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	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting		20222 Barcode Data Filing Period (optional - see instructions)
Period		
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)
	INSTR	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:
		SAGUARO CORRECTIONAL FACILITY
		MAILING ADDRESS OF CABLE SYSTEM:
	2	
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)
L		

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:	SYSTEM ID#							
Name	CEQUEL COMMUNICATIONS LLC	063122							
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, d unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the 'community." Please use it as the first community on all future filings.								
Area Served	city.								
	CITY OR TOWN	STATE							
First	ELOY	AZ							
Community	(SAGUARO CORR)								
Add Rows as Necessary									
Add nows as necessary									

	FO LEGAL NAME OF OWNER OF CABLE SYSTEM:										
Name	CEQUEL COMMUNICATIONS LLC										
E	SECONDARY TRANSMISSION In General: The information in s					transmission se	ervice of th	ie cable			
	system, that is, the retransmission	em, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information									
Secondary	about other services (including p						iose existi	ng on the			
Transmission											
Service: Sub- scribers and	down by categories of secondary	•									
Rates	each category by counting the n										
	separately for the particular serv	-				• •		0			
	Rate: Give the standard rate c	-	-	•			-				
	unit in which it is generally billed.	· · ·	,		y standaro	d rate variations	within a pa	articular rate			
	category, but do not include disc Block 1: In the left-hand block				es of seco	ndary transmiss	ion servic	e that cable			
	systems most commonly provide			0							
	that applies to your system. Note										
	categories, that person or entity						•				
	subscriber who pays extra for ca					in the count und	er "Servic	e to the			
	first set" and would be counted of Block 2: If your cable system					service that are	different fr	om those			
	Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together										
	with the number of subscribers a										
	sufficient.										
	BLO	OCK 1 NO. OF					BLOC	K 2 NO. OF			
	CATEGORY OF SERVICE	SUBSCRIBE	RS	RATE	CATI	EGORY OF SEF	RVICE	SUBSCRIBERS	RATE		
	Residential:										
	 Service to first set 		0	-							
	 Service to additional set(s) 										
	 FM radio (if separate rate) 										
	Motel, hotel										
	Commercial		83	42.41							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRAN	ISMISS	IONS: RATES							
F	In General: Space F calls for rat		'		•						
Г	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										
Services	furnished at cost or (2) services	•	-				0 ()				
Other Than	amount of the charge and the ur										
Secondary	enter only the letters "PP" in the	rate column.	-			-		5 ,			
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.										
Rates	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.										
	, , ,	BLOC						BLOCK 2			
	CATEGORY OF SERVICE			ORY OF SER	/ICE	RATE	CATEG	ORY OF SERVIC	E RATE		
	Continuing Services:			tion: Non-resi							
	• Pay cable	-	• Mot	el, hotel							
	• Pay cable—add'l channel	-		nmercial							
	Fire protection		• Pay	cable							
	•Burglar protection		-	cable-add'l ch	annel						
	Installation: Residential		-	protection							
	First set	-		glar protection							
	 Additional set(s) 	- (ervices:							
	• FM radio (if separate rate)		• Rec	connect		-					
	• Converter		• Disc	connect							
				let relocation		-					
	1		2.46				·····				
			• Mov	ve to new addre	SS	-					

0	2022/2			FORM SA1-2E. PAGE						
Name	LEGAL NAME OF OWNER C	F CABLE SYSTEM:		SYSTEM II						
	CEQUEL COMMUNIC	ATIONS LLC		06312						
	PRIMARY TRANSMITTERS: TELEVISION									
G	carried by your cable syste FCC rules and regulations	General: In space G, identify every television station (including translator stations and low power television stations) ied by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under C rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 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								
Primary ansmitters: ſelevision	substitute program basis, a Substitute Basis Stations	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								
	• Do <i>not</i> list the station her station was carried <i>only</i> or			0,						
	basis. For further informati Column 1: List each statio	also in space I, if the station was carried on concerning substitute basis stations, s n's call sign. <i>Do not</i> report origination pr d with a station according to its over-the-	see page (v) of the general instruc ogram services such as HBO, ESI	tions. PN, etc. Identify each						
	"WETA-2" as the same on Column 2: Give the chann	0	.							
	Column 3: Indicate in each educational station, by ent	n case whether the station is a network s ering the letter "N" (for network), "N-M" (fo	or network multicast), "I" (for indep	endent), "I-M"						
	For the meaning of these t Column 4: Give the location	(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: 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.								
	1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION 4. LOCATION									
	KAET-1	8	E	PHOENIX, AZ						
	KNXV-1	15	N	PHOENIX, AZ						
Rows as Necessary	KPHO-1	5	N	PHOENIX, AZ						
	KPNX-1	12	N	MESA, AZ						
	KSAZ-1	10	l	PHOENIX, AZ						
	KTVK-1	3	I	PHOENIX, AZ						
	KTVK-1 KTVW-1	3 33	<u> </u>	PHOENIX, AZ PHOENIX, AZ						
			1 1 1	·····						
	KTVW-1	33	I I	PHOENIX, AZ						
	KTVW-1	33	1 1 1	PHOENIX, AZ						
	KTVW-1	33	1 1 1	PHOENIX, AZ						
	KTVW-1	33		PHOENIX, AZ						
	KTVW-1	33	I I	PHOENIX, AZ						
	KTVW-1	33		PHOENIX, AZ						
	KTVW-1	33		PHOENIX, AZ						
	KTVW-1	33		PHOENIX, AZ						
	KTVW-1	33		PHOENIX, AZ						
	KTVW-1	33		PHOENIX, AZ						
	KTVW-1	33		PHOENIX, AZ						
	KTVW-1	33		PHOENIX, AZ						

	MMUNICA	TIONS	LLC						063
	t every radio s	tation ca	arried on a separate and discrunter and discrunter and discrunter and the second second second second second se					ied on an	н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf idgnal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. dentify the call tate whether the radio stat this by placing Sive the station	y the sys be recein t the Cop sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under (tem whenever it is received a ved at the headend, with the s pyright Office regulations on th each station carried. on is AM or FM. nal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the	it t sy his sec	he system's hea stem's FM anter s point, see page d 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		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		0,0			0/122 01011	7 01 1	0,0		
				-					
				ļ ļ					

Name Elect. INSE OF OWNER OF CARE SYSTEM: SYSTEM ID: 063122 I SUBSTTUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space 1, identify yeary nonextrox feetwisking rogam. brandacate by a disket station; that your calle system carried on a space 1 disket base and tome FCC routes, regulations, or a substitute transport of the programming that must be included in the log, ase page (v) of the general instructions in the page SA-2 form. Image: Statistic base and tome FCC routes, regulations, or a substitute basis. any nonnetwork television program Transport of the programming that transport or substitute basis. any nonnetwork television program Transport of the programming that transport on a separate line. Use a bibariation program Transport of the programming of another station and that your cable system substitute for programming of another station and that your cable system substitute program. Tubor Locy or the cable and the cable program transport to the statistic program Transport of the cable of the programming of the substitute of the programming of the statistic program. The cable of the programming of the statistic program transport and transport of the statistic program. The cable of the programming of the statistic program. The cable of the programming of the statistic program transport is block to any transport of the statistic program. The cable of the program transport of the program transport of the program transport the statis the of the program transport of the program transpo	Accounting Perio	d: 2022/2						FORM SA1-2E. PAGE 5			
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In Generat: In space 1, identify every nonnetwork ideivision program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 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? • VES × NO Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, plaase add additional rows to the tables. Column 1: Give the title regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: TGCr vs. Bulls." Column 3: Give the month and day when your system carried by your cable system. Use numerals, with the month first. Example: or May 7 give "57.". Column 3: Give the month and day when your system carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m.". Column 3: Give the		LEGAL NAME OF OWNER OF (CABLE SYST	EM:				SYSTEM ID#			
In General: In space I, Identify <i>every nonetwork television program</i> , broadcast by a <i>distant</i> station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. I. 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," leave the rest of this page blank. If your answer is "Yes," you must complete the program broadcast by a distant station? Note: If your nestwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station broadcast by a distant station and that your cable system substitute for the programming of another station control is close that the of every nonnetwork television program. Column 1: Give the tile of every nonnetwork television program. Column 3: Give the call sign of the station noradcasting the substitute for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program. Column 3: Give the call sign of the station toracdasting the substitute program. Column 6: Give the month and day when your system carried the substitute program. Column 6: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57.". Column 6: State the times when the substitute program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting perio	Name	CEQUEL COMMUNICA	TIONS LL	.C				063122			
Substitute carriage: Special Statement and Program Log Is SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE - Unring 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," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you and more space, please add additional rows to the tables. Column 1: Give the life of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substitute for the programming of another station on a dubtic system substitute program is the space line instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball." Ger vers. Bulls." Column 3: Give the call sign of the station broadcast tile, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian station's location (the community to which the station is identified). Column 4: Give the broadcast station's location (the community to which the station is identified). Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to delete under FCC rules and regulations in effect on October 19, 1976. Yung 1: SUBSTITUTE PROGRAM Yung 2: SUBSTITUTE COMERAM Yung 3:<		SUBSTITUTE CARRIAGE	: SPECIAI		T AND PROGRAM LOG						
Substitute Carriage: Special Statement and Program Log Provide the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL, STATEMENT CONCERNING SUBSTITUTE CARRIAGE Special Statement and Program Log 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? Image: Concentration of the program concentration of the program broadcast by a distant station? Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. I. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute forgram") that, during the accounting period, was broadcast by a distant station and that your cable system substitute of the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball". Tofer vs. Bulls." Column 1: Give the trans of the station is identified). Column 2: If the program was broadcast tabion's location (the community with which the station is identified). Column 2: If the program was the additional row sore the substitute program. Use numerals, with the month first. E		In General: In space I, identit	fy every non	network televisi	on program, broadcast by a	<i>distant</i> statio	on, that your cable	system carried on a			
Special Statement and Program Log • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? • VES No Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program. Column 2: Give the broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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 licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 6: Give the month and day when your system carried by your cable system. List the times accurately to the nearest five minutes. Example: a program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period, enter the lister "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rule	Substitute	substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. F									
Special Statement and Program Log • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Image: Comparison of the comparison o	Carriage:										
Program Log broadcast by a distant station? YES X NO Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station nunder certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball. There yos. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: Give the month and day when your system carried by your cable system. List the times accurately to the nearest five minutes. Example: a program was substitute for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system wa		• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program									
Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is identified). Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m." Column 7: Enter the letter "R' if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was substitute for Orclues and regulations in effect during the ac		broadcast by a distant stat	ion?								
log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the call sign of the station broadcasting the substitute program. Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period, enter the letter "P" if the listed program was substituted for programming that your system was neffect on October	i rogram zog	Note: If your anowar is "No.	" loovo tho	root of this pag	o blonk. If your onowor in "	'Voo " vou mi					
2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the total sign of the station broadcasting the substitute program. Column 4: Give the broadcast 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). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by a system form 6:0:1:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period, enter the letter "P" if the listed program was substituted for programming that your system yas permitted to delete under FCC rules a		-	leave life	rest or this pag	e blarik. Il your allswel is	res, you mu	ust complete the p	Jiogram			
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INTEL OF TROOMENT Yes or No CALL SIGN 4. STATION'S LOCATION AND DAY FROM — TO Image: State Sta			1								
Image: second					4. STATION'S LOCATION			то			
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Accounting Period:	2022/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	S	YSTEM ID# 063122
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent 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.	nission service Imount, see	,017.58 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less. • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600. See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800.	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00.	his six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	\$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	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		0.00
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	,600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Register 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# 063122
M Channels	to its subscrit 1. Enter the to system can 2. Enter the to on which th	bers, and (2) the cable system otal number of channels on wh ried television broadcast static otal number of activated channels be cable system carried televis	ions	the accounting period.	8 39
N Individual to Be Contacted		TO BE CONTACTED IF FUR ct about this statement of acc	RTHER INFORMATION IS NEEDED (Identify count.)	an individual	
for Further Information	Name	RODNEY HASKINS	5	Telephone (903) 5	79-3152
	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	
	CERTIFICATIO	N (This statement of account i	must be certified and signed in accordance w	vith Copyright Office regulations)	
O Certification			x one, <i>but only one</i> , of the boxes.) r partnership) I am the owner of the cable syste	em as identified in line 1 of space B; or	
		in line 1 of space B and that icer or partner) I am an officer	oration or partnership) I am the duly authorize the owner is not a corporation or partnership; o er (if a corporation) or a partner (if a partnership)	r	
	are true, com		nd hereby declare under penalty of law that all st f my knowledge, information, and belief, and are		
	ĺ		X /s/ Alan Dannenbaum		
			Enter an electronic signature on the line abov Enter signature using an "/s/ signature" (e.g.,		
		Typed or printe	ed name: ALAN DANNENBAUM		
		Title:	SVP, PROGRAMMING (Title of official position held in corporation or partnersh	ip)	
		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
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID:
QUEL COMMUNICATIONS LLC	063122
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 Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x days	
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 <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.	
Owner	
Owner Address	
Address	
Address ID number	
Address	

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