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 COPYRIG	Return completed workbook by email to	
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>
General instructions are located in the first tab of this workbook.	8-29-23	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.
Δ			

Α	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		2023/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20231 Barcode Data Filing Period (optional - see instructions)
Accounting 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)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these are 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:
	<u> </u>	SENECAVILLE, OH
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)
		•

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	030047							
D	Instructions: List each separate community served by the cable system. A "comm separate and distinct community or municipal entity (including unincorporated co unincorporated 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.	nunity" is the same as a "community unit" as defined in FCC rules: "a mmunities within unincorporated areas and including single, discrete							
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobicity.	le home parks should be reported in parentheses below the identified							
		STATE							
First Community	SENECAVILLE BYESVILLE	ОН ОН							
Community	JACKSON TWP	ОН							
Add Rows as Necessary	PLEASANT CITY	ОН							
Add nows as necessary	QUAKER CITY	ОН							
	SALESVILLE	ОН							
	VALLEY TWP	ОН							

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:							M SA1-2E. PA			
Name	CEQUEL COMMUNICAT	IONS LLC							030)04		
	SECONDARY TRANSMISSION											
E	In General: The information in s					r transmission s	ervice o	of the cable				
	system, that is, the retransmission			-								
Secondary	about other services (including p						nose ex	isting on the				
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both							m brokon				
scribers and	down by categories of secondary	•										
Rates	each category by counting the nu											
	separately for the particular serv											
	Rate: Give the standard rate c	-	-	•				-				
	unit in which it is generally billed. category, but do not include disc	· · ·	,		y stanuari		within	a particular rate				
	Block 1: In the left-hand block				es of seco	ondary transmis	sion sei	vice that cable				
	systems most commonly provide											
	that applies to your system. Note			-		-						
	categories, that person or entity subscriber who pays extra for ca				• •							
	first set" and would be counted o											
	Block 2: If your cable system I	•		-								
	printed in block 1 (for example, ti											
	with the number of subscribers a sufficient.	no rates, in the	e ngnt-na		or three	-word descriptio	n or the	e service is				
		DCK 1					BLC	DCK 2				
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	ERS	RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBE	RS RA			
	Residential:											
	Service to first set		540	50.00								
	 Service to additional set(s) 											
	• FM radio (if separate rate)											
	Motel, hotel											
	Commercial		12	45.95								
	Converter											
	• Residential											
	Non-residential											
	SERVICES OTHER THAN SEC		NSMISS	IONS: RATES								
F	In General: Space F calls for rat	•	,									
Г	not covered in space E, that is, the											
Services	service for a single fee. There ar furnished at cost or (2) services	•					•	· /				
Other Than												
Secondary	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.											
ransmissions:	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											
Rates	listed in block 1 and for which a s				•	0.						
	brief (two- or three-word) descrip											
		BLO	CK 1					BLOCK	2			
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SERV	ICE	RATE	CAT	EGORY OF SERV	/ICE RA	ATE		
	Continuing Services:		Installa	tion: Non-resid	dential							
	• Pay cable	17.00		el, hotel								
	 Pay cable—add'l channel 	19.00		nmercial								
	Fire protection		5	cable								
	•Burglar protection		-	cable-add'l cha	annel							
	Installation: Residential			protection								
	• First set	99.00		glar protection								
	• Additional set(s)	25.00		ervices:		40.00						
	• FM radio (if separate rate)			connect		40.00						
	Converter			connect		05.00						
			• Out	let relocation		25.00						
				ve to new addre		99.00						

-				
Name				SYSTEM 030
	CEQUEL COMMUNIC			
G		entify every television station (including tra m during the accounting period, <i>except</i> (,
	•	in effect on June 24, 1981, permitting the		•
imary smitters:		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	ations carried on a
evision	Substitute Basis Stations	s: With respect to any distant stations car	ied by your cable system on a su	ibstitute program
		ules, regulations, or authorizations: e in space G—but do list it in space I (the	Special Statement and Program	Log)—if the
	station was carried only or	a substitute basis.		
		also in space I, if the station was carried I on concerning substitute basis stations, se		
	Column 1: List each static	n's call sign. Do not report origination pro	gram services such as HBO, ESI	PN, etc. Identify each
		d with a station according to its over-the-a	ir designation. For example, repo	ort multistream
	"WETA-2" as the same on Column 2: Give the chann	the form. lel number the FCC assigned to the televi	sion station for broadcasting over	the air in its community
		RC is channel 4 in Washington, D.C.		
		n 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 educati	
		erms, see page (iv) of the general instruct on of each station. For U.S. stations, list th		is licensed by the
		idian stations, if any, give the name of the	•	-
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WBNS-1	10	N	COLUMBUS, OH
	WBNS-1 WHIZ-1	10 18	N N	COLUMBUS, OH ZANESVILLE, OH
Vecessary	WBNS-1 WHIZ-1 WHIZ-HD1	10 18 18	N N N-M	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH
lecessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1	10 18 18 44	N N N-M E	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH
Vecessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1	10 18 18 44 6	N N N-M	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH
Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1	10 18 18 44	N N N-M E	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH
s Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1	10 18 18 44 6	N N N-M E	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH
ıs Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
; as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
vs as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH
s as Necessary	WBNS-1 WHIZ-1 WHIZ-HD1 WOUC-1 WSYX-1 WSYX-2	10 18 18 44 6 6.2	N N-M E N I	COLUMBUS, OH ZANESVILLE, OH ZANESVILLE, OH CAMBRIDGE, OH COLUMBUS, OH COLUMBUS, OH

LEGAL NAME OF	eriod: 2023		YSTEM:					SYSTEM II
CEQUEL CO	MMUNICA	TIONS	LLC					03004
PRIMARY TRANSMITTERS: RADIO 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.								Н
eceivable if (1) on the basis of n or detailed info paper SA1-2 for Column 1: Id Column 2: St	it is carried by nonitoring, to rmation abou m. lentify the call tate whether t	/ the sys be receiv t the Cop sign of e he statio	I-Band FM Carriage: Under O tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. n is AM or FM. nal was electronically process	t the system's hea system's FM anter his point, see page	adend, and (2) nna, during ce e (v) of the ge) it can b ertain sta neral ins	e expected, ted intervals. tructions in the.	Primary Transmitters Radio
Column 4: G	ive the statior	n's locatio	mark in the "S/D" column. on (the community to which the the community with which the			C or, in tl	he case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
						[

Accounting Perio	d: 2023/1						FOI	RM SA1-2E. PAGE 5.						
News	LEGAL NAME OF OWNER OF	CABLE SYSTI	EM:					SYSTEM ID#						
Name	CEQUEL COMMUNICA	TIONS LL	_C					030047						
	SUBSTITUTE CARRIAGE	E: SPECIAL	L STATEMEN	T AND PROGRAM LOG	ì									
Substitute	In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried of substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a furth explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.													
Carriage:	1. SPECIAL STATEMENT	-			5									
Special	During the accounting per	-			is any nonnet	twork telev	vision progra	m						
Statement and	broadcast by a distant stat				,,		· ·	XNO						
Program Log	5						YES							
	Note: If your answer is "No	," leave the r	rest of this pag	e blank. If your answer is	"Yes," you mu	ist comple	te the progra	am						
	log in block 2.													
	2. LOG OF SUBSTITUTE			to line. I lee abbreviatione	whorever pee	aibla if th	oir mooning	ia						
	In General: List each subst clear. If you need more spa				wherever pos		en meaning	15						
				sion program ("substitute	program") that	it, during th	ne accountin	g						
	period, was broadcast by a													
	under certain FCC rules, re Do not use general categor													
	"NBA Basketball: 76ers vs.	Bulls."			-	ampie, i L	LOVE LUCY O	I						
				"Yes." Otherwise enter "										
				sting the substitute progra e community to which the		nsed by th	e FCC or in							
	the case of Mexican or Can													
	Column 5: Give the mon	nth and day v	when your syst	em carried the substitute	program. Use	numerals	, with the mo	onth						
	first. Example: for May 7 giv					1 :- 4 41 4:		- 4 -						
	to the nearest five minutes.			gram was carried by your ad by a system from 6:01:				ely						
					10 p.iii. to 0.2	0.00 p.m.								
	stated as "6:00–6:30 p.m."				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>									
	stated as "6:00–6:30 p.m." Column 7: Enter the lette	er "R" if the I	listed program											
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a	er "R" if the I and regulatio	listed program ons in effect du	ring the accounting period	; enter the let	ter "P" if th	e listed prog							
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program	er "R" if the I and regulatio	listed program ons in effect du	ring the accounting period	; enter the let	ter "P" if th	e listed prog							
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a	er "R" if the I and regulatio	listed program ons in effect du	ring the accounting period	l; enter the let er FCC rules a	ter "P" if th ind regulat	e listed prog ions in							
	stated as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo	listed program ons in effect du	ring the accounting period s permitted to delete unde	l; enter the let er FCC rules a	ter "P" if th	ie listed prog tions in	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo	listed program ons in effect du our system wa	ring the accounting period s permitted to delete unde	l; enter the let er FCC rules a	ter "P" if th ind regulat N SUBST	ie listed prog tions in	ıram						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
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	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
	stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a was substituted for program effect on October 19, 1976.	er "R" if the I and regulatio nming that yo BUBSTITUT 2. LIVE?	iisted program ons in effect du our system wa E PROGRAM 3. STATION'S	ring the accounting period s permitted to delete unde	t; enter the let er FCC rules a WHE CARR 5. MONTH	ter "P" if th ind regulat EN SUBST IAGE OCC	ie listed prog tions in FITUTE CURRED TIMES	Jram 7. REASON FOR						
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Accounting Period:	2023/1 FC	ORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 030047
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the to all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission se (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, spage (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.	ervice
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less. Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800. Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$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 this six-m accounting period is \$52.00.	onth
	Line 1. Royalty fee for accounting period	
	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 \$137,100)	
	1. Base amount under statutory formula \$ 263,800.00	
	2. Enter amount of gross receipts from space K \$ 150,680.73	
	3. Subtract line 2 from line 1	
	4. Enter the amount of gross receipts from space K \$ 150,680.	.73
	5. Enter the amount from line 3	.27
	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	
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	187.81
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
	1. Enter the amount of gross receipts from space K	
	2. Base amount under statutory formula	
	3. Subtract line 2 from line 1	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	00
		.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 Due	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 187.	.81
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	.00
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	207.81
	EFT Trace # or TRANSACTION ID #	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyr See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more inform	

Accounting Period:	2023/1		FORM SA1-2E. PAGE 7
Name		DWNER OF CABLE SYSTEM: MUNICATIONS LLC	SYSTEM ID 03004
M Channels	to its subscrib 1. Enter the to system car 2. Enter the to	You must give (1) the number of channels on which the cable system carried to rs, and (2) the cable system's total number of activated channels during the a al number of channels on which the cable ed television broadcast stations	ccounting period.
		cable system carried television broadcast stations	212
N Individual to Be Contacted		O BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an in about this statement of account.)	dividual
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
O Certification	• I, the undersig	(This statement of account must be certified and signed in accordance with C ed, hereby certify that (Check one, <i>but only one</i> , of the boxes.) er other than corporation or partnership) I am the owner of the cable system as	
		t of owner other than corporation or partnership) I am the duly authorized age in line 1 of space B and that the owner is not a corporation or partnership; or er or partner) I am an officer (if a corporation) or a partner (if a partnership) of th	
	are true, comp	in line 1 of space B. d the statement of account and hereby declare under penalty of law that all statem ate, and correct to the best of my knowledge, information, and belief, and are mad tion 1001(1986)]	
		Enter an electronic signature on the line above to co Enter signature using an "/s/ signature" (e.g., /s/ Jo	
		Typed or printed name: ALAN DANNENBAUM	
l		Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)	
		Date:	8/29/2023

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: 2023/1	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
QUEL COMMUNICATIONS LLC	030047
 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? NO 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name 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	
Line 4 Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number First community served Accounting period	

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.

C	Cal Wol	ble rksheet	Total amount of remittance	Number of SAs rec'd			Initials	
			Date of remittance	Check	🗆 EFT	🗆 FILIN	G FEES	
Cable ID #						Amount	Initials	
Examined by		Reviewed by	Date examination completed	Allocati	on number			
Space A Accounting			(enter four digit year and	/1 (for Jan-Jun	period) or /2 (for Jul-De	ec period) No spa	ces)	
Period		r sent	C] Information re	eceived			
		oted	C] Phone call/Da	te/Contact			
Space B Owner								
	□ Letter	rsent	C	Information re	eceived			
		oted	Phone call/Date/Contact					
Space D Area Served								
	□ Letter	r sent	Ľ	Information re	eceived			
		oted	C] Phone call/Da	te/Contact			
Space E Secondary Transission								
Service Subscribers:	□ Letter	r sent	Information received					
and Rates		oted	C] Phone call/Da	te/Contact			
Space G Primary Transmitters:								
Television	□ Letter	rsent	C] Information r	eceived			
		oted	C] Phone call/Da	ite/Contact			
Space H Primary Transmitters:								
Radio		oted	[] Phone call/Da	ite/Contact			

		Carriage
Letter sent	□ Information received	
Accepted	Phone call/Date/Contact	
		Space J Part-time Carriage Log
Letter sent	□ Information received	(SA3 only)
□ Accepted	Phone call/Date/Contact	
		Space K Gross Receipts
Letter sent	□ Information received	
□ Accepted	Phone call/Date/Contact	
		Space L Copyright Filing and Royalty Fee
□ Royalty Fee should be	Refund request to fiscal	
Letter sent	□ Information received	
C Accepted	Phoe call/Date/Contact	
		Space M Channels
Letter sent	Information received	
Accepted	Phone call/Date/Contact	
		Space O Certification
Letter sent	Information received	
□ Accepted	Phone call/Date/Contact	
		Space P Statement of Gross Receipts
Letter sent	□ Information received	
□ Accepted	Phone call/Date/Contact	
		Space Q Interest Assessment
	□ Info/add'l fee received	
□ Letter sent		