This form is effective beginning with the January 1 to June 30, 2017, accounting period (201	7/1)
If you are filing for a prior accounting period, contact the Licensing Division for the correct form.	

SA1-2E Short Form

Return completed workbook by

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

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

email to DATE RECEIVED AMOUNT coplicsoa@copyright.gov 2-28-25 \$ For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150. ALLOCATION NUMBER

Α	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2024/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		20242 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.	
		02 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	28988
		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)	
		(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 as already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space	
System	1	IDENTIFICATION OF CABLE SYSTEM: RUSK, TX	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2		
	2	(Number, street, rural route, apartment, or sulte 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:	FORM SA1-2E. PAGE 1b. SYSTEM ID#
Name		028988
	CEQUEL COMMUNICATIONS LLC	
D	Instructions: List each separate community served by the cable system. A "commu separate and distinct community or municipal entity (including unincorporated con unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will se community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile	nmunities within unincorporated areas and including single, discrete rve as a form of system identification hereafter known as the "first
Served	city.	
	CITY OR TOWN	STATE
First	RUSK	ТХ
Community	CHEROKEE COUNTY	ТХ
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM							SA1-2E. P/		
Name									028		
	CEQUEL COMMUNICATIONS LLC										
Е	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES										
L	In General: The information in s system, that is, the retransmission										
Secondary											
Transmission	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).										
Service: Sub-	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable 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									
Rates	separately for the particular serv							larged			
	Rate: Give the standard rate c	harged for each	n category	of service. Inc	lude bot	h the amount of	the charge				
	unit in which it is generally billed.				standaro	d rate variations	within a pa	articular rate			
	category, but do not include disc Block 1: In the left-hand block				of seco	ndary transmiss	ion service	e that cable			
	systems most commonly provide	e to their subscr	ibers. Giv	e the number o	of subsci	ribers and rate f	or each list	ed category			
	that applies to your system. Note	e: Where an inc	lividual or	organization is	receivir	ng service that fa	alls under o	lifferent			
	categories, that person or entity										
	subscriber who pays extra for ca first set" and would be counted o					In the count und	er Servic	e to the			
	Block 2: If your cable system I					service that are	different fro	om those			
	printed in block 1 (for example, t										
	with the number of subscribers a	and rates, in the	right-har	d block. A two-	or three	-word description	on of the se	ervice is			
	sufficient.	OCK 1					BLOC	(2			
		NO. OF						NO. OF			
	CATEGORY OF SERVICE Residential:	SUBSCRIBE	ERS	RATE	CAI	EGORY OF SEI	RVICE	SUBSCRIBER	s RA		
	Service to first set		153	50.00							
	Service to additional set(s)		155	50.00							
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		25	45.95							
	Converter			-0.00							
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRAI	NSMISSI	ONS: 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	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										
Rates	-	separate charde	brief (two- or three-word) description and include the rate for each.								
Rates	listed in block 1 and for which a s				a. List t	nese other serv					
Rates	listed in block 1 and for which a s	otion and includ	e the rate		a. List t			BLOCK)		
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip	otion and includ	e the rate CK 1	for each.			CATEG	BLOCK 2			
Rates	listed in block 1 and for which a s	otion and includ BLO	e the rate CK 1 CATEGC		CE	RATE	CATEG	BLOCK 2 ORY OF SERVI			
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE	otion and includ	e the rate CK 1 CATEGC	for each. DRY OF SERVIO on: Non-reside	CE		CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	BLOC	e the rate CK 1 CATEGO Installati • Mote	for each. DRY OF SERVIO on: Non-reside	CE		CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	btion and includ BLOC RATE 17.00	e the rate CK 1 CATEGO Installati • Mote	for each. DRY OF SERVIO on: Non-resido , hotel mercial	CE		CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	btion and includ BLOC RATE 17.00	e the rate CK 1 CATEGO Installati • Mote • Comi • Pay o	for each. DRY OF SERVIO on: Non-resido , hotel mercial	CE ential		CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	btion and includ BLOC RATE 17.00	e the rate CK 1 CATEGC Installati • Mote • Com • Pay c • Pay c	for each. DRY OF SERVIO on: Non-reside , hotel mercial able	CE ential		CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	btion and includ BLOC RATE 17.00	e the rate CK 1 CATEGC Installati • Mote • Com • Pay c • Pay c	for each. IRY OF SERVIO on: Non-reside , hotel mercial cable cable-add'l char	CE ential		CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	500 and includ BLO0 RATE 17.00 19.00 99.00	e the rate CK 1 CATEGC Installati • Mote • Com • Pay c • Pay c	for each. PRY OF SERVIO on: Non-reside hotel mercial cable cable-add'l char protection ar protection	CE ential		CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	500 and includ BLO0 RATE 17.00 19.00 99.00	e the rate CK 1 CATEGC Installati • Mote • Com • Pay c • Pay c • Fire p • Burg	for each. RY OF SERVIO on: Non-reside hotel mercial cable cable-add'l char protection ar protection rvices:	CE ential		CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	500 and includ BLO0 RATE 17.00 19.00 99.00	e the rate CK 1 CATEGO Installati • Mote • Com • Pay o • Pay o • Fire p • Burgl Other se	for each. DRY OF SERVIO on: Non-reside nercial sable sable-add'l char protection ar protection rvices: nnect	CE ential	RATE	CATEG				
Rates	listed in block 1 and for which a s brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	500 and includ BLO0 RATE 17.00 19.00 99.00	e the rate CK 1 CATEGO Installati • Mote • Com • Pay o • Fire p • Burgl Other se • Reco • Disco	for each. DRY OF SERVIO on: Non-reside nercial sable sable-add'l char protection ar protection rvices: nnect	CE ential	RATE	CATEG				

	LEGAL NAME OF OWNER C	OF CABLE SYSTEM:		SYSTEM I
ame				02899
	PRIMARY TRANSMITTERS:			
hary hitters: ision	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further informatic Column 1: List each station multicast stream associate "WETA-2" as the same on Column 2: Give the chanr of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast) For the meaning of these t Column 4: Give the location	also in space I, if the station was carried on concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pro d with a station according to its over-the-a	1) stations carried only on a part-ti carriage of certain network progra (e)(2) and (4))]; and (2) certain stat ried by your cable system on a su e Special Statement and Program both on a substitute basis and als ee page (v) of the general instruct ogram services such as HBO, ESF air designation. For example, repo- asion station for broadcasting over ation, an independent station, or a or network multicast), "I" (for indep "E-M" (for noncommercial educati tions in the paper SA1-2 form. he community to which the station	ime basis under ams [sections ations carried on a abstitute program Log)—if the o on some other tions. PN, etc. Identify each ort multistream the air in its community a noncommercial rendent), "I-M" onal multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KCEB-1	26	1	LONGVIEW, TX
	KDFW-1	4	I	DALLAS, TX
cessary	KERA-1	13	Е	DALLAS, TX
	KERA-HD1	13	E-M	DALLAS, TX
	KETK-1	56	N	JACKSONVILLE, TX
	KETK-HD1	56	N-M	JACKSONVILLE, TX
	KFXK-1	51	I	LONGVIEW, TX
	KFXK-HD1	51	I-M	LONGVIEW, TX
	KLTV-1	7	N	TYLER, TX
	KLTV-2	7.2	I-M	TYLER, TX
	KLTV-3	7.3	I-M	TYLER, TX
	KLTV-4	7.4	I-M	TYLER, TX
	KLTV-HD1	7	N-M	TYLER, TX
		7.3	I-M	TYLER, TX
	KLTV-HD3	1.0	• •••	
	KTPN-1	47	I	TYLER, TX
			I I-M	
	KTPN-1	47	I	TYLER, TX
	KTPN-1 KTPN-HD1	47 47	l I-M	TYLER, TX TYLER, TX
	KTPN-1 KTPN-HD1 KYTX-1	47 47 19	l I-M N	TYLER, TX TYLER, TX NACOGDOCHES, TX
	KTPN-1 KTPN-HD1 KYTX-1 KYTX-2	47 47 19 19.2	l I-M N	TYLER, TX TYLER, TX NACOGDOCHES, TX NACOGDOCHES, TX
	KTPN-1 KTPN-HD1 KYTX-1 KYTX-2 KYTX-3	47 47 19 19.2 19.3	I I-M N I-M I	TYLER, TX TYLER, TX NACOGDOCHES, TX NACOGDOCHES, TX NACOGDOCHES, TX
	KTPN-1 KTPN-HD1 KYTX-1 KYTX-2 KYTX-3	47 47 19 19.2 19.3	I I-M N I-M I	TYLER, TX TYLER, TX NACOGDOCHES, TX NACOGDOCHES, TX NACOGDOCHES, TX

	F OWNER OF C							SYSTEM II 0289
n General: Lis		tation ca	rried on a separate and discr nerally receivable by your cab				ied on an	н
eceivable if (1) in the basis of for detailed infi- aper SA1-2 fo Column 1: In Column 2: S Column 3: In ignal, indicate Column 4: C) it is carried by monitoring, to ormation abou rm. dentify the call State whether t f the radio stat this by placing Sive the statior	y the sys be receiv t the Cop sign of e he statio 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 pyright Office regulations on t each station carried. n is AM or FM. hal was electronically process a mark in the "S/D" column. on (the community to which the the community with which the	at the system's he system's FM ante this point, see pag sed by the cable s he station is licens	adend, and (2) nna, during ce e (v) of the ge ystem as a sep sed 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	
					+			
	+							
					+			

Name CEQUEL COMMUNICATIONS LLC SYSTEM IDE SUBSITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space 1, listintly were ynonechronic kerkesop inogram. Encodated by a distart statun, that your cable system canned on a for Collex. (publicity, cables system) and them FCO dues, regulations, For a listicity explanation of the programming balance of the included in this big see page (1) of the general instructions in the page SN-2 farm. Program Log SPECIAL STATEMENT CONCENTIONE SUBSTITUTE CARRIAGE	Accounting Perio	d: 2024/2						FOR	M SA1-2E. PAGE 5.		
I SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonetwork television 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 Substitute basis, 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 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. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: TeC rules, regulations, see page (v) of the general instructions for third information. Do not use general categories like "movies" or "basketball." List specific program. Column 2: If the program was broadcast live, enter "Yes," Otherwise enter No." Column 3: Give the month and day when your system carried the substitute program. Column 4: Give th	Namo										
In General: In space I, identify <i>every nonnetwork 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. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 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. ("Love Lucy" or "NBA Basketball": Gens vs. Bulls." Column 2: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Maxican or Canadian stations, for any the community to which the station is licensed by the FCC or, in the case of Maxican or Canadian stations, if any, the community to which the station is licensed by the FCC or, in the case of Maxican or Canadian stations, if any, the community to which the station is licensed by the FCC or, in the case of Maxican or Canadian stations, if any the community to which the station is licensed by the FCC or, in the case of Maxican or	Name	CEQUEL COMMUNICA	TIONS LL	.C					028988		
In General: In space I, identify <i>every nonnetwork 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. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 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. ("Love Lucy" or "NBA Basketball": Gens vs. Bulls." Column 2: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Maxican or Canadian stations, fran, the community to which the station is licensed by the FCC or, in the case of Maxican or Canadian stations, fran, the community to which the station is licensed by the FCC or, in the case of Maxican or Canadian stations, fran, the community to which the station is licensed by the FCC or, in the case of Maxican or Canadian stations, fran, the community to which the station is licensed by the FCC or, in the case of Maxican or Sive t		SUBSTITUTE CARRIAGE	: SPECIA		T AND PROGRAM LOG						
Substitute 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? 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 aread 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 substitute program "Information. Do not use general categories like "movies" or "basketball." List specific program tiles, for example, "I Love Lucy" or "NBA Basketball. Teers vs. Bulls." Column 2: Give the call sign of the station broadcast like, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcast like, enter "Yes." Colume size of Mexican or Canadian stations, if any, the community with which the station is identified). Column 3: Give the call sign of the station broadcast like 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). <th></th> <th></th> <th></th> <th></th> <th></th> <th>a <i>distant</i> statio</th> <th>on, that you</th> <th>r cable svster</th> <th>n carried on a</th>						a <i>distant</i> statio	on, that you	r cable svster	n carried on a		
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: Special Statement and Program Log • 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. Image: Special Statement and Program Log • Z. 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. Use numerals, with the month first. Example: for May 7 give "57." Column 5: 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 carried by a system form 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00-6:30 p.m." Column 7: Enter th		substitute basis during the ad	counting pe	eriod, under spe	cific present and former FC	C rules, regula	ations, or au	uthorizations.	For a further		
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? ↓ YES ▲ 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 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." Gers vs. Bulls." 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 which the station is dentified). Column 5: Give the month and day when your system carried the substitute program. Lise numerals, with the month first. Example: for May 7 give "5/7." Column 7: Enter the letter "R" if the listed program was scarried 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 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 progra						e general instr	uctions in th	ne paper SA1	-2 form.		
Statement and Program Log "During the accounting period, dur your dable system can'y, on a studiate basis, any nonnetwork relearistion program broadcast by a distant station? Image: Text Studies System Can'y, on a studiate basis, any nonnetwork relearistion 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 need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork relevision 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 4: Give the call sign of the station broadcasting the substitute program. Column 4: Give the oronadast stations, if any, the community with which the station is identified). Column 6: State the times when the substitute program was 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 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 "6:00-0-6:30 p.m." Column 7: Enter the letter "R" if the lis	-										
Program Edg In Edg Carlow In Edg Carlow In Edg Carlow 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: Tiers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 4: Give the broadcast station is 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 licensed by the form of the state of Give the broadcast state is 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 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 was pe											
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: The program was broadcast live, enter "Yes." Otherwise enter "No." 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 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 "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the enearest 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 wa	Program Log	-					L				
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 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 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 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 was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed		Note: If your answer is "No,	" leave the	rest of this pag	ge blank. If your answer is	"Yes," you m	ust comple	ete the progra	am		
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." Fore 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 stations is 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 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 permitted 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											
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 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 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 required to delete under FCC rules and regulations in effect on October 19, 1976. Vertex 10: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0					te line. Lise abbreviations	wherever no	esible if th	oir mooning i	ie		
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 licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is identified). 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 "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 required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed prog						wherever po	551010, 11 111	en meaning	15		
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 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 "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 permitted to delete under FCC r		Column 1: Give the title	of every no	nnetwork telev	ision program ("substitute	program") th	at, during t	he accountin	g		
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 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 "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 to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted to delete under FCC rules and regulations in effect on October 19, 1976. UBSTITUTE PROGRAM VHEN SUBSTITUTE CARRIAGE OCCURRED 7. REASON FOR DELETION 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5.											
"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 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 "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 permitted to delete under FCC rules and regulations in effect on October 19, 1976. UBSTITUTE PROGRAM WHEN SUBSTITUTE CARRIAGE OCCURRED TO READ TO RE		Do not use general categor	ies like "mo	vies" or "baske	etball." List specific program	n titles, for ex	ample, "I L	_ove Lucy" of	r		
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 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 "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 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 was permitted to delete under FCC rules and regulations in effect on October 19, 1976. UBSTITUTE PROGRAM VHEN SUBSTITUTE CARRIAGE OCCURRED 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES		"NBA Basketball: 76ers vs.	Bulls."					-			
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 "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 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 was permitted to delete under FCC rules and regulations in effect on October 19, 1976. WHEN SUBSTITUTE UBSTITUTE PROGRAM 1. TITLE OF PROGRAM 1. LIVE? 1. TITLE OF PROGRAM 2. LIVE? 1. TITLE OF PROGRAM 2. LIVE? 1. TITLE OF PROGRAM		Column 2: If the program	n was broad sign of the s	dcast live, ente	r "Yes." Otherwise enter "N asting the substitute progra	NO." am					
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 permitted to delete under FCC rules and regulations in effect on October 19, 1976. WHEN SUBSTITUTE SUBSTITUTE PROGRAM 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES		Column 4: Give the broa	dcast statio	on's location (th	ne community to which the	station is lice		ne FCC or, in			
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 substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. UNENTITIE SUBSTITUTE PROGRAM 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH											
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 permitted to delete under FCC rules and regulations in effect on October 19, 1976. WHEN SUBSTITUTE SUBSTITUTE PROGRAM UNERSIDE TO PROGRAM 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S				when your sys	tem carried the substitute	program. Use	e numerals	, with the mo	onth		
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 permitted to delete under FCC rules and regulations in effect on October 19, 1976. SUBSTITUTE PROGRAM WHEN SUBSTITUTE CARRIAGE OCCURRED 7. REASON FOR DELETION 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES		Column 6: State the time	es when the	e substitute pro	gram was carried by your	cable system	. List the ti	mes accurate	ely		
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 permitted to delete under FCC rules and regulations in effect on October 19, 1976. WHEN SUBSTITUTE SUBSTITUTE PROGRAM 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES		to the nearest five minutes.	Example: a	a program carri	ed by a system from 6:01:	15 p.m. to 6:	28:30 p.m.	should be			
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 permitted to delete under FCC rules and regulations in effect on October 19, 1976. WHEN SUBSTITUTE SUBSTITUTE PROGRAM WHEN SUBSTITUTE 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES			ar "R" if the	listed program	was substituted for progra	amming that y	unur sveter	n was <i>requir</i>	ed		
effect on October 19, 1976. SUBSTITUTE PROGRAM WHEN SUBSTITUTE 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES											
SUBSTITUTE PROGRAM WHEN SUBSTITUTE 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES				our system wa	s permitted to delete unde	r FCC rules a	and regulat	tions in			
SUBSTITUTE PROGRAM CARRIAGE OCCURRED 7. REASON FOR DELETION 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES		effect on October 19, 1976.									
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES DELETION						WHE	N SUBST	ITUTE			
1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 0. TIVIES		S									
		1. TITLE OF PROGRAM			4. STATION'S LOCATION				5		
								_			
								_			
Image: state stat											
Image: state stat								_			
Image: state in the state								_			
Image: second								_			
Image: second								_			
								_			
								_			
								_			
								_			
								_			
								_			
								_			
								_			
								_			

Accounting Period:	2024/2 FORM SA	1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SY CEQUEL COMMUNICATIONS LLC	STEM ID# 028988
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 total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see 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.	,342.46 is 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 \$263,800. • Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than s527,600. 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-month accounting period is \$52.00.	
	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 \$137,100)	
	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	
	2. Base amount under statutory formula	
	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)	
	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 of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.	

Accounting Period:	2024/2			FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CAB CEQUEL COMMUNICATION			SYSTEM ID : 028988
M Channels	 to its subscribers, and (2) the of 1. Enter the total number of ch system carried television broces 2. Enter the total number of ac on which the cable system carried television broces 	cable system's total num nannels on which the ca roadcast stations ctivated channels carried television broad		20
N Individual to Be Contacted	INDIVIDUAL TO BE CONTAC we can contact about this state		ORMATION IS NEEDED (Identify an individual	
for Further Information	Name RODNEY I	HASKINS	Tele	phone (903) 579-3152
			uite number)	
	Email RC	ODNEY.HASKINS@/	ALTICEUSA.COM Fax (optional	
O Certification	 I, the undersigned, hereby certify (Owner other than co (Agent of owner other in line 1 of space X (Officer or partner) in line 1 of space I have examined the statement of 	y that (Check one, <i>but or</i> prporation or partnersh er than corporation or p ce B and that the owner is am an officer (if a corpo ce B. of account and hereby de to the best of my knowled	ertified and signed in accordance with Copyright Office regula <i>Ily one</i> , of the boxes.) ip) I am the owner of the cable system as identified in line 1 of sp partnership) I am the duly authorized agent of the owner of the ca is not a corporation or partnership; or ration) or a partner (if a partnership) of the legal entity identified a eclare under penalty of law that all statements of fact contained he lige, information, and belief, and are made in good faith.	ace B; or able system as identified is owner of the cable system
			/s/ Alan Dannenbaum	
	Ту	yped or printed name:	ALAN DANNENBAUM	
	Tit		PROGRAMMING al position held in corporation or partnership)	
	Da	ate:	2/28/2025	

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.

unting Period: 2024/2	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
QUEL COMMUNICATIONS LLC	02898
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusior
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	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late 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 Assessmer
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 Assessmen
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 Assessmer
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 Assessmen
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 Assessmer
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 Assessmer
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 Assessmen
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 Assessmer
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 Assessmer
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 Assessmer
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 Assessmer
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 Assessme

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	Cable Worksheet	Total amount of remittance	Number of SAs rec'	d Initials				
		Date of remittance	Check EFT	FILING FEES				
Cable ID #				Amount Initials				
Examined by	Reviewed by	Date examination completed	Allocation number					
Space A		(enter four digit year and	l /1 (for Jan-Jun period) or /2 (for Ju	l-Dec period) No spaces)				
Accounting Period	Letter sent							
	Accepted	[Phone call/Date/Contact					
Space B Owner								
	Letter sent	[Information received					
	Accepted	[Phone call/Date/Contact					
Space D Area Served								
	Letter sent	[Information received					
	Accepted	[Phone call/Date/Contact					
Space E Secondary Transission								
Service Subscribers:	Letter sent	[Information received					
and Rates	Accepted	[Phone call/Date/Contact					
Space G Primary Transmitters:								
Television	Letter sent		Information received					
	Accepted		Phone call/Date/Contact					
Space H Primary Transmitters:								
Radio	Accepted		Phone call/Date/Contact					

Space I Substitute 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 Fees
Royalty Fee should be	Refund request to fiscal	
Letter sent	Information received	
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
Letter sent	Info/add'l fee received	
Accepted	Phone call/Date/Contact	