4 KATV-HD1 KKAP-1 KLRT-1	38 38.2 38.4 38.5 38 7 7.2 7.3 7.4 7 36 16	I I-M I-M I-M I-M I-M I-M I-M I-M I-M I-	PINE BLUFF, AR LITTLE ROCK, AR	

	LEGAL NAME OF OWNER	OF CABLE SYSTEM:		SYSTEM					
Name	CEQUEL COMMUNI	CATIONS LLC		0044					
	PRIMARY TRANSMITTERS	: TELEVISION							
G	In General: In space G, id carried by your cable syst	time basis under							
Primary	•	s in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61)							
Transmitters: Television		as explained in the next paragraph. s: With respect to any distant stations car	ried by your cable system on a si	ubetitute program					
Television	basis under specific FCC	rules, regulations, or authorizations:							
	• Do not list the station he station was carried only of	ere in space G—but do list it in space I (the	e Special Statement and Program	n Log)—if the					
		also in space I, if the station was carried	both on a substitute basis and al	so on some other					
		tion concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pro							
		ed with a station according to its over-the-a	-	-					
	"WETA-2" as the same or		inion station for broadcasting ava	r the cir in its community					
		nel number the FCC assigned to the televi VRC is channel 4 in Washington, D.C.	ISION Station for broadcasting ove						
	Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial								
			•						
	educational station, by en	tering the letter "N" (for network), "N-M" (fo	or network multicast), "I" (for indep	pendent), "I-M"					
	educational station, by en (for independent multicas For the meaning of these	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct	or network multicast), "I" (for indep "E-M" (for noncommercial educa tions in the paper SA1-2 form.	pendent), "I-M" tional multicast).					
	educational station, by en (for independent multicas: For the meaning of these Column 4: Give the locat	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th	or network multicast), "I" (for indep "E-M" (for noncommercial educa tions in the paper SA1-2 form. he community to which the statio	pendent), "I-M" tional multicast). n is licensed by the					
	educational station, by en (for independent multicas: For the meaning of these Column 4: Give the locat	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct	or network multicast), "I" (for indep "E-M" (for noncommercial educa tions in the paper SA1-2 form. he community to which the statio	pendent), "I-M" tional multicast). n is licensed by the					
	educational station, by en (for independent multicas: For the meaning of these Column 4: Give the locat	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th	or network multicast), "I" (for indep "E-M" (for noncommercial educa tions in the paper SA1-2 form. he community to which the statio	pendent), "I-M" tional multicast). n is licensed by the					
	educational station, by en (for independent multicas: For the meaning of these Column 4: Give the locat	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th	or network multicast), "I" (for indep "E-M" (for noncommercial educa tions in the paper SA1-2 form. he community to which the statio	pendent), "I-M" tional multicast). n is licensed by the					
	educational station, by en (for independent multicas: For the meaning of these Column 4: Give the locat FCC. For Mexican or Can	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the	or network multicast), "I" (for indep "E-M" (for noncommercial educa tions in the paper SA1-2 form. he community to which the statio e community with which the statio	pendent), "I-M" tional multicast). n is licensed by the n is identified.					
	educational station, by en (for independent multicas) For the meaning of these Column 4: Give the locat FCC. For Mexican or Can 1. CALL SIGN	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	or network multicast), "I" (for indep "E-M" (for noncommercial educa- tions in the paper SA1-2 form. the community to which the station a community with which the station 3. TYPE OF STATION	bendent), "I-M" tional multicast). n is licensed by the n is identified. 4. LOCATION OF STATION					
	educational station, by en (for independent multicas) For the meaning of these Column 4: Give the locat FCC. For Mexican or Can 1. CALL SIGN KTEJ-2	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 19.2	er network multicast), "I" (for indeg "E-M" (for noncommercial educa- tions in the paper SA1-2 form. the community to which the station community with which the station 3. TYPE OF STATION E-M	endent), "I-M" tional multicast). n is licensed by the n is identified. 4. LOCATION OF STATION JONESBORO, AR					
	educational station, by en (for independent multicas: For the meaning of these Column 4: Give the locat FCC. For Mexican or Can 1. CALL SIGN KTEJ-2 KTEJ-3	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 19.2 19.3	or network multicast), "I" (for indeg "E-M" (for noncommercial educa- tions in the paper SA1-2 form. the community to which the station community with which the station 3. TYPE OF STATION E-M E-M	bendent), "I-M" tional multicast). n is licensed by the n is identified. 4. LOCATION OF STATION JONESBORO, AR JONESBORO, AR					
	educational station, by en (for independent multicas) For the meaning of these Column 4: Give the locat FCC. For Mexican or Can 1. CALL SIGN KTEJ-2 KTEJ-3 KTEJ-4	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 19.2 19.3 19.4	er network multicast), "I" (for indeg "E-M" (for noncommercial educa- tions in the paper SA1-2 form. the community to which the station community with which the station 3. TYPE OF STATION E-M E-M E-M	eendent), "I-M" tional multicast). n is licensed by the n is identified. 4. LOCATION OF STATION JONESBORO, AR JONESBORO, AR					
	educational station, by en (for independent multicas) For the meaning of these Column 4: Give the locat FCC. For Mexican or Can 1. CALL SIGN KTEJ-2 KTEJ-3 KTEJ-4 KTEJ-HD1	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list the adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 19.2 19.3 19.4 19	or network multicast), "I" (for indeg "E-M" (for noncommercial educa- tions in the paper SA1-2 form. the community to which the station community with which the station 3. TYPE OF STATION E-M E-M E-M E-M E-M	bendent), "I-M" tional multicast). n is licensed by the n is identified. 4. LOCATION OF STATION JONESBORO, AR JONESBORO, AR JONESBORO, AR					
	educational station, by en (for independent multicas) For the meaning of these Column 4: Give the locat FCC. For Mexican or Can 1. CALL SIGN KTEJ-2 KTEJ-3 KTEJ-4 KTEJ-HD1 KTHV-1	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 19.2 19.3 19.4 19 11	r network multicast), "I" (for indep "E-M" (for noncommercial educa- tions in the paper SA1-2 form. the community to which the station community with which the station 3. TYPE OF STATION E-M E-M E-M E-M N	bendent), "I-M" tional multicast). n is licensed by the n is identified. 4. LOCATION OF STATION JONESBORO, AR JONESBORO, AR JONESBORO, AR JONESBORO, AR JONESBORO, AR LITTLE ROCK, AR					
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EGAL NAME OF									SYSTEM 0044
	every radio s	tation ca	arried on a separate and discre nerally receivable by your cabl					ied on an	н
eceivable if (1) in the basis of r for detailed info aper SA1-2 for Column 1: Id Column 2: S Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether to the radio stat this by placing ive the station	y the sys be recein t the Cop sign of e the static ion's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. on is AM or FM. nal was electronically processo k mark in the "S/D" column. on (the community to which th the community with which the	t ti sys nis ed	e system's hea stem's FM anter point, see page by the cable sy station is licens	adend, and (2) nna, during ce e (v) of the ge ystem as a se ed by the FCC) it can b rtain sta neral ins parate a	e expected, ted intervals. tructions in the. nd discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	T	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
UNEL OIGIN		3,0	LOOATION OF STATION	1	UNEL OIGIN		5,0	LOOATION OF STATION	
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Accounting Perio	d: 2022/2						FORM SA1-2E. PAGE 5
	LEGAL NAME OF OWNER OF O	CABLE SYST	EM:				SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LL	.C				004413
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG			
Substitute	In General: In space I, identif substitute basis during the ac explanation of the programmi	counting pe	riod, under spec	cific present and former FC	C rules, regula	itions, or authoriza	ations. For a further
Carriage:	1. SPECIAL STATEMENT	CONCER	NING SUBSTI	TUTE CARRIAGE			
Special	 During the accounting peri 	od, did you	r cable system	carry, on a substitute basi	s, any nonnet	work television p	program
Statement and Program Log	broadcast by a distant stat		,				
Program Log	2						
	Note: If your answer is "No,	" leave the	rest of this pag	e blank. If your answer is "	'Yes," you mu	ist complete the p	program
	log in block 2.	DDOCDA	Me				
	2. LOG OF SUBSTITUTE In General: List each subst			e line. I lee abbreviations v	wherever nos	sible if their mea	anina is
	clear. If you need more space				wherever pos		
				sion program ("substitute p			
	period, was broadcast by a						
	under certain FCC rules, reg						
	Do not use general categori "NBA Basketball: 76ers vs.		vies of baske	tball. List specific program	Tulles, for exa	ample, TLOVE LU	icy of
			lcast live, enter	"Yes." Otherwise enter "N	lo."		
				sting the substitute progra			
				e community to which the			or, in
	the case of Mexican or Can						
			when your syst	em carried the substitute p	orogram. Use	numerals, with the	ne month
	first. Example: for May 7 giv		substitute prov	gram was carried by your o	cable system	List the times ac	curately
	to the nearest five minutes.						
	stated as "6:00–6:30 p.m."						
				was substituted for progra			
	to delete under FCC rules a						
	was substituted for program effect on October 19, 1976.	iming that y	our system was	s permitted to delete unde	r FCC rules a	nd regulations in	
					WHE	N SUBSTITUTE	Ξ
	S	UBSTITUT	E PROGRAM		CARRI	AGE OCCURRE	
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM —	TO
						—	

Accounting Period:	2022/2	FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 004413
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. End all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ter the total of
L Copyright Royalty Fee	 COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less. Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$ Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600. See page (vi) of the general instructions located in the paper SA1-2 form for more information. 	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00. Line 1. Royalty fee for accounting period	his six-month
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)
	1. Base amount under statutory formula \$ 263,800.00	,
	2. Enter amount of gross receipts from space K	
	3. Subtract line 2 from line 1	
	4. Enter the amount of gross receipts from space K	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiply line 6 by .005 (enter figure here)	
	8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527	,600)
	1. Enter the amount of gross receipts from space K \$ 407,457.51	
	2. Base amount under statutory formula \$ 263,800.00	
	3. Subtract line 2 from line 1	
	4. Multiply line 3 by .01	1,436.58
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	\$ 2,755.58
	FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	2,755.58
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	20.00
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$ 2,775.58
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for m	

Accounting Period:	2022/2				FORM SA1-2E. PAGE 7.
Name		OWNER OF CABLE SYSTEM:			SYSTEM ID# 004413
M Channels	to its subscrib 1. Enter the to system car 2. Enter the to on which th	ers, and (2) the cable system otal number of channels on wh ried television broadcast static otal number of activated channel ne cable system carried televis	's total number of activated channels nich the cable ons		
N Individual to Be Contacted		TO BE CONTACTED IF FUR ct about this statement of acco	THER INFORMATION IS NEEDED (ount.)	ldentify an individual	
for Further Information	Name	RODNEY HASKINS		Telephoi	ne (903) 579-3152
	Address 	3027 S SE LOOP 32 (Number, street, rural route, apa TYLER, TX 75701 (City, town, state, zip)	-		
	Email	RODNEY.HAS	SKINS@ALTICEUSA.COM	Fax (optional	
0	CERTIFICATIO	N (This statement of account r	must be certified and signed in accord	lance with Copyright Office regulation	s)
Certification			one, <i>but only one</i> , of the boxes.) partnership) I am the owner of the ca	ble system as identified in line 1 of spac	e B; or
		in line 1 of space B and that	the owner is not a corporation or partne	uthorized agent of the owner of the cabl rrship; or nership) of the legal entity identified as o	
	are true, comp		d hereby declare under penalty of law t my knowledge, information, and belief,	hat all statements of fact contained here and are made in good faith.	in
	1		X /s/ Alan Dannenba	um	_
			Enter an electronic signature on the li Enter signature using an "/s/ signatur	•	
		Typed or printe	ed name: ALAN DANNENBA	NUM	
		Title:	SVP, PROGRAMMING	partnership)	
		Date:		2/28/2023	

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

ounting Period: 2022/2	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
QUEL COMMUNICATIONS LLC	004413
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** and enter here	
in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	
(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
 * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. 	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
 * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i>. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. 	
 * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i>. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please 	
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