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 COPYRIGH	HT OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov
General instructions are located in the first tab of this workbook	8/28/2019	S ALLOCATION NUMBER	contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Δ			

A	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		2019/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting		20191 Barcode Data Filing Period (optional - see instructions)
Period		
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		CEQUEL COMMUNICATIONS LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		SUDDENLINK COMMUNICATIONS
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)
		TYLER, TX 75701
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
		MARVELL, AR MAILING ADDRESS OF CABLE SYSTEM:
		MAILING ADDRESS OF CADLE STSTEM:
	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 Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	002826
D Area	Instructions: List each separate community served by the cable system. A "commu "a separate and distinct community or municipal entity (including unincorporated discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile identified city.	nity" is the same as a "community unit" as defined in FCC rules: communities within unincorporated areas and including single, list will serve as a form of system identification hereafter known
Served		
	CITY OR TOWN	STATE
First	MARVELL	AR
Community		
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						FORM SA1	TEM ID
Name	CEQUEL COMMUNICAT	IONS LLC							00282
	SECONDARY TRANSMISSION		DecDID		TES				
E	In General: The information in s			-	-	v transmission s	ervice of th	ne cable	
	system, that is, the retransmission								
Secondary	about other services (including p						hose existi	ing on the	
Transmission	last day of the accounting period							hashes	
Service: Sub- scribers and	Number of Subscribers: Both down by categories of secondary								
Rates	each category by counting the nu								
	separately for the particular servi	ice at the rate in	ndicated	-not the num	ber of set	s receiving serv	ice).	-	
	Rate: Give the standard rate cl								
	unit in which it is generally billed. category, but do not include disc				ny standai	rd rate variations	s within a p	barticular rate	
	Block 1: In the left-hand block				ies of sec	ondary transmis	sion servic	e 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					i in the count un	der "Servic	ce to the	
	Block 2: If your cable system h					service that are	different fr	om those	
	printed in block 1 (for example, ti	iers of services	that incl	ude one or mo	ore second	dary transmissio	ns), list the	em, together	
	with the number of subscribers a	and rates, in the	right-ha	nd block. A tw	o- or thre	e-word descripti	on of the s	ervice is	
	sufficient.	OCK 1					BLOCK	(2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	De	RATE	САТ	EGORY OF SEI		NO. OF SUBSCRIBERS	RATE
	Residential:	SUBSCRIBE	LK3	NAIL	CAT	LOOKT OF SEI	VICE	SUBSCRIBERS	KAII
	Service to first set		239	34.99					
	Service to additional set(s)		389	04.00					
	• FM radio (if separate rate)			ŭ					
	Motel, hotel								
	Commercial		11	34.99					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	IONS: RATES	6				
F	In General: Space F calls for rat	•	,		•	• •			
I I	not covered in space E, that is, the								
Services	service for a single fee. There are furnished at cost or (2) services of								
Other Than	amount of the charge and the un								
Secondary	enter only the letters "PP" in the							-	
ransmissions: Rates	Block 1: Give the standard rate Block 2: List any services that							woro not	
Rales	listed in block 1 and for which a s	•			-	• •			
	brief (two- or three-word) descrip								
		BLOC	CK 1					BLOCK 2	
	CATEGORY OF SERVICE			ORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:		Installat	ion: Non-res	idential				
	Pay cable	19.00	• Mote	el, hotel					
	 Pay cable—add'l channel 	19.00	• Com	mercial					
	Fire protection		• Pay	cable					
	 Burglar protection 		• Pay	cable-add'l ch	annel				
	Installation: Residential		 Fire 	protection					
	First set	99.00	• Burg	lar protection					
	 Additional set(s) 	25.00	Other se	ervices:					
	1		• Reco	nnect		40.00			1
	 FM radio (if separate rate) 			Jinicot					
	FM radio (if separate rate) Converter			onnect					
	, , , , , , , , , , , , , , , , , , ,		• Disc			25.00			

	LEGAL NAME OF OWNER C	F CABLE SYSTEM:		SYSTEM		
Name	CEQUEL COMMUNIC	CATIONS LLC		002		
	PRIMARY TRANSMITTERS:					
G		entify every television station (including				
9	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	em during the accounting period, excep in effect on June 24, 1981, permitting t				
Primary	76.59(d)(2) and (4), 76.61	(e)(2) and (4), or 76.63 (referring to 76.6				
Transmitters: Television		as explained in the next paragraph. s: With respect to any distant stations c	arried by your cable system on a s	ubstitute program		
	 Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do <i>not</i> list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the 					
	station was carried only of		ne opecial Statement and Program			
		also in space I, if the station was carrie on concerning substitute basis stations.				
	Column 1: List each static	on's call sign. <i>Do not</i> report origination	program services such as HBO, ES	SPN, etc. Identify each		
	"WETA-2" as the same on	ed with a station according to its over-the the form.	e-air designation. For example, re	bort multistream		
		nel number the FCC assigned to the tele	evision station for broadcasting over	er the air in its community		
		VRC is channel 4 in Washington, D.C. h case whether the station is a network	station, an independent station, or	a noncommercial		
		ering the letter "N" (for network), "N-M"), "E" (for noncommercial educational), «				
	For the meaning of these t	erms, see page (iv) of the general instru	uctions in the paper SA1-2 form.			
		on of each station. For U.S. stations, list adian stations, if any, give the name of t				
		adan olaliono, il any, givo the hame of t				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION		
	KATV-1	7	<u>N</u>			
	KETS-1	2	E	LITTLE ROCK, AR		
d Rows as Necessary	KETS-2	2.2	E-M	LITTLE ROCK, AR		
	KETS-3	2.3	E-M	LITTLE ROCK, AR		
	KETS-4	2.4	E-M	LITTLE ROCK, AR		
	KETS-HD1	2	E-M	LITTLE ROCK, AR		
	WATN-1	24	N	MEMPHIS, TN		
	WATN-2	24.2	N-M	MEMPHIS, TN		
	WATN-HD1	24	N-M	MEMPHIS, TN		
	WBUY-1	40	Е	HOLLY SPRINGS, MS		
	WBUY-HD1	40	E-M	HOLLY SPRINGS, MS		
	WHBQ-1	13	N	MEMPHIS, TN		
	WHBQ-3	13.3	I-M	MEMPHIS, TN		
	WHBQ-HD1	13	N-M	MEMPHIS, TN		
	WKNO-1	10	E	MEMPHIS, TN		
	WLMT-1	30		MEMPHIS, TN		
	WLMT-2	30.2	I-M	MEMPHIS, TN		
	WMC-1	5	N	MEMPHIS, TN		
	WMC-2	5.2	I-M	MEMPHIS, TN		
	WMC-3	5.3	I-M	MEMPHIS, TN		
		5	N-M	MEMPHIS, TN		
	WMC-HD1					
	WPRQ-1	12	l	CLARKSDALE, MS		
		12 50	l	CLARKSDALE, MS MEMPHIS, TN		
	WPRQ-1	12 50 50	i i-M			
	WPRQ-1 WPXX-1	12 50	l	MEMPHIS, TN		
	WPRQ-1 WPXX-1 WPXX-HD1	12 50 50	i i-M	MEMPHIS, TN MEMPHIS, TN		
	WPRQ-1 WPXX-1 WPXX-HD1 WREG-1	12 50 50 3	I I-M N	MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN		
	WPRQ-1 WPXX-1 WPXX-HD1 WREG-1 WREG-2	12 50 50 3 3.2	I I-M N I-M	MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN		
	WPRQ-1 WPXX-1 WPXX-HD1 WREG-1 WREG-2 WREG-3	12 50 50 3 3.2 3.3	I I-M N I-M I-M	MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN		
	WPRQ-1 WPXX-1 WPXX-HD1 WREG-1 WREG-2 WREG-3 WREG-HD1	12 50 50 3 3.2 3.3 3.3 3	I I-M N I-M I-M N-M	MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN MEMPHIS, TN		

	LEGAL NAME OF OWNER O	F CABLE SYSTEM		SYSTE
Name				00
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele of (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			61(e)(2) and (4))]; and (2) certain stati	
ransmitters:	substitute program basis, a	s explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	the Special Statement and Program L	ag) if the
	station was carried only on		the Special Statement and Program E	
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		ie-all designation. Tor example, repor	i mulusu eam
			evision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
		erms, see page (iv) of the general inst		nai mulucast).
			st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

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			st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	F CABLE SYSTEM		SYSTE
Name				00
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele of (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			61(e)(2) and (4))]; and (2) certain stati	
ransmitters:	substitute program basis, a	s explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	the Special Statement and Program L	an) if the
	station was carried only on		the Special Statement and Program E	
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		ie-all designation. Tor example, repor	i mulusu eam
			evision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
		erms, see page (iv) of the general inst		nai mulucast).
			st the community to which the station is	s licensed by the
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	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	F CABLE SYSTEM		SYSTE				
Name				00				
	PRIMARY TRANSMITTERS: TELEVISION							
G	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under							
U	FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a							
Primary								
ransmitters:	substitute program basis, as explained in the next paragraph.							
Television	Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program							
	 basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the 							
	station was carried only on a substitute basis.							
	List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other							
	basis. For further information concerning substitute basis stations, see page (v) of the general instructions.							
	Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream							
	"WETA-2" as the same on the form.							
	Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community							
	of license. For example, WRC is channel 4 in Washington, D.C.							
	Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-N" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.							
					For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the			
					FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.			
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				

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Primary			61(e)(2) and (4))]; and (2) certain stati	
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			s, see page (v) of the general instruction	
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			evision station for broadcasting over the	ne air in its community
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			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
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			st the community to which the station is	s licensed by the
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			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		ie-all designation. Tor example, repor	i mulusu eam
			evision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
		erms, see page (iv) of the general inst		nai mulucast).
			st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	F CABLE SYSTEM		SYSTE
Name				00
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele of (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			61(e)(2) and (4))]; and (2) certain stati	
ransmitters:	substitute program basis, a	s explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	the Special Statement and Program L	ag) if the
	station was carried only on		the Special Statement and Program E	
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		ie-all designation. Tor example, repor	i mulusu eam
			evision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
		erms, see page (iv) of the general inst		nai mulucast).
			st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	- CABLE SYSTEM		SYSTE
Name				00
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele of (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			61(e)(2) and (4))]; and (2) certain stati	
ransmitters:	substitute program basis, a	s explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	the Special Statement and Program L	ag) if the
	station was carried only on		the Special Statement and Program E	
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		ie-all designation. Tor example, repor	i mulusu eam
			evision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
		erms, see page (iv) of the general inst		nai mulucast).
			st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	F CABLE SYSTEM		SYSTE
Name				00
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele of (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			61(e)(2) and (4))]; and (2) certain stati	
ransmitters:	substitute program basis, a	s explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	the Special Statement and Program L	ag) if the
	station was carried only on		the Special Statement and Program E	
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		le-all designation. Tor example, repor	i mulusu eam
			evision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
		erms, see page (iv) of the general inst		nai mulucast).
			st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	F CABLE SYSTEM		SYSTE
Name				00
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele of (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			61(e)(2) and (4))]; and (2) certain stati	
ransmitters:	substitute program basis, a	s explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	the Special Statement and Program L	ag) if the
	station was carried only on		the Special Statement and Program E	
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		ie-all designation. Tor example, repor	i mulusu eam
			evision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
		erms, see page (iv) of the general inst		nai mulucast).
			st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	F CABLE SYSTEM		SYSTE
Name				00
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele of (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			61(e)(2) and (4))]; and (2) certain stati	
ransmitters:	substitute program basis, a	s explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	the Special Statement and Program L	an) if the
	station was carried only on		the Special Statement and Program E	
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		le-all designation. Tor example, repor	i mulusu eam
			evision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			station, an independent station, or a	
			(for network multicast), "I" (for independent or "E-M" (for noncommercial education)	
		erms, see page (iv) of the general inst		nai mulucast).
			st the community to which the station is	s licensed by the
			the community with which the station i	,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	F CABLE SYSTEM		SYSTE
Name	CEQUEL COMMUNIC			00
	PRIMARY TRANSMITTERS:			
G			g translator stations and low power tele ot (1) stations carried only on a part-tin	
U			the carriage of certain network program	
Primary			.61(e)(2) and (4))]; and (2) certain station	
ransmitters:	substitute program basis, a	s explained in the next paragraph.		
Television			carried by your cable system on a subs	stitute program
		ules, regulations, or authorizations:	(the Special Statement and Program L	an) if the
	station was carried only on			
			ed both on a substitute basis and also	on some other
			s, see page (v) of the general instruction	
			program services such as HBO, ESPN ne-air designation. For example, repor	
	"WETA-2" as the same on		ie all designation. Tor example, repor	i manou cam
			levision station for broadcasting over the	ne air in its community
		RC is channel 4 in Washington, D.C.		
			k station, an independent station, or a i ' (for network multicast), "I" (for indeper	
			or "E-M" (for noncommercial education	
		erms, see page (iv) of the general inst		na mancast).
			st the community to which the station is	,
	FCC. For Mexican or Cana	dian stations, if any, give the name of	the community with which the station i	s identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:		SYSTEM
Name	CEQUEL COMMUNIC	CATIONS LLC		0028
	PRIMARY TRANSMITTERS	TELEVISION		
G Primary ransmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, Substitute Basis Station basis under specific FCC i • Do <i>not</i> list the station here station was carried <i>only</i> o • List the station here, and basis. For further informat Column 1: List each static multicast stream associate "WETA-2" as the same on of license. For example, M Column 2: Give the chann of license. For example, M Column 3: Indicate in each educational station, by end (for independent multicast For the meaning of these I Column 4: Give the locati	em during the accounting period, exce, in effect on June 24, 1981, permitting (e)(2) and (4), or 76.63 (referring to 76 se explained in the next paragraph. s: With respect to any distant stations: rules, regulations, or authorizations: re in space G—but do list it in space I in a substitute basis. also in space I, if the station was carri- ion concerning substitute basis station on's call sign. <i>Do not</i> report origination ed with a station according to its over-ti- the form. Hel number the FCC assigned to the tee VRC is channel 4 in Washington, D.C. h case whether the station is a networ ering the letter "N" (for network), "N-M)), "E" (for noncommercial educational on of each station. For U.S. stations, li	g translator stations and low power tele of (1) stations carried only on a part-tim the carriage of certain network program .61(e)(2) and (4))]; and (2) certain static carried by your cable system on a subs (the Special Statement and Program Lo ed both on a substitute basis and also s, see page (v) of the general instructio program services such as HBO, ESPN ne-air designation. For example, report levision station for broadcasting over th k station, an independent station, or a r " (for network multicast), "I" (for independent or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	ne basis under ns [sections ons carried on a stitute program og)—if the on some other ns. J, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

EGAL NAME OI								SYSTEM II 0028
RIMARY TRA		-	arried on a separate and discr	ete basis and list	those FM stat	tions ca	rried on an	н
			nerally receivable by your cab					••
eceivable if (1) in the basis of or detailed info aper SA1-2 fo Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: C) it is carried b monitoring, to ormation abou rm. dentify the cal State whether f the radio stat this by placing Sive the station	y the sys be recein at the Co l sign of e the static ion's sign g a chech n's locati	I-Band FM Carriage: Under (item whenever it is received a ved at the headend, with the pyright Office regulations on the each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	It the system's he system's FM ante this point, see pa sed by the cable s ne station is licen	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st jeneral i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
SALL SIGN		3,0	LOOKTION OF STATION	UALL SIGN		3,0	LOOKTION OF STATION	

Accounting Perio	od: 2019/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS L	LC					002826
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
I I	In General: In space I, ident				-	ion that you	ır cable syste	em carried on a
-	substitute basis during the a							
Substitute	explanation of the programm	ing that mus	st be included in	this log, see page (v) of th	e general instr	uctions in th	e paper SA1	-2 form.
Carriage:	1. SPECIAL STATEMEN	T CONCEF	RNING SUBS	TITUTE CARRIAGE				
Special Statement and	During the accounting per	iod, did you	ir cable system	carry, on a substitute bas	is, any nonne	twork televi	<u>sion</u> progran	n
Program Log	broadcast by a distant sta	tion?					YES	× NO
rogram Log	Note: If your answer is "No	" leave the	rest of this nac	e blank If your answer is	"Yes " vou mi	ist complete	-	
	-	, icave the			res, you me	ist complete	s the program	
	log in block 2. 2. LOG OF SUBSTITUTE		MS					
	In General: List each subst			te line. Use abbreviations	wherever pos	sible, if thei	r meaning is	;
	clear. If you need more spa	ce, please a	add additional i	rows to the tables.			-	
				ision program ("substitute				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general categor	ies like "mo	vies" or "baske	tball." List specific program	n titles, for exa	ample, "I Lo	ve Lucy" or	
	"NBA Basketball: 76ers vs.							
				r "Yes." Otherwise enter "I Isting the substitute progra				
				ne community to which the		nsed by the	FCC or, in	
	the case of Mexican or Can	adian statio	ons, if any, the	community with which the	station is ider	tified).		
			when your sys	tem carried the substitute	program. Use	numerals,	with the mor	nth
	first. Example: for May 7 giv		eubetitute pro	gram was carried by your	cable system	List the tim	nes accurate	hy.
	to the nearest five minutes.							iy
	stated as "6:00-6:30 p.m."							
				was substituted for progra				
	to delete under FCC rules a was substituted for program							am
	effect on October 19, 1976.					ina rogalatio		
	-							I
			TE PROGRAM	1		N SUBSTI		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH		TIMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то	
							_	
]						
					_			
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							<u>-</u>	

Accounting Period:	2019/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SY	STEM ID# 002826
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmit (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ssion service mount, see	,166.32 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 \$2 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	63,800	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00	his six-mon	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of group requires from an and 1/		
	Enter the amount of gross receipts from space K Sase amount under statutory formula Sase amount under statutory formula Sase 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		
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Registe See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for m		

Accounting Period:	2019/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 002826
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services.	29 430
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
Be Contacted for Further Information	Name SARAH BOGUE Telephone	903) 579-3121
	Address 3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite number) TYLER, TX 75701 (City, town, state, zip)	
	Email SARAH.BOGUE@ALTICEUSA.COM Fax (optional)	
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; of (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	tem as identified
	Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith) Typed or printed name: ALAN DANNENBAUM Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership) Date: 08/18/2019	

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

Inting Period: 2019/1	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
UEL COMMUNICATIONS LLC	0028
 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 Statemen Concerning Gross Receipts Exclusio
YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	
For an explanation of interest assessment, see page (viji) of the general instructions located in the paper SA1-2 form.	Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
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
	Q Interest Assessme
	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
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Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme

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