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

STATEM	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	Return completed workbook by email to
-	ary Transmissions by	DATE RECEIVED	AMOUNT	
Cable Syst	ems (Short Form) uctions are located		\$	<u>coplicsoa@copyright.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at
in the first tal	o of this workbook.	2/28/2023	ALLOCATION NUMBER	(202) 707-8150.
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY	YY/(Period))	
	2022/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	2022	2 Barcode Data Filing Period (optional -	- see instructions)	
Accounting	2022			
Period				
В	Instructions: Give the full legal name of the owner of t subsidiary, not that of the parent corpora	•	ary of another corporation, give the full corpora	te title of the
Owner	List any other name or names under whic	ch the owner conducts the business of the	cable system.	
		accounting period, only the owner on the ment covering the entire accounting perio	e last day of the accounting period should subm od.	it a single
				008649

		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.	3649
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		CEQUEL COMMUNICATIONS LLC BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		SUDDENLINK COMMUNICATIONS	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)	
		TYLER, TX 75701 (City, town, state, zip)	
	INCT		* • • • •
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless is 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:	
	1	CUSHING, OK	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	

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

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	008649
D Area Served	Instructions: List each separate community served by the cable system. A "c separate and distinct community or municipal entity (including unincorporat unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or city.	ted communities within unincorporated areas and including single, discrete will serve as a form of system identification hereafter known as the "first
First Community	CITY OR TOWN CUSHING	OK
Add Rows as Necessary		

									FO		
Name	LEGAL NAME OF OWNER OF CA										ГЕМ ID 00864
	CEQUEL COMMUNICAT	IONS LLC									JU004
_	SECONDARY TRANSMISSION	SERVICE: SU	BSCRIE	BERS AND RA	TES						
E	In General: The information in s		-			transmission se	ervic	e of the	e cable		
. .	system, that is, the retransmission										
Secondary Transmission	about other services (including p last day of the accounting period						lose	existin	g on the		
Service: Sub-	Number of Subscribers: Both						le sy	/stem,	broken		
scribers and	down by categories of secondary	•					-				
Rates	each category by counting the nu							itions c	harged		
	separately for the particular servi							oborgo	and the		
	Rate: Give the standard rate c unit in which it is generally billed.										
	category, but do not include disc				ly standart		vviti	ini a po			
	Block 1: In the left-hand block	in space E, the	form lis	sts the categori							
	systems most commonly provide										
	that applies to your system. Note										
	categories, that person or entity subscriber who pays extra for ca										
	first set" and would be counted o										
	Block 2: If your cable system I					service that are	diffe	rent fro	m those		
	printed in block 1 (for example, ti										
	with the number of subscribers a	ind rates, in the	right-ha	and block. A tw	o- or three	e-word description	on of	the se	rvice is		
	sufficient.	DCK 1					B	LOCK	2		
		NO. OF							NO. OI		
	CATEGORY OF SERVICE	SUBSCRIBE	RS	RATE	CAT	EGORY OF SEI	RVIC	ЭE	SUBSCRIE	BERS	RATE
	Residential:		840	50.00							
	Service to first set		840	50.00							
	Service to additional set(s)										
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		54	45.95							
	Converter										
	Residential										
	Non-residential										
	SERVICES OTHER THAN SEC	ONDARY TRAN	NSMISS	SIONS: RATES	;						
-	In General: Space F calls for rat					your cable syst	em's	s servic	es that were	1	
F	not covered in space E, that is, the										
Comisso	service for a single fee. There ar										
Services Other Than	furnished at cost or (2) services amount of the charge and the un										
Secondary	enter only the letters "PP" in the		locally i			igou on a vana			gram baolo,		
Fransmissions:	Block 1: Give the standard rat										
Rates	Block 2: List any services that	• •			-	÷ .					
	listed in block 1 and for which a s brief (two- or three-word) descrip				shed. List t	hese other serv	ices	in the	form of a		
	bher (two- or timee-word) descrip			le for each.			1				
		BLOO				5475			BLOCI		D 4 T 5
			CATEG	ORY OF SER	VICE	RATE	C	ATEG	DRY OF SEF	RVICE	RATE
	CATEGORY OF SERVICE				idontial						
	Continuing Services:		Installa	tion: Non-res	idential						
	Continuing Services: • Pay cable	17.00	Installa • Mot	ition: Non-res el, hotel	idential						
	Continuing Services: • Pay cable • Pay cable—add'l channel		Installa • Mot • Cor	ition: Non-res el, hotel nmercial	idential						
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	17.00	Installa • Mot • Con • Pay	ition: Non-res el, hotel nmercial r cable							
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	17.00	Installa • Mot • Con • Pay • Pay	ition: Non-res rel, hotel nmercial / cable / cable-add'l ch							
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	17.00 19.00	Installa • Mot • Con • Pay • Pay • Fire	ttion: Non-res rel, hotel nmercial r cable r cable-add'l ch e protection							
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set	17.00 19.00 99.00	Installa • Mot • Con • Pay • Pay • Fire • Burg	ttion: Non-res rel, hotel nmercial cable cable-add'l ch protection glar protection			······				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	17.00 19.00 99.00	Installa • Mot • Con • Pay • Pay • Fire • Burg	tion: Non-res rel, hotel nmercial cable cable-add'l ch protection glar protection services:							
	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)	17.00 19.00 99.00	Installa • Mot • Cor • Pay • Pay • Fire • Bur Other s • Rec	tion: Non-res rel, hotel nmercial cable cable-add'l ch protection glar protection services: connect		40.00	·····				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	17.00 19.00 99.00	Installa • Mot • Con • Pay • Pay • Fire • Bury Other s • Rec • Disc	tion: Non-res el, hotel nmercial cable-add'l ch protection glar protection services: connect connect			·····				
	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)	17.00 19.00 99.00	Installa • Mot • Con • Pay • Pay • Fire • Bur Other s • Rec • Disc • Out	tion: Non-res rel, hotel nmercial cable cable-add'l ch protection glar protection services: connect	annel	40.00 25.00 99.00					

Name	LEGAL NAME OF OWNER C	OF CABLE SYSTEM:		SYSTEM
Name	CEQUEL COMMUNIC	CATIONS LLC		008
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(entify every television station (including t m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.61	(1) stations carried only on a part- e carriage of certain network prog	time basis under rams [sections
Transmitters: Television	Substitute Basis Stations basis under specific FCC r • Do not list the station her station was carried only or • List the station here, and basis. For further informatic Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by enter	also in space I, if the station was carried on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	e Special Statement and Program both on a substitute basis and al- see page (v) of the general instruc rogram services such as HBO, ES -air designation. For example, rep vision station for broadcasting ove station, an independent station, or for network multicast), "I" (for indep	n Log)—if the so on some other ctions. SPN, etc. Identify each port multistream er the air in its community a noncommercial pendent), "I-M"
	Column 4: Give the locatic FCC. For Mexican or Cana	erms, see page (iv) of the general instru- on of each station. For U.S. stations, list idian stations, if any, give the name of th	the community to which the station the community with which the station	n is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KAUT-1	43	I	OKLAHOMA CITY, OK
	KAUT-2	43.2	I-M	OKLAHOMA CITY, OK
d Rows as Necessary	KAUT-3	43.3	I-M	OKLAHOMA CITY, OK
	KAUT-HD1	43	I-M	OKLAHOMA CITY, OK
	KETA-1	13	E	OKLAHOMA CITY, OK
	KETA-2	13.2	E-M	OKLAHOMA CITY, OK
	KETA-HD1	13	E-M	OKLAHOMA CITY, OK
	KFOR-1	4	N	OKLAHOMA CITY, OK
	KFOR-2	4.2	I-M	OKLAHOMA CITY, OK
	KFOR-3	4.3	I-M	OKLAHOMA CITY, OK
	KFOR-HD1	4	N-M	OKLAHOMA CITY, OK
	KOCB-1	34	I	OKLAHOMA CITY, OK
	КОСВ-2	34.2	I-M	OKLAHOMA CITY, OK
	КОСВ-3	34.3	I-M	OKLAHOMA CITY, OK
	KOCB-HD1	34	I-M	OKLAHOMA CITY, OK
	KOCM-1	46	I	NORMAN, OK
	KOCO-1	5	N	OKLAHOMA CITY, OK
	KOCO-2	5.2	I-M	OKLAHOMA CITY, OK
	KOCO-HD1	5	N-M	OKLAHOMA CITY, OK
	КОКН-1	25	I	OKLAHOMA CITY, OK
	КОКН-2	25.2	I-M	OKLAHOMA CITY, OK
	КОКН-З	25.3	I-M	OKLAHOMA CITY, OK
	KOKH-HD1	25	I-M	OKLAHOMA CITY, OK
	KOPX-1	62		OKLAHUMA CITY. OK
	KOPX-1 KOPX-HD1	62 62	I-M	OKLAHOMA CITY, OK OKLAHOMA CITY, OK
			I I-M I	OKLAHOMA CITY, OK OKLAHOMA CITY, OK OKLAHOMA CITY, OK

	LEGAL NAME OF OWNER (OF CABLE SYSTEM:		SYSTEMI
Name	CEQUEL COMMUNIC	CATIONS LLC		0086
	PRIMARY TRANSMITTERS	: TELEVISION		
G	carried by your cable syste	dentify every television station (including tra em during the accounting period, <i>except</i> (s in effect on June 24, 1981, permitting the	1) stations carried only on a part	-time basis under
Primary		(e)(2) and (4), or 76.63 (referring to 76.61)		
Transmitters:	substitute program basis,	as explained in the next paragraph.		
Television		s: With respect to any distant stations carr rules, regulations, or authorizations:	ried by your cable system on a si	ubstitute program
		ere in space G—but do list it in space I (the	Special Statement and Progran	n Log)—if the
	station was carried only o		-	
		I also in space I, if the station was carried I ion concerning substitute basis stations, s		
		on's call sign. <i>Do not</i> report origination pro		
		ed with a station according to its over-the-a	air designation. For example, re	port multistream
	"WETA-2" as the same or	ո the form. nel number the FCC assigned to the televi	sion station for broadcasting over	ar the air in its community
		VRC is channel 4 in Washington, D.C.	sion station for broadbasting ove	
		ch case whether the station is a network st	ation, an independent station, or	a noncommercial
			· · · · · · · · ·	
		tering the letter "N" (for network), "N-M" (fo	r network multicast), "I" (for inde	pendent), "I-M"
	(for independent multicast	tering the letter "N" (for network), "N-M" (fo t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct	r network multicast), "I" (for inde "E-M" (for noncommercial educa	pendent), "I-M"
	(for independent multicast For the meaning of these Column 4: Give the locati	t), "E ["] (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th	r network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statio	pendent), "I-M" ational multicast). n is licensed by the
	(for independent multicast For the meaning of these Column 4: Give the locati	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct	r network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statio	pendent), "I-M" ational multicast). n is licensed by the
	(for independent multicast For the meaning of these Column 4: Give the locati	t), "E ["] (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th	r network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statio	pendent), "I-M" ational multicast). n is licensed by the
	(for independent multicast For the meaning of these Column 4: Give the locati	t), "E ["] (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th	r network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statio	pendent), "I-M" ational multicast). n is licensed by the
	(for independent multicast For the meaning of these t Column 4: Give the locati FCC. For Mexican or Cana	t), "E ["] (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the	r network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statio community with which the statio	pendent), "I-M" ational multicast). on is licensed by the on is identified.
	(for independent multicast For the meaning of these t Column 4: Give the locati FCC. For Mexican or Cana 1. CALL SIGN	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	r network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statio community with which the statio	pendent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION
	(for independent multicast For the meaning of these f Column 4: Give the locati FCC. For Mexican or Can 1. CALL SIGN KTBO-1	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 14	r network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. ne community to which the statio community with which the statio	pendent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OKLAHOMA CITY, OK
	(for independent multicast For the meaning of these t Column 4: Give the locati FCC. For Mexican or Can 1. CALL SIGN KTBO-1 KTBO-HD1	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 14 14	r network multicast), "I" (for inde "E-M" (for noncommercial educa- tions in the paper SA1-2 form. he community to which the station community with which the station 3. TYPE OF STATION I	pendent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OKLAHOMA CITY, OK OKLAHOMA CITY, OK
	(for independent multicast For the meaning of these f Column 4: Give the locati FCC. For Mexican or Cana 1. CALL SIGN KTBO-1 KTBO-HD1 KTUL-1	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 14 14 8	r network multicast), "I" (for inde "E-M" (for noncommercial educa- tions in the paper SA1-2 form. he community to which the station community with which the station 3. TYPE OF STATION I	pendent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OKLAHOMA CITY, OK OKLAHOMA CITY, OK TULSA, OK
	(for independent multicast For the meaning of these t Column 4: Give the locati FCC. For Mexican or Cana 1. CALL SIGN KTBO-1 KTBO-HD1 KTUL-1 KTUL-1 KTUZ-1	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 14 14 8 30	r network multicast), "I" (for inde "E-M" (for noncommercial educa- tions in the paper SA1-2 form. he community to which the station community with which the station 3. TYPE OF STATION I I N I	pendent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OKLAHOMA CITY, OK OKLAHOMA CITY, OK TULSA, OK SHAWNEE, OK
	(for independent multicast For the meaning of these f Column 4: Give the locati FCC. For Mexican or Cana 1. CALL SIGN KTBO-1 KTBO-HD1 KTUL-1 KTUL-1 KTUZ-1 KTUZ-HD1	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruction of each station. For U.S. stations, list the adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 14 14 8 30 30 30	r network multicast), "I" (for inde "E-M" (for noncommercial educa- tions in the paper SA1-2 form. he community to which the station community with which the station 3. TYPE OF STATION I I N I	pendent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OKLAHOMA CITY, OK OKLAHOMA CITY, OK TULSA, OK SHAWNEE, OK SHAWNEE, OK
	(for independent multicast For the meaning of these t Column 4: Give the locati FCC. For Mexican or Cana 1. CALL SIGN KTBO-1 KTBO-HD1 KTUL-1 KTUL-1 KTUZ-1 KTUZ-HD1 KWEM-1	t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct ion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 14 14 8 30 30 31	r network multicast), "I" (for inde "E-M" (for noncommercial educa- tions in the paper SA1-2 form. he community to which the station community with which the station 3. TYPE OF STATION I I I I I I I I I I I I I I	pendent), "I-M" ational multicast). on is licensed by the on is identified. 4. LOCATION OF STATION OKLAHOMA CITY, OK OKLAHOMA CITY, OK TULSA, OK SHAWNEE, OK SHAWNEE, OK STILLWATER, OK

	F OWNER OF C								SYSTEM II 0086
n General: Lis		tation ca	rried on a separate and discre nerally receivable by your cabl					ied on an	н
eceivable if (1) in the basis of for detailed infi- aper SA1-2 fo Column 1: lo Column 2: S Column 3: li ignal, indicate Column 4: C	i it is carried by monitoring, to prmation abou rm. dentify the call State whether t the radio stati this by placing Sive the station	y the sys be receivent 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 at ved at the headend, with the s pyright Office regulations on th each station carried. n is AM or FM. nal was electronically process a mark in the "S/D" column. on (the community to which the the community with which the	t the syste his p sed b	system's hea em's FM anter oint, see page by the cable sy ation is license	idend, and (2) nna, during ce e (v) of the gen vstem as a sep ed by the FCC	it can b rtain sta neral ins parate a	e expected, ted intervals. structions 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	
		r- -					1		
								L	

Accounting Perio	d: 2022/2						FOF	RM SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	TEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LL	_C					008649
	SUBSTITUTE CARRIAGE	: SPECIA		T AND PROGRAM LOG				
	In General: In space I, identi	-	-			on that you	r cable syste	em carried on a
-	substitute basis during the a							
Substitute	explanation of the programm				e general instr	uctions in th	ne paper SA	1-2 form.
Carriage:	1. SPECIAL STATEMENT							
Special Statement and	 During the accounting per 	riod, did you	ur cable system	carry, on a substitute bas	sis, any nonne	etwork telev	vision progra	
Program Log	broadcast by a distant stat	ion?					YES	× NO
	Note: If your answer is "No	," leave the	rest of this pag	ge blank. If your answer is	s "Yes," you m	ust comple	ete the progr	am
	log in block 2.				·			
	2. LOG OF SUBSTITUTE	PROGRA	MS					
	In General: List each subs				s wherever po	ssible, if th	eir meaning	is
	clear. If you need more spa			rows to the tables. ision program ("substitute	orogram") th	at during t	he accounti	na
	period, was broadcast by a							
	under certain FCC rules, re	gulations, c	or authorization	s. See page (v) of the ger	neral instruction	ons for furt	her informat	ion.
	Do not use general categor "NBA Basketball: 76ers vs.		ovies" or "baske	etball." List specific progra	am titles, for ex	xample, "I L	Love Lucy" o	or
			dcast live, ente	r "Yes." Otherwise enter "	'No."			
	Column 3: Give the call	sign of the	station broadca	asting the substitute progr	am.			
	Column 4: Give the broat the case of Mexican or Car			ne community to which the			ne FCC or, i	n
				tem carried the substitute			, with the m	onth
	first. Example: for May 7 giv	ve "5/7."						
	Column 6: State the time to the nearest five minutes.	es when the	e substitute pro	gram was carried by your	cable system	1. List the ti	mes accura	tely
	stated as "6:00–6:30 p.m."	Example. a	a program cam	ed by a system from 6.01	. 15 p.m. to o.	20.30 p.m.	should be	
	Column 7: Enter the lett	er "R" if the	listed program	was substituted for progr	ramming that	your syster	n was <i>requi</i> i	red
	to delete under FCC rules a		ons in effect du	iring the accounting perio				gram
	to delete under FCC rules a was substituted for program	nming that y	ons in effect du	iring the accounting perio				gram
	to delete under FCC rules a	nming that y	ons in effect du	iring the accounting perio	er FCC rules	and regulat	tions in	ogram
	to delete under FCC rules a was substituted for progran effect on October 19, 1976	nming that y	ons in effect du your system wa	iring the accounting perio	er FCC rules	and regulat	tions in ITUTE	
	to delete under FCC rules a was substituted for progran effect on October 19, 1976	nming that y	ons in effect du	iring the accounting perio	er FCC rules	and regulat EN SUBST	tions in ITUTE	7. REASON FOR DELETION
	to delete under FCC rules a was substituted for progran effect on October 19, 1976	nming that y	ons in effect du your system wa	iring the accounting perio	er FCC rules WHE CARR	and regulat EN SUBST	tions in ITUTE SURRED	7. REASON FOR
	to delete under FCC rules a was substituted for progran effect on October 19, 1976	SUBSTITUT	ons in effect du your system wa E PROGRAM 3. STATION'S	uring the accounting perio s permitted to delete unde	er FCC rules WHE CARR	EN SUBST	ITUTE URRED TIMES	7. REASON FOR
	to delete under FCC rules a was substituted for progran effect on October 19, 1976	SUBSTITUT	ons in effect du your system wa E PROGRAM 3. STATION'S	uring the accounting perio s permitted to delete unde	er FCC rules WHE CARR	EN SUBST	ITUTE URRED TIMES	7. REASON FOR
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Accounting Period:	2022/2	FORMS	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	:	SYSTEM ID# 008649
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Er all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	nission service amount, see \$ 2	
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less. Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$ Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600. See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800.	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00.	his six-month	
	Line 1. Royalty fee for accounting period		
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137	-	
	1. 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	251,083.93	-
	5. Enter the amount from line 3	12,716.07	-
	6. Subtract line 5 from line 4	238,367.86	-
	7. Multiply line 6 by .005 (enter figure here)	\$	1,191.84
	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	·\$	1,191.84
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$52	7,600)	
	1. Enter the amount of gross receipts from space K	-	
	2. Base amount under statutory formula \$ 263,800.00	-	
	3. Subtract line 2 from line 1	-	
	4. Multiply line 3 by .01	-	-
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	-
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	-
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	1,191.84	-
	2. Filing Fee (See the instructions for more information on filing fee calculations)	20.00	-
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	1,211.84
	EFT Trace # or TRANSACTION ID #]	
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for n		

Accounting Period:	2022/2							FORM	M SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF O								SYSTEM ID# 008649
M Channels	 CHANNELS Instructions: You must giv to its subscribers, and (2) th 1. Enter the total number of system carried television 2. Enter the total number of on which the cable system and nonbroadcast service 	ne cable system's tot channels on which t broadcast stations activated channels m carried television t	tal number the cable	of activated channels	during the a	accounting period.		36 643	
N Individual to Be Contacted	INDIVIDUAL TO BE CONT we can contact about this s			IATION IS NEEDED ((Identify an ir	ndividual			
for Further Information	Name RODNE	Y HASKINS				Telep	hone (903)	579-3152	
	(Number, str	SE LOOP 323 eet, rural route, apartmer TX 75701 tate, zip)	nt, or suite nu	umber)					
	Email	RODNEY.HASKIN	NS@ALTI	CEUSA.COM		Fax (optional			
	CERTIFICATION (This staten	nent of account must	t be certifie	ed and signed in accor	rdance with (Copyright Office regulat	tions)		
O Certification	(Agent of owner of in line 1 of s	corporation or partr ther than corporation pace B and that the ov r) I am an officer (if a o pace B. nt of account and here ct to the best of my kn	nership) I a n or partne wner is not corporation eby declare	am the owner of the cat ership) I am the duly au a corporation or partner n) or a partner (if a partn under penalty of law th	uthorized ager rship; or nership) of the at all stateme		ole system as i		
			nter an elec	s/ Alan Dannenbar tronic signature on the rre using an "/s/ signatur	line above to				
		Typed or printed na	ame: A	LAN DANNENBA	AUM				
				OGRAMMING ition held in corporation or	partnership)				
		Date:				2/28/2023			

Privacy Act Notice: Section 111 of 11tle 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 it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

unting Period: 2022/2	FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
QUEL COMMUNICATIONS LLC	0086
 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 Statemer Concerning Gros Receipts Exclusio
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.	Q Interest Assessme
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