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.

### SA3E Long Form

#### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY					
DATE RECEIVED	AMOUNT				
8/29/24	\$ ALLOCATION NUMBER				

Return completed workbook by email to:

coplicsoa@copyright.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting	2024/1			
Period				
Bowner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines if there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID  LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM  CEQUEL COMMUNICATIONS LLC	ss of the cable syster on the last day of the unting period.	em. he accounting period should su	
				0080212024
				008021 2024/1
	3027 S SE LOOP 323 TYLER, TX 75701			
С	INSTRUCTIONS: In line 1, give any business or trade names used to			
	names already appear in space B. In line 2, give the mailing address of	or the system, if di	Terent from the address giv	en in space B.
System	1 IDENTIFICATION OF CABLE SYSTEM:			
	NACOGDOCHES			
	MAILING ADDRESS OF CABLE SYSTEM:			
	2 (Number, street, rural route, apartment, or suite number)			
	10000000000000000000000000000000000000			
	(City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst com	munity served below and re	elist on page 1b
Area	with all communities.			
Served	CITY OR TOWN	STATE		
First	NACOGDOCHES	TX		
Community	Below is a sample for reporting communities if you report multiple ch	annel line-ups in S	Space G.	
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	A	1
•	Alliance	MD	В	2
	Gering	MD	В	3

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 fling, a determination that would be made by a court of law.

**ACCOUNTING PERIOD: 2024/1** FORM SA3E. PAGE 1b. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: 008021 CEQUEL COMMUNICATIONS LLC Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form Area of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Served Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town. If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and a subscriber group designated by a number (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns below. STATE CH LINE UP SUB GRP# CITY OR TOWN **NACOGDOCHES** TX First ΤX **APPLEBY** Community **NACOGDOCHES COUNTY** TX See instructions for additional information on alphabetization. Add rows as necessary.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

CEQUEL COMMUNICATIONS LLC

SYSTEM ID# 008021

## Ε

#### Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

**In General:** The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information 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).

**Number of Subscribers:** Both blocks in space E call for the number of subscribers to the cable system, broken 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 separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

**Block 2:** If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLG	OCK 1		BLOCK 2
	NO. OF		NO. OF
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE SUBSCRIBERS RATE
Residential:			
<ul> <li>Service to first set</li> </ul>	3,576	\$ 50.00	
<ul> <li>Service to additional set(s)</li> </ul>			
<ul> <li>FM radio (if separate rate)</li> </ul>			
Motel, hotel			
Commercial	252	\$ 45.95	
Converter			
Residential			
Non-residential			
ſ	<b>*</b>	<b>†</b>	

## F

#### Services Other Than Secondary Transmissions: Rates

#### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the 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.

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 listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

	BLOCK 1						
CATEGORY OF SERVICE RATE CATEGORY OF SERVICE						CATEGORY OF SERVICE	RATE
Continuing Services:			Installation: Non-residential				
• Pay cable	\$	17.00	Motel, hotel				
<ul> <li>Pay cable—add'l channel</li> </ul>	\$	19.00	Commercial				
<ul> <li>Fire protection</li> </ul>			• Pay cable				
<ul><li>Burglar protection</li></ul>			Pay cable-add'l channel				
Installation: Residential			Fire protection				
First set	\$	99.00	Burglar protection				
<ul> <li>Additional set(s)</li> </ul>	\$	25.00	Other services:				
<ul> <li>FM radio (if separate rate)</li> </ul>			Reconnect	\$	40.00		
Converter			Disconnect				
		Outlet relocation	\$	25.00			
			<ul> <li>Move to new address</li> </ul>	address \$ 99.00			

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name CEQUEL COMMUNICATIONS LLC 008021 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under 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** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc 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 located in the paper SA3 form Column 1: List each station's call sign. Do not 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 multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example Column 2: Give the channel number the FCC has 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. This may be different from the channel on which your cable system carried the station. 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-M" (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 (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: 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 identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 2. B'CAST 3. TYPE . BASIS OF 1. CALL 4 DISTANT? 6. LOCATION OF STATION SIGN CHANNEL CARRIAGE OF (Yes or No) NUMBER STATION (If Distant) KCEB-1 26 No LONGVIEW, TX KDKJ-1 27 No TYLER, TX See instructions for additional information or KERA-1 13 Ε Yes 0 DALLAS, TX alphabetization 0 KERA-3 13.3 E-M Yes DALLAS, TX E-M KERA-4 13.4 Yes 0 DALLAS, TX KERA-HD1 13 E-M Yes Ε DALLAS, TX KETK-1 56 Ν No JACKSONVILLE, TX KETK-2 56.2 I-M No JACKSONVILLE, TX I-M No KETK-4 56.4 JACKSONVILLE, TX KETK-HD1 JACKSONVILLE, TX 56 N-M No KFXK-1 51 ı No LONGVIEW, TX KFXK-HD1 51 I-M No LONGVIEW, TX KLNM-1 42 ı No LUFKIN, TX SHREVEPORT, LA KSLA-1 12 Ν No KTPN-1 47 No LONGVIEW, TX I LONGVIEW, TX KTPN-HD1 47 I-M No KTRE-1 9 Ν No LUFKIN, TX KTRE-2 9.2 I-M No LUFKIN, TX KTRE-HD1 9 N-M No LUFKIN, TX KYTX-1 No NACOGDOCHES, TX 19 Ν KYTX-2 19.2 I-M No NACOGDOCHES, TX KYTX-3 19.3 I-M No NACOGDOCHES, TX KYTX-HD1 19 N-M NACOGDOCHES, TX No

**ACCOUNTING PERIOD: 2024/1** FORM SA3E. PAGE 4. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 008021 **CEQUEL COMMUNICATIONS LLC** PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally **Primary** Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the 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). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM LOCATION OF STATION S/D

TORWI GASE, I AGE 3.						ACCOUNTING	1 LINIOD. 2024/1
LEGAL NAME OF OWNER OF CEQUEL COMMUNICA					S	008021	Name
SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	ENT AND PROGRAM LO	G			
In General: In space I, ident substitute basis during the a explanation of the programm form.	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	Substitute
1. SPECIAL STATEMEN	T CONCE	RNING SUBS	TITUTE CARRIAGE				Carriage:
During the accounting per broadcast by a distant start	riod, did yo			sis, any noni	network television progr		Special Statement and Program Log
Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you	· ·	· •	r rogram Log
log in block 2.  2. LOG OF SUBSTITUT	E PROGRA	AMS					
In General: List each subsclear. If you need more space Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informatitles, for example, "I Love Column 2: If the progra Column 3: Give the call Column 4: Give the brothe case of Mexican or Calumn 5: Give the mofirst. Example: for May 7 gi Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m."	stitute prograce, please of every not distant state gulations, ation. Do not be used to	am on a sepan attach additio connetwork tele- ition and that y or authorizatio ot use general BA Basketball adcast live, ent station broaddion's location ( ions, if any, the y when your sy he substitute pro a program car	nal pages. evision program (substitute rour cable system substitut rns. See page (vi) of the ge categories like "movies", 76ers vs. Bulls." rer "Yes." Otherwise enter casting the substitute prog the community to which the extern carried the substitute rogram was carried by you	program) the ded for the program instructor "basketbal" "No." ram. e station is life station is ide program. U r cable syste	at, during the accounting ogramming of another stions located in the paper. List specific program censed by the FCC or, illentified).  se numerals, with the man. List the times accurates the second of the second	g station er in nonth	
to delete under FCC rules							
gram was substituted for p	rogrammin						
effect on October 19, 1976	i.						
S	UBSTITUT	E PROGRAM	1		EN SUBSTITUTE IAGE OCCURRED	7. REASON	
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION	
	103 01 140	OALL GIGIT	4. CIMION CECOMION	AND BAT	TROW		
	<del> </del>						
	<del> </del>					· <del></del>	
	<del> </del>				<u> </u>		
	<del> </del>				<u> </u>	,	
					<u> </u>		
	<b></b>					·	
					_		
					_		
					_		
					_	'	

ACCOUNTING PERIOD: 2024/1 FORM SA3E. PAGE 6.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name **CEQUEL COMMUNICATIONS LLC** 008021 PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-J time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in Part-Time column 5 of space G. Carriage Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc-Log curred during the accounting period. · Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give • State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.- 3:15 a.m. app." • You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m." DATES AND HOURS OF PART-TIME CARRIAGE WHEN CARRIAGE OCCURRED WHEN CARRIAGE OCCURRED **CALL SIGN CALL SIGN** HOURS HOURS DATE **FROM** DATE **FROM** TO TO

	L NAME OF OWNER OF CABLE SYSTEM: QUEL COMMUNICATIONS LLC	SYSTEM ID# 008021	Name
Inst all a (as i	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount younts (gross receipts) paid to your cable system by subscribers for the system's secondentifed in space E) during the accounting period. For a further explanation of how to coe (vii) of the general instructions.	idary transmission service	K Gross Receipts
IMP	Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  ORTANT: You must complete a statement in space P concerning gross receipts.	\$ 1,252,508.06 (Amount of gross receipts)	
<ul><li>Instru</li><li>Com</li><li>Com</li><li>If you fee to</li><li>If you</li></ul>	RIGHT ROYALTY FEE ctions: Use the blocks in this space L to determine the royalty fee you owe: uplete block 1, showing your minimum fee. uplete block 2, showing whether your system carried any distant television stations. For block 2, showing whether your system carried any distant television stations, ur system did not carry any distant television stations, leave block 3 blank. Enter the amount of the property of the carry any distant television stations, you must complete the applicable pare tempanying this form and attach the schedule to your statement of account.		<b>L</b> Copyright Royalty Fee
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.	entered on line 1 of	
▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block ${\sf C}$ should be er low.	ntered on line 2 in block	
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shoul block 4 below.	ld be entered on line	
	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	is 1.064 percent of the	
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 1,252,508.06	
	This is your minimum fee.	\$ 13,326.69	
	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the ispace G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period X Yes—Complete the DSE schedule.  No—Leave block 3 below blank and of the state of the st	n 4, you must check d?	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ 9,995.01	
3	Line 2. <b>3.75 Fee:</b> Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00	
	Line 3. Add lines 1 and 2 and enter here	\$ 9,995.01	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 13,326.69	Cable systems
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	0.00	submitting additional
	zero.  Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact
	Line 4. FILING FEE	\$ 725.00	the Licensing additional fees. Division for the
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 14,051.69	appropriate form for submitting the
	EFT Trace # or TRANSACTION ID #		additional fees.
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (S general instructions located in the paper SA3 form and the Excel instructions ta		

ACCOUNTING PERIOD: 2024/1 FORM SA3E, PAGE 8.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  CEQUEL COMMUNICATIONS LLC  SYSTEM ID  00802										
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										
	and nonbroadcast services										
N Individual to											
Be Contacted for Further Information	Name RODNEY HASKINS Telephone (903) 579-3152										
	Address 3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)										
	TYLER, TX 75701 (City, town, state, zip)										
	Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional)										
•	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)										
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, 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; or										
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified 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 of the cable system 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)]										
	X /s/ Alan Dannenbaum										
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement.  (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.										
	Typed or printed name: ALAN DANNENBAUM										
	Title: SVP, PROGRAMMING  (Title of official position held in corporation or partnership)										
	Date: August 29, 2024										

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 telephonumbers. 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 the 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 law

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name			
CEQUEL COMMUNICATIONS LLC	008021	Name			
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 in the paper SA3 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 Mailing Address					
INTEREST ASSESSMENTS					
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpated as a late payment or underpated as a late payment or underpated as a late payment or	ayment.	Q			
Line 1 Enter the amount of late payment or underpayment		Interest Assessment			
Line 2 Multiply line 1 by the interest rate* and enter the sum here	- days				
Line 3 Multiply line 2 by the number of days late and enter the sum here	- 0274				
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	-				
(interest	charge)				
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	please				
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.					
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the offiling.	original				
Owner Address					
First community served					
Accounting period					
ID number					

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 th 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 fling, a determination that would be made by a court of law.

#### COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

#### SCHEDULE

Determine whether any of the stations you carried were partially distant—that is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
- 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule; or

If any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule.

4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

- Calculate a separate base rate fee for each subscriber group, using
   the rates given above;
   the total number of DSEs for that group's complement of stations;
   and
   the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

**Rounding Off DSEs.** In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

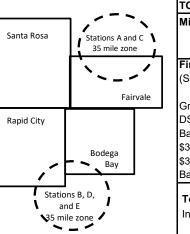
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

The example below is intended to supplement the instructions for calculating only the base rate fee for partially distant stations. The cable system would also be subject to the Syndicated Exclusivity Surcharge for partially distant stations, if any portion is located within a major television market.

#### **EXAMPLE**:

#### COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



Distant Stations Carried		identification	or Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

inimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	\$6,384,00

First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

DOL GOTTLDOLL, FAG	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			S	STEM ID#			
1	CEQUEL COMMUNICATIONS LLC 008021								
						006021			
	SUM OF DSEs OF CATEGOR		NS:						
	Add the DSEs of each station				0.75				
	Enter the sum here and in line	or part 5 or this	s schedule.		0.75				
	Instructions:								
2	In the column headed "Call S	<b>Sign":</b> list the ca	ll signs of all distant stations	identified by t	he letter "O" in column 5				
	of space G (page 3).			- "4 0" -					
	In the column headed "DSE"			= as "1.0"; for	each network or noncom-				
of DSEs for mercial educational station, give the DSE as ".25."  Category "O" CATEGORY "O" STATIONS: DSEs									
Stations	CALL SIGN	DSE	CALL SIGN	DSES	CALL SIGN	DSE			
Stations	KERA-1	0.250	CALL SIGN	DSL	CALL SIGN	DSL			
	KERA-3	0.250							
	KERA-4	0.250							
Add rows as									
necessary. Remember to copy									
all formula into new									
rows.									

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID#								
	CEQUEL CO	MMUNICATIONS LLC	; 					008021	
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3).  Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station.  Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."  Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.								
Capacity		C	ATEGORY	LAC STATIONS:	COMPUTATI	ON OF DSEs			
	1. CALL SIGN	2. NUMBEI OF HOU CARRIE SYSTEM	R IRS D BY	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	5. TYPE	6. DS	SE	
			÷		=	x	=		
			÷		=	x x			
			÷		=	x	=		
			÷		=	x	=		
			÷		=	X	=		
			÷		=	x x	=		
	Add the DSEs	of CATEGORY LAC Sof each station. Im here and in line 2 of page		chedule,		0.00			
Computation of DSEs for Substitute-Basis Stations	space I).  Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted							·m).	
		SU	BSTITUTE	-BASIS STATION	S: COMPUTA	TION OF DSEs	_		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	
		÷							
								=	
		÷		=				=	
		÷		=		÷			
	Add the DSEs	OF SUBSTITUTE-BASI	S STATIONS			0.00		_	
5		ER OF DSEs: Give the amo		boxes in parts 2, 3, and	4 of this schedule	e and add them to provide	the total		
Total Number	1. Number o	f DSEs from part 2 ●				<b>-</b>	0.75		
of DSEs	2. Number of DSEs from part 3 ● ▶								
	3. Number o	f DSEs from part 4 ●				<b>-</b>	0.00		
	TOTAL NUMBE	R OF DSEs						0.75	

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2024/1

	OWNER OF CABLE						S	4975 YSTEM ID# 008021	Name
	ck A must be com	pleted.							
n block A: If your answer if	"Yes," leave the re	emainder of p	art 6 and part	7 of the DSE sche	edule blank a	nd complete	part 8, (page 16) of	f the	6
schedule. • If your answer if "No," complete blocks B and C below.									
BLOCK A: TELEVISION MARKETS									Computation of 3.75 Fee
ls the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981?									3.75 Fee
Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7.									
X No—Comp	olete blocks B and	C below.							
		BLOC	K B: CARR	IAGE OF PERI	MITTED D	SEs			
Column 1: CALL SIGN	under FCC rules	and regulation ne DSE Sche	ons prior to Ju dule. (Note: T	ne 25, 1981. For fi he letter M below r	urther explan	ation of pern	ystem was permitte nitted stations, see t ast stream as set fo	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rt A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions fc E Carried pursus *F A station pre	ules and regued pursuant to as defined all educations de station (76.6 or DSE sched ant to individuationally carries). He station well and regular to the station well as the station	lations cited boothe FCC made in 76.5(kk) (in all station [76.565) (see paragule).  Lual waiver of Fed on a part-tirithin grade-B	76.59(d)(1), 76.61( i9(c), 76.61(d), 76. graph regarding su FCC rules (76.7) me or substitute ba contour, [76.59(d)(	ose in effect of 76.57, 76.59(l) (e)(1), 76.63(l) (e)(3), 76.63(l) (e)(1),	on June 24, 1 o), 76.61(b)(d a) referring to g to 76.61(d grandfathere	981.) c), 76.63(a) referring p 76.61(e)(1) d stations in the		
Column 3:		e stations ide determine the	ntified by the	n parts 2, 3, and 4 letter "F" in column	n 2, you must		e worksheet on pag	T	-
SIGN	BASIS	3. DSE	SIGN	BASIS	3. DSE	SIGN	BASIS	3. DSE	
KERA-1	C	0.25							
KERA-3 KERA-4	M	0.25 0.25							
NERA-4	M	0.25							
								0.75	
		В	LOCK C: CC	MPUTATION O	F 3.75 FEE				_
Line 1: Enter the total number of DSEs from part 5 of this schedule 0.75									
Line 2: Enter the sum of permitted DSEs from block B above 0.75									
				er of DSEs subject t 7 of this schedu		5 rate.		0.00	
Line 4: Enter gross receipts from space K (page 7)								Do any of the	
ne 5: Multiply li	ine 4 by 0.0375	and enter su	ım here						partially permited/ partially
no G. Fatanta	al number (CDO)	Co from the	2				х		nonpermitted carriage? If yes, see pa
ne o: Enter tota	al number of DS	⊏s irom iine	S					<u> </u>	9 instructions
ne 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7)									

	OWNER OF CABLE						S\	7STEM ID# 008021	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	IUED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
			· · · · · · · · · · · · · · · · · · ·	I		H	I		

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **CEQUEL COMMUNICATIONS LLC** 008021 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE **PERIOD** CARRIAGE DSE Instructions: Block A must be completed. 7 In block A: Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. Syndicated **BLOCK A: MAJOR TELEVISION MARKET Exclusivity** ls any portion of the cable system within a top 100 major television market as defned by section 76.5 of FCC rules in effect June 24, 1981? Surcharge Yes—Complete blocks B and C . X No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No-Enter zero and proceed to part 8. CALL SIGN CALL SIGN CALL SIGN DSE DSE DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 008021	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,252,508.06	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?	SF	
	is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	,_	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge.		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#						
Name	(	CEQUEL COMMUNICATIONS LLC	008021						
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.							
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ \$							
of the Syndicated Exclusivity		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$							
Surcharge		C. Multiply line B by 3.000 and enter here							
		D. Enter 0.00089 of gross receipts (the amount in section 1)							
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here							
		F. Multiply line D by line E and enter here							
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)							
		Syndicated Exclusivity Surcharge							
	Instru	ctions:							
8		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p	part						
		checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.							
Computation	1	ır answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.							
of Base Rate Fee	• If you blank	ır answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be	low						
Dase Nate i ee		i <b>s a partially distant station?</b> A station is "partially distant" if, at the time your system carried it, some of your subscribers							
	were lo	ocated within that station's local service area and others were located outside that area. For the definition of a station's "located outside that area."	cal						
	service	e area," see page (v) of the general instructions.							
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS							
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?							
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.							
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE							
	Section 1	Enter the amount of gross receipts from space K (page 7) ▶\$ 1,252,508	3.06						
	Section	Enter the total number of permitted DSEs from block B, part 6 of this schedule.							
	2	(If block A of part 6 was checked "Yes,"	0.75						
		use the total number of DSEs from part 5.)	0.75						
	Section 3	If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.							
		A. Enter 0.01064 of gross receipts							
		(the amount in section 1)	.01						
		B. Enter 0.00701 of gross receipts							
		(the amount in section 1)▶ <u>\$ 8,780.08</u>							
		C. Subtract 1.000 from total DSEs							
		(the figure in section 2) and enter here.							
		D. Multiply line B by line C and enter here	<u>-</u>						
		E. Add lines A, and D. This is your base rate fee. Enter here							
		and in block 3, line 1, space L (page 7)	9,995.01						
		Base Rate Fee							

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2024/1

	AME OF OWNER OF CABLE SYSTEM: SYSTEM  EL COMMUNICATIONS LLC 008	Nome
		021
Section I	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.	
	A. Enter 0.01064 of gross receipts  (the amount in section 1)  **State**  **State**	8
	B. Enter 0.00701 of gross receipts (the amount in section 1) \$	Computation of
	C. Multiply line B by 3.000 and enter here <b>&gt;</b> \$	Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1) \$	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here	
	F. Multiply line D by line E and enter here <b>&gt;</b>	
	G. Add lines A, C, and F. This is your base rate fee	
	Enter here and in block 3, line 1, space L (page 7)  Base Rate Fee  \$ 0.0	0
shall ins	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signal stead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel lius Space G.	
In Gene	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to excl	Computation
•	from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage lusion, you must:	e of of
	livide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the sar	Base Rate Fee and
station o	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the num	nber of Syndicated
	nd the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each gr Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	Surcharge
must als	If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, your compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below the computed by the computer of the co	w. Distant
	er, if your cable system is wholly located outside all major television markets, complete block A only.	Stations, and for Partially
Step 1:	Identify a Subscriber Group for Partially Distant Stations  For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Permitted Stations
-	For each wholly distant and each partially distant station you carried, determine which of your subscribers were located the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and	d, by
	ne token, the station is distant to the subscriber.)	
subscrib	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each per group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cabl will have only one subscriber group when the distant stations it carried have local service areas that coincide.	le
-	ting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's per groups.	
	section:	
	y the communities/areas represented by each subscriber group. he call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the	
	pers in the group.	
• lf:	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2	
	f this schedule; or,	., 5,
, , .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, 6 of this schedule.	
• Add th	e DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	ate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructio paper SA3 form.	ins
page. I	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the precedin n making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to sho	total

U.S. Copyright Office Form SA3E Long Form (Rev. 05-17)

your actual calculations on the form.

# LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 008021 **CEQUEL COMMUNICATIONS LLC** Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OW CEQUEL COMM						S	008021	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GRO		<u> </u>		SUBSCRIBER GRO		9
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE	Α		0	Computa
CALL SIGN DSE		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndica
								Exclusiv
								Surchar
								for
								Partiall
								Distan
								Station
		-						
otal DSEs			0.00	Total DSEs 0.00				
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
OMMUNITY/ AREA	4		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		  -						
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fourth Group \$		\$	0.00		
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fou	rth Group	\$	0.00		
			scriber group	as shown in the boxes	above.	ė	0.00	
inter here and in blo	оск 3, iine 1,	space L (page /)				\$	0.00	

LEGAL NAME OF OV CEQUEL COMN						<u> </u>	008021	Name
				TE FEES FOR EAG				
COMMUNITY ASS		SUBSCRIBER GRO		COMMUNITY ASS		SUBSCRIBER GRO		9
COMMUNITY/ ARE	:A		0	COMMUNITY/ ARE	.A		0	Computat
CALL SIGN	CALL SIGN DSE CALL SIGN DSE		DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicate Exclusivi
								Surcharg
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs 0.00				
Gross Receipts Firs	st Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee Firs	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	DUP					
COMMUNITY/ ARE	A		0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		# <del> </del>				···		
		·						
Total DSEs		Ш	0.00	Total DSEs		11	0.00	
			0.00	Gross Receipts Fou	ırth Group	\$	0.00	
	- "-	<u>·</u>						
Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fou	rth Group	\$	0.00		
				Ш				
			scriber group	as shown in the boxe	es above.	•	0.00	
nter here and in b	lock 3, line 1,	space L (page 7)				\$	0.00	

ACCOUNTING PERIOD: 2024/1

FORM SA3E. PAGE 20.

Second Script	Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mus also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in fector. June 24, 1981:    First 50 major television market   Second 50 major television market	Name	CEQUEL COMMUNICATIONS LLC	008021							
Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:    First 50 major television market   Second 50 major tele		BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP								
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations  Step 3: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. In line 2, give the total number of DSEs by subscriber group in the VHF Grade B contour stations listed in block A, part 9 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.  FIRST SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs.  Line 2: Subtract line 2 from line 1 and enter here. This is the total number of DSEs by subscriber group up subject to the surcharge computation.  SYNDICATED EXCLUSIVITY SURCHARGE Third Group.  \$YNDICATED EXCLUSIVITY SURCHARGE Third Group.  \$YNDICATED EXCLUSIVITY SURCHARGE Third Group.  \$YNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown	9	Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined								
Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations  Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.  Step 3: In line 3, subtract line 2 from line 1 This is the total number of DSEs used to compute the surcharge. Step 3: In line 3, subtract line 2 from line 1 This is the total number of DSEs used to compute the surcharge. Step 3: In line 3, subtract line 2 from line 1 and enter here. This is the subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.  FIRST SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs.  Line 2: Enter the Exempt DSEs.  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation.  SYNDICATED EXCLUSIVITY  SURCHARGE  First Group.  THIRD SUBSCRIBER GROUP  Enter the VHF DSEs.  Line 2: Enter the Exempt DSEs.  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation.  SYNDICATED EXCLUSIVITY  SURCHARGE  Third Group.  SYNDICATED EXCLUSIVITY  SURCHARGE  Third Group.  SYNDICATED EXCLUSIVITY  SURCHARGE  Third Group.  SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown.	=	☐ First 50 major television market ☐ Second 50 major television market								
Syndicated Exclusivity Surcharge for Partially Distant Stations  FIRST SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs.  Line 2: Enter the Exempt DSEs to blosscriber group subject to the surcharge computation.  SYNDICATED EXCLUSIVITY SURCHARGE:  Third Group.  SYNDICATED EXCLUSIVITY SURCHARGE:  SYNDICATED EXCLUSIVITY SURCHARGE:  Author Surcharge  SYNDICATED EXCLUSIVITY SURCHARGE:  Also 2: In line 1, give the total number of DSEs to reach subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this subscriber group  SECOND SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs.  Line 2: Enter the Exempt DSEs.  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation.  SYNDICATED EXCLUSIVITY  SURCHARGE  Third Group.  SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown.	<del></del>	_ · · _ ·								
Exclusivity Surcharge for Partially Distant Stations  Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. In none enter zero.  Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.  FIRST SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation.  SYNDICATED EXCLUSIVITY SURCHARGE First Group.  SYNDICATED EXCLUSIVITY SURCHARGE Third Group.  SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge of each subscriber group as shown			ercial VHF Grade B contour stations listed in block A, part 9 of							
Surcharge for Partially Distant Stations  Step 3: In line 3, subtract line 2 from line 1, This is the total number of DSEs of this subscriber group subject to the surcharge computation.  SYNDICATED EXCLUSIVITY SURCHARGE Third Group.  SYNDICATED EXCLUSIVITY SURCHARGE Third Group.  SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge computation.	•		for the VAE Crade B contour stations, that were electified as							
Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.	•	1								
Stations    Stations   Stations   Stations   Stations		Step 3: In line 3, subtract line 2 from line 1. This is the total number of	of DSEs used to compute the surcharge.							
Line 1: Enter the VHF DSEs	Distant	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show								
Line 1: Enter the VHF DSEs										
Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE First Group  SYNDICATED EXCLUSIVITY SURCHARGE First Group  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE First Group  SYNDICATED EXCLUSIVITY SURCHARGE First Group  SYNDICATED EXCLUSIVITY SURCHARGE Third Group  Line 2: Enter the Exempt DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE Third Group  SYNDICATED EXCLUSIVITY SURCHARGE Third Group  SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group as shown		FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP							
Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE First Group  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE First Group  \$ SYNDICATED EXCLUSIVITY SURCHARGE First Group  \$ SYNDICATED EXCLUSIVITY SURCHARGE Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs .  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE Third Group  \$ SYNDICATED EXCLUSIVITY SURCHARGE Third Group  \$ SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  \$ SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group as shown		Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation										
total number of DSEs for this subscriber group subject to the surcharge computation		Line 3: Subtract line 2 from line 1	Line 3: Subtract line 2 from line 1							
this subscriber group subject to the surcharge computation										
subject to the surcharge computation										
computation		,	- ·							
SURCHARGE First Group\$  THIRD SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs .  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation										
THIRD SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs.  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown		SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY							
THIRD SUBSCRIBER GROUP  Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		SURCHARGE								
Line 1: Enter the VHF DSEs		First Group	Second Group							
Line 2: Enter the Exempt DSEs.  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP							
Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs							
and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation		Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs							
this subscriber group subject to the surcharge computation										
subject to the surcharge computation		total number of DSEs for	total number of DSEs for							
computation		· ·	, · · · · · · · · · · · · · · · · · · ·							
SYNDICATED EXCLUSIVITY SURCHARGE Third Group\$ SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown										
SURCHARGE Third Group										
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown		SURCHARGE	SURCHARGE							
SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)		Third Group	Fourth Group							
		SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)								