**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

# SA3E Long Form

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	AC	COUNTING PERIOD COVERED	BY THIS STATEMENT:				
Accounting Period		2024/2					
<b>B</b> Owner	rate	tructions: Give the full legal name of the owner of th e title of the subsidiary, not that of the paren List any other name or names under which If there were different owners during the a ingle statement of account and royalty fee p Check here if this is the system's first fil	t corporation. In the owner conducts the busines ccounting period, only the owner ayment covering the entire accou-	s of the cable syste on the last day of th inting period.	m. <i>e accounting period should su</i>		020510
	LE	EGAL NAME OF OWNER/MAILING ADDR					
						02051	020242
						020510	2024/2
		3027 S SE LOOP 323 TYLER, TX 75701					
С		STRUCTIONS: In line 1, give any busir mes already appear in space B. In line					
System	1	IDENTIFICATION OF CABLE SYSTEM:					
		MAILING ADDRESS OF CABLE SYSTEM:					
	2	(Number, street, rural route, apartment, or suite numt	er)				
		(City, town, state, zip code)					
D	Ins	tructions: For complete space D instructions	uctions, see page 1b. Identify	only the frst comr	nunity served below and rel	list on pag	e 1b
Area Served	wit	h all communities.					
				STATE			
First Community	_	SAN ANGELO		TX			
,	E	elow is a sample for reporting commun CITY OR TOWN (SAMPLE)	nities if you report multiple cha	Innel line-ups in S STATE	pace G. CH LINE UP	eur	3 GRP#
	Ald			MD	A	301	1
Sample	-	ance		MD	В		2
	Ge	ring		MD	В		3
Privacy Act Notice	a. Sec	tion 111 of title 17 of the United States Code auth	prizes the Convright Office to collect th	e personally identifyin	n information (PII) requested on thi	s	
•		your statement of account. Pll is any personal info			• ( ) (		
		I, you are agreeing to the routine use of it to establish for the public. The effect of not providing the PII re	•		•	n	

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AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

2-28-25

FORM SA3E. PAGE 1b.				1
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	
CEQUEL COMMUNICATIONS LLC			020510	
Instructions: List each separate community served by the cable system. A "communi in FCC rules: "a separate and distinct community or municipal entity (including unincor areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The f of system identification hereafter known as the "first community." Please use it as the f	porated communiti	es within unincorpo you list will serve a	orated	D Area Served
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile hotels below the identified city or town.	-	-	theses	
If all communities receive the same complement of television broadcast stations (i.e., all communities with the channel line-up "A" in the appropriate column below or leave on a partially distant or partially permitted basis in the DSE Schedule, associate each designated by a number (based on your reporting from Part 9).	the column blank. I	f you report any sta	ations	
When reporting the carriage of television broadcast stations on a community-by-comm channel line-up designated by an alpha-letter(s) (based on your Space G reporting) ar (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	nd a subscriber grou			
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	
SAN ANGELO	ТХ			First
GOODFELLOW AFB	ТХ			Community
				See instructions for
				additional information on alphabetization.
				Add rows as necessary.
		1		

	I										M SA3E. PAGE 2
Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:								S	YSTEM ID#
inallie	CEQUEL COMMUNICAT	IONS LLC									020510
-	SECONDARY TRANSMISSION	SERVICE: SL	BSCR	IBERS		ATES					
E	In General: The information in s	pace E should	cover	all cate	egories o	f second	,				
	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information										
Secondary Transmission	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the										
Service: Sub-	last day of the accounting period (June 30 or December 31, as the case may be). <b>Number of Subscribers:</b> Both blocks in space E call for the number of subscribers to the cable system, broken										
scribers and	down by categories of secondary	•							•		
Rates	each category by counting the n	umber of billing	gs in tha	at cate	gory (the	e number	of persons	or org	anizations		
	separately for the particular serv										
	Rate: Give the standard rate of unit in which it is generally billed										
	category, but do not include disc						alu late va	lation	5 wiu iir a		
	Block 1: In the left-hand block						econdary tra	ansmis	sion servi	ce that cable	
	systems most commonly provide										
	that applies to your system. Not										
	categories, that person or entity subscriber who pays extra for ca										
	first set" and would be counted of							unt ul			
	Block 2: If your cable system	has rate categ	ories fo	r seco	ndary tra	insmissio	n service th				
	printed in block 1 (for example, t										
	with the number of subscribers a	and rates, in th	e right-l	hand b	lock. A t	wo- or th	ree-word de	escript	ion of the s	service is	
	sufficient.	OCK 1				T			BLOC	к 2	
		NO. OF	:			1			BLUC	NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		R/	ATE	CA	TEGORY C	F SEF	RVICE	SUBSCRIBERS	RATE
	Residential:										
	<ul> <li>Service to first set</li> </ul>		9,567	\$	50.00						
	<ul> <li>Service to additional set(s)</li> </ul>										
	<ul> <li>FM radio (if separate rate)</li> </ul>										
	Motel, hotel										
	Commercial		586	\$	45.95						
	Converter										
	Residential										
	Non-residential										
_	SERVICES OTHER THAN SEC In General: Space F calls for rai						all your cat	ole svs	tem's serv	vices that were	
F	not covered in space E, that is, t	•	,			•	•				
	service for a single fee. There a							•	•		
Services	furnished at cost or (2) services										
Other Than	amount of the charge and the ur		usually	y billed	. If any r	ates are o	charged on	a vari	able per-p	rogram basis,	
Secondary Transmissions:	enter only the letters "PP" in the <b>Block 1:</b> Give the standard rate		he cab	le svste	em for e	ach of the	e applicable	servi	ces listed		
Rates	Block 2: List any services that									were not	
	listed in block 1 and for which a					ished. Lis	st these oth	er ser	vices in the	e form of a	
	brief (two- or three-word) description and include the rate for each.										
		BLO	CK 1							BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATE	GORY	OF SER	VICE	RAT	E	CATEGO	DRY OF SERVICE	RATE
	Continuing Services:		Install	ation:	Non-res	sidential					
	• Pay cable	\$ 17.00	• Mc	otel, ho	tel						
	<ul> <li>Pay cable—add'l channel</li> </ul>	\$ 19.00	_	ommero							
	Fire protection			y cable							
	•Burglar protection				e-add'l cl	hannel					
	Installation: Residential			e prote							
	• First set	\$ 99.00			rotectior	ı					
	Additional set(s)	\$ 25.00	Other								
	• FM radio (if separate rate)			econne			\$ 40	0.00			
	• Converter			sconne							
					ocation			5.00			
			• Mc	ove to r	new add	ress	\$ 99	9.00			
			1								

	NER OF CABLE SY	STEM:			SYSTEM ID#	Namo
CEQUEL COM	MUNICATION	NS LLC			020510	
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
carried by your cable s	system during th	e accounting	period, except (	1) stations carried	and low power television stations) only on a part-time basis under in network programs [sections	G
					nd (2) certain stations carried on a	Primary
substitute program bas				carried by your ca	ble system on a substitute program	Transmitters: Television
basis under specifc FC				carried by your ca	and system of a substitute program	relevision
			it in space I (the	Special Stateme	nt and Program Log)—if the	
station was carried List the station here,			ion was carried	both on a substitu	ite basis and also on some other	
basis. For further in	formation conce				the general instructions located	
in the paper SA3 fo Column 1: List eac		sign. Do not re	eport origination	program services	such as HBO, ESPN, etc. Identify	
cast stream as "WETA			•	•	on. For example, report multi- stream separately; for example	
NETA-simulcast). Column 2: Give the	e channel numh	er the FCC h	as assigned to th	ne television static	on for broadcasting over-the-air in	
ts community of licens	se. For example	, WRC is Cha			may be different from the channel	
on which your cable sy Column 3: Indicate			ation is a networ	k station an inde	pendent station, or a noncommercial	
					st), "I" (for independent), "I-M"	
for independent multion For the meaning of the					mmercial educational multicast).	
					e paper SA3 form. s". If not, enter "No". For an ex-	
blanation of local servi						
				•	tating the basis on which your ering "LAC" if your cable system	
carried the distant stat	ion on a part-tin	ne basis beca	use of lack of ac	tivated channel c	apacity.	
					payment because it is the subject tem or an association representing	
the cable system and a	a primary transr	nitter or an as	sociation repres	enting the primary	r transmitter, enter the designa-	
					er basis, enter "O." For a further I in the paper SA3 form.	
					to which the station is licensed by the	
FCC. For Mexican or 0	Canadian statior	ns, if any, give	the name of the	e community with	which the station is identifed.	
FCC. For Mexican or 0	Canadian statior	ns, if any, give nel line-ups, u	the name of the use a separate s	e community with pace G for each c	which the station is identifed.	_
	Canadian statior	ns, if any, give nel line-ups, u	the name of the	e community with pace G for each c	which the station is identifed.	-
FCC. For Mexican or ( Note: If you are utilizin	Canadian station ng multiple chan 2. B'CAST	ns, if any, give inel line-ups, u CHANN 3. TYPE	the name of the use a separate s <b>EL LINE-UP</b> 4. DISTANT?	e community with pace G for each c AA 5. BASIS OF	which the station is identifed.	-
ECC. For Mexican or C Note: If you are utilizin	Canadian station ng multiple chan 2. B'CAST CHANNEL	ns, if any, give nel line-ups, u CHANN 3. TYPE OF	the name of the use a separate s EL LINE-UP	e community with pace G for each o AA 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up.	-
FCC. For Mexican or ( <b>Note:</b> If you are utilizin 1. CALL SIGN	Canadian station ng multiple chan 2. B'CAST CHANNEL NUMBER	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION	the name of the use a separate s <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	e community with pace G for each c AA 5. BASIS OF	which the station is identifed. channel line-up. 6. LOCATION OF STATION	
FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KANG-2	2. B'CAST CHANNEL NUMBER 41.2	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I	the name of the use a separate s EL LINE-UP 4. DISTANT? (Yes or No) No	e community with pace G for each c AA 5. BASIS OF CARRIAGE (If Distant)	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX	
FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KANG-2 KERA-1	2. B'CAST CHANNEL NUMBER 41.2 13	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I E	the name of the ise a separate s EL LINE-UP 4. DISTANT? (Yes or No) No Yes	e community with pace G for each o AA 5. BASIS OF CARRIAGE	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX DALLAS, TX	. See instructions for
FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KANG-2 KERA-1 KERA-3	2. B'CAST CHANNEL NUMBER 41.2 13 13.3	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I E E-M	the name of the ise a separate s <b>EL LINE-UP</b> 4. DISTANT? (Yes or No) <b>No</b> Yes Yes	e community with pace G for each c AA 5. BASIS OF CARRIAGE (If Distant) 0 0	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX DALLAS, TX DALLAS, TX	
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FCC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KANG-2 KERA-1 KERA-3 KERA-4 KERA-HD1	2. B'CAST CHANNEL NUMBER 41.2 13 13.3 13.4 13.4	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I E E-M E-M E-M	the name of the ise a separate s EL LINE-UP 4. DISTANT? (Yes or No) No Yes Yes Yes Yes	e community with pace G for each c AA 5. BASIS OF CARRIAGE (If Distant) 0 0	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX	additional information
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FCC. For Mexican or O Note: If you are utilizin 1. CALL SIGN KANG-2 KERA-1 KERA-1 KERA-3 KERA-4 KERA-4 KERA-4 KERA-HD1 KIDY-1 KIDY-1 KIDY-2 KIDY-3 KIDY-HD1 KIDY-HD2 KLST-1 KLST-2 KLST-3 KLST-HD1	Canadian station ng multiple chan 2. B'CAST CHANNEL NUMBER 41.2 13 13.3 13.4 13 41 6 6.2 6.3 6 6.2 8 8.2 8.3 8	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I E-M E-M E-M I I I-M I-M I-M I-M I-M I-M I-M N N-M	the name of the ise a separate s EL LINE-UP 4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No	e community with pace G for each o AA 5. BASIS OF CARRIAGE (If Distant) 0 0 0	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX SAN ANGELO, TX	additional information
CC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KANG-2 KERA-1 KERA-3 KERA-4 KERA-4 KERA-4 KERA-HD1 KEUS-1 KIDY-1 KIDY-2 KIDY-3 KIDY-3 KIDY-HD1 KIDY-HD2 KLST-1 KLST-2 KLST-3 KLST-HD1 KSAN-1	Canadian station           ng multiple chan           2. B'CAST           CHANNEL           NUMBER           41.2           13           13.3           13.4           13           41.2           6           6.2           6.3           6           6.2           8           8.2           8.3           3	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I E-M E-M E-M I I I-M I-M I-M I-M I-M N I-M N N N N	the name of the ise a separate s EL LINE-UP 4. DISTANT? (Yes or No) Yes Yes Yes Yes No No No No No No No No No No	e community with pace G for each o AA 5. BASIS OF CARRIAGE (If Distant) 0 0 0	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX SAN ANGELO, TX	additional information
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CC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KANG-2 KERA-1 KERA-3 KERA-4 KERA-4 KERA-HD1 KEUS-1 KIDY-1 KIDY-1 KIDY-2 KIDY-3 KIDY-3 KIDY-3 KIDY-HD2 KLST-1 KLST-2 KLST-3 KLST-4 KLST-3 KLST-4 KLST	Canadian station           ng multiple chan           2. B'CAST           CHANNEL           NUMBER           41.2           13           13.3           13.4           13           41           6           6.2           6.3           6           6.2           8.3           3.3           3.2           3.3           38	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I E-M E-M E-M E-M I I I-M I-M I-M I-M I-M I-M N-M N N-M N N N N N N N N	the name of the ise a separate s EL LINE-UP 4. DISTANT? (Yes or No) No Yes Yes Yes No No No No No No No No No No	e community with pace G for each o AA 5. BASIS OF CARRIAGE (If Distant) 0 0 0	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX SAN ANGELO, TX	additional information
CC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KANG-2 KERA-1 KERA-3 KERA-4 KERA-4 KERA-HD1 KEUS-1 KIDY-1 KIDY-1 KIDY-2 KIDY-3 KIDY-3 KIDY-3 KIDY-HD2 KLST-1 KLST-2 KLST-3 KLST-4 KLST-3 KLST-4 KLST	Canadian station           ng multiple chan           2. B'CAST           CHANNEL           NUMBER           41.2           13           13.3           13.4           13           41.2           6           6.2           6.3           6           6.2           8.3           8.2           8.3           3.3           3.3	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I E-M E-M E-M I I-M I-M I-M I-M I-M I-M I-M I-M I-M	the name of the ise a separate s EL LINE-UP 4. DISTANT? (Yes or No) Yes Yes Yes Yes Yes No No No No No No No No No No	e community with pace G for each o AA 5. BASIS OF CARRIAGE (If Distant) 0 0 0	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX SAN ANGELO, TX	additional information
CC. For Mexican or C Note: If you are utilizin 1. CALL SIGN KANG-2 KERA-1 KERA-3 KERA-4 KERA-4 KERA-HD1 KEUS-1 KIDY-1 KIDY-1 KIDY-2 KIDY-3 KIDY-3 KIDY-HD1 KIDY-HD1 KIDY-HD2 KLST-1 KLST-2 KLST-3 KLST-3 KLST-1 KSAN-1 KSAN-2	Canadian station           ng multiple chan           2. B'CAST           CHANNEL           NUMBER           41.2           13           13.3           13.4           13           41           6           6.2           6.3           6           6.2           8.3           3.3           3.2           3.3           38	ns, if any, give nel line-ups, u CHANN 3. TYPE OF STATION I E-M E-M E-M E-M I I I-M I-M I-M I-M I-M I-M N-M N N-M N N N N N N N N	the name of the ise a separate s EL LINE-UP 4. DISTANT? (Yes or No) No Yes Yes Yes No No No No No No No No No No	e community with pace G for each o AA 5. BASIS OF CARRIAGE (If Distant) 0 0 0	which the station is identifed. channel line-up. 6. LOCATION OF STATION SAN ANGELO, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX SAN ANGELO, TX	additional information

ACCOUNTING PER	100. 2024/2							FORM SA3E. PAGE 4.
Name	LEGAL NAME OF C							SYSTEM ID# 020510
H Primary Transmitters: Radio	all-band basis v Special Instruct receivable if (1) on the basis of For detailed info located in the p Column 1: lo	t every radio s whose signals ctions Concer it is carried by monitoring, to ormation abou aper SA3 form dentify the call	tation ca were "ge ming All v the syst be receir t the the n. sign of e	rried on a separate and discre nerally receivable" by your cat <b>-Band FM Carriage:</b> Under Co tem whenever it is received at ved at the headend, with the s Copyright Office regulations o each station carried. n is AM or FM.	ole system during opyright Office re the system's hea ystem's FM ante	g the accountin egulations, an adend, and (2) nna, during ce	ng perio FM sign ) it can b ertain sta	d. al is generally e expected, ated intervals.
	signal, indicate Column 4: G	this by placing Give the statior	i a check i's locatio	al was electronically processes mark in the "S/D" column. on (the community to which the he community with which the	e station is licens	ed by the FCC		
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION

CEQUEL COMMUNICA	LIUNS LL	_6				020510	Nam
SUBSTITUTE CARRIAGE	: SPECIA	L STATEME	NT AND PROGRAM L	)G			
In General: In space I, identi substitute basis during the ac explanation of the programm	counting pe	riod, under spe	cific present and former l	CC rules, regul	ations, or authorizatio	ons. For a further	Substi
1. SPECIAL STATEMENT				-			Carria
<ul> <li>During the accounting per broadcast by a distant stat</li> </ul>		ır cable system	n carry, on a substitute b	asis, any nonne		ogram Z <b>es X No</b>	Speci Statemer Program
Note: If your answer is "No"	', leave the	rest of this pag	ge blank. If your answer	s "Yes," you m	ust complete the pro	ogram	_
log in block 2. 2. LOG OF SUBSTITUTE		MS					
In General: List each subst	itute progra	am on a separa		s wherever pos	ssible, if their meani	ing is	
clear. If you need more spa				program) that	during the account	ting	
<b>Column 1:</b> Give the title period, was broadcast by a							
under certain FCC rules, re							
SA3 form for futher informa titles, for example, "I Love L				or "basketball"	. List specific progra	am	
Column 2: If the program	n was broad	dcast live, ente	r "Yes." Otherwise enter				
Column 3: Give the call Column 4: Give the broa					ansed by the FCC or	r in	
the case of Mexican or Can	adian static	ons, if any, the	community with which th	e station is ider	ntified).		
Column 5: Give the mon	th and day					e month	
first. Example: for May 7 giv Column 6: State the time		substitute pro	oram was carried by you	r cable system	List the times accu	urately	
to the nearest five minutes.							
stated as "6:00-6:30 p.m."	"D" :		1 11 1 1 1				
Column 7: Enter the lette to delete under FCC rules a							
gram was substituted for pr							
effect on October 19, 1976.	-	-			-		
				WH	EN SUBSTITUTE		
S	UBSTITUT	E PROGRAM	1		RIAGE OCCURRE	D 7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH		DELETION	
	Yes or No	CALL SIGN	4. STATION'S LOCATIO	AND DAY	FROM —	то	
					_		
					_		
		·					
					- <u> </u>		
					_		
					_		

FORM SA3E. PAGE 5.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

	LEGAL NAME OF C	OWNER OF CABLE	SYSTEM:						SYS	TEM ID#
Name	CEQUEL CO	MMUNICAT	ONS LLC							020510
J Part-Time Carriage Log	<ul> <li>PART-TIME CARRIAGE LOG</li> <li>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-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.</li> <li>Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.</li> <li>Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.</li> <li>Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."</li> <li>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."</li> <li>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."</li> </ul>									
			DATE	S AND HOURS	OF F	PART-TIME CAR	RIAGE			
	CALL SIGN	WHEN	I CARRIAGE OCC			CALL SIGN	WHEN	CARRIAGE O		D
	0/122 01011	DATE	HOL FROM	JRS TO		0.122 0.011	DATE	H FROM	OURS	то
		DATE	FROM	10			DATE	FROM		10
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FORM	SA3E. PAGE 7.		1
	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
CE	QUEL COMMUNICATIONS LLC	020510	
Inst all a (as i page	OSS RECEIPTS ructions: The figure you give in this space determines the form you fle and the amount mounts (gross receipts) paid to your cable system by subscribers for the system's second identifed in space E) during the accounting period. For a further explanation of how to ca e (vii) of the general instructions. 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.	ndary transmission service	<b>K</b> Gross Receipts
Instru • Con • Con • If yo fee • If yo acco	<b>(RIGHT ROYALTY FEE</b> ctions: Use the blocks in this space L to determine the royalty fee you owe: nplete block 1, showing your minimum fee. nplete block 2, showing whether your system carried any distant television stations. nur system did not carry any distant television stations, leave block 3 blank. Enter the an from block 1 on line 1 of block 4, and calculate the total royalty fee. nur system did carry any distant television stations, you must complete the applicable pa pompanying this form and attach the schedule to your statement of account.	arts of the DSE Schedule	L Copyright Royalty Fee
bloc	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be k 3 below.		
3 be	In t 6 of the DSE schedule was completed, the amount from line 7 of block C should be e elow.		
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount shou block 4 below.	uld 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.		
	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.	\$ 2,921,439.79	
	This is your minimum fee.	\$ 31,084.12	
	<ul> <li>DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colum "Yes" in this block.</li> <li>Did your cable system carry any distant television stations during the accounting period year. No—Leave block 3 below blank and complete the DSE schedule.</li> </ul>	nn 4, you must check od?	
Block	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	\$ 23,313.09	
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	\$ 23,313.09	
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	\$ 31,084.12	Cable systems
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: 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 zero.	0.00	submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing
	Line 4. FILING FEE	\$ 725.00	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	\$ 31,809.12	appropriate form for submitting the additional fees.
	EFT Trace # or TRANSACTION ID #		auditional lees.
	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		

Name         CEQUEL COMMUNICATIONS LLC         020           M         CHANNELS         Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations         1015 addoctions and (2) the cable system is both number of activated channels, during the accounting period.         23           1. Enter the total number of catavalact dualities.         23           2. Enter the total number of catavalact dualities.         543           N         Channels         543           N         Individual to BE Contracted television broadcast stations         543           BC contracted         Instructions: You must give (1) FURTHER INFORMATION IS NEEDED: (Sentity an Individual to BE Contracted television broadcast stations         543           Nume         RODINEY HASKINS         Telephone (903) 579-3152.           Address: 3027 S SE LOOP 323         Telephone (903) 579-3152.           Protein the cable system carried television broadcast stations         543           BC contacted         First 778 7701           Lide to other carried television broadcast stations         543           Contracted         Email         RODNEY HASKINS(@ALTICEUSA.COM         Fax (optional)           Proteor other than corporation or partnership) 1 am the owner of the cable system as identified in line 1 of space 8; or         1           Cofficator         I. the undersigned, heeely out	ACCOUNTING PERIO	DD: 2024/2	FORM SA3E. PAGE 8.
Ceture:     Construction       M     Channels       Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subcentions and (2) the cable system is load number of activated channels, during the accounting poind.       1. Enter the total number of activated channels on which the cable system carried television broadcast stations	Name		SYSTEM ID#
M       Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subcribers and (2) the cable system is 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			020510
1       Einer the total number of activated stations		Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s	tations
and works the cable system carried television broadcast stations	Channels		23
Individual to Be Contacted for Further information       Name       RODNEY HASKINS       Telephone (903) 579-3152         Address       3027 S SE LOOP 323 (Manter, stret, not ools, quetter, to sude number)		on which the cable system carried television broadcast stations	543
for Further Information       Name       RODNEY HASKINS       Telephone (903) 579-3152         Address       3027 S SE LOOP 323 (Runner, stater, Cual rode, equivalent), is subtenumber)       Trues, TX 75701 (Runner, stater, Cual rode, equivalent)         TULER, TX 75701 (Runner, stater, Cual rode, equivalent)       Trues, TX 75701 (Runner, stater, Cual rode, equivalent)       Fax (optional)         Constrained       RODNEY.HASKINS@ALTICEUSA.COM       Fax (optional)         O       • 1. the undersigned, hereby certify that (Check one, but only one, of the boxes.)       • 1. the undersigned, hereby certify that (Check one, but only one, of the boxes.)         • 0       • 1. the undersigned, hereby certify that (Check one, but only one, of the boxes.)       • 1. the undersigned, hereby certify that (Check one, but only one or pathership) I am the duly authorized agent of the conser of the cable system as identified in line 1 of space B and that the owner is not a corporation or pathership) of the legal entity identified as owner of the cable system in line 1 of space B.         • 1 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 belef, and are made in good faith. (18 U.S.C., Section 1001(1989))         Effer an electronic signature on the line above using an 'ls/" signature to certify this statement. (eg., 's/ Alan Dannenbaum       True is pace to the best of my knowledge, information, and belef, and are made in good faith. (18 ed official position head in corporation or patherenhip)         • Typed or pr			
[Wurder, street, uzar Toude, spattment, or subte number]         TYLER, X7 5701         [CRUE]         Email       RODNEY.HASKINS@ALTICEUSA.COM         Fax (optional)	for Further	Name RODNEY HASKINS Telephone	(903) 579-3152
TYLER, TX 75701         (City, town, state, rap)         Email       RODNEY.HASKINS@ALTICEUSA.COM       Fax (optional)         O         O       certification       • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)         O       • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)         O       • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)         O       • Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or         O (Differ or partner) and notifier (if a corporation) or a partnership) or 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 faw that all statements of fact contained herein are true, complex, and corect to the best of my knowledge, information, and belief, and are made in good faith.         (18 U.S.C., Section 1001(1980))       Ender entring the far forward signature to entify this statement. for own and press the "F2" button the legislent billing back of the legislent the legislent billing back or under on the box and press the "F2" button will avoid enabling Excels Lotus compatibility settings.         Typed or printed name:       ALAN DANNENBAUM         Titte:       SVP, PROGRAMMING         (Title of official position held in corporation or partnership)		Address 3027 S SE LOOP 323	
O       CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations.)         • I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)       • (Generation of 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) of the legal entity identifed as owner of the cable system in line 1 of space B.         • (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) of the legal entity identifed as owner of the cable system in line 1 of space B.         • (Agent of owner other than corporation or partnership) I am the duly authorized agent of the cable system as identified 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)]       Is/ Alan Dannenbaum         Enter an electronic signature on the line above using an "/w" signature to certify this statement.         (e.g., i// John Smith). Before entering the first forward slash of the l/v signature, place your cursor in the box and press the "F2" button, then type l/s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.     <		TYLER, TX 75701	
O         Certification       • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)		Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional)	
<ul> <li>Gowner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or</li> <li>(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</li> <li>(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.</li> <li>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)]</li> <li>M</li></ul>	ο	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regula	ations.)
<ul> <li>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</li> <li>(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.</li> <li>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)]</li> <li>I s. C., Section 1001(1986)]</li> <li>Inter 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 Excet's Lotus compatibility settings.</li> <li>Typed or printed name: ALAN DANNENBAUM</li> <li>Titte: SVP, PROGRAMMINE</li> <li>(Title of official position held in corporation or partnership)</li> </ul>	Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
<ul> <li>in line 1 of space B and that the owner is not a corporation or partnership; or</li> <li>(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.</li> <li>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)]</li> <li>I we want 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)]</li> <li>I we want 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)]</li> <li>I we want 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)]</li> <li>I we want the statement of account and hereby declare under penalty of law that all statements. [20, [30, [30, [30, [30, [30, [30, [30, [3</li></ul>		(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B	3; or
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)]			system as identified
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)]			er of the cable system
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)		are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	d herein
(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)		X /s/ Alan Dannenbaum	
Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership)		(e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in	
(Title of official position held in corporation or partnership)		Typed or printed name: ALAN DANNENBAUM	
Date: February 28, 2025			
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this		Date: February 28, 2025	

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.

FORM	SA3E.	PAGE9.
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 020510	Name
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIP The Satellite Home Viewer Act of 1988 amended Title 17, section 111 lowing sentence:         <ul> <li>"In determining the total number of subscribers and the gross a             service of providing secondary transmissions of primary broad             scribers and amounts collected from subscribers receiving sec</li> </ul> </li> <li>For more information on when to exclude these amounts, see the note         paper SA3 form.         <ul> <li>During the accounting period did the cable system exclude any amount             made by satellite carriers to satellite dish owners?</li> <li>X NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below</li> </ul> </li> </ul>	(d)(1)(A), of the Copyright Act by adding the fol- amounts paid to the cable system for the basic cast transmitters, the system shall not include sub- condary transmissions pursuant to section 119." e on page (vii) of the general instructions in the ints of gross receipts for secondary transmissions	P Special Statement Concerning Gross Receipts Exclusion
	ame	
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitte For an explanation of interest assessment, see page (viii) of the gene		Q
Line 1 Enter the amount of late payment or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here $\dots$		
Line 3 Multiply line 2 by the number of days late and enter the sum h	ere	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	<b></b> (interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensi contact the Licensing Division at (202) 707-8150 or licensing@c	ing/interest-rate.pdf. For further assistance please	
** This is the decimal equivalent of 1/365, which is the interest ass	essment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account please list below the owner, address, first community served, account filing.		
Owner		
Address		
First community served		
Accounting period		

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

#### INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical value given by the Copyright Act to each distant television station carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions in the paper SA3 form.

#### FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

#### BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3E (LONG FORM)

**Step 1**: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of account (page 3), a distant station is:

Independent: its type-value is	1.00
• Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs.	

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

**Step 3:** Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

# SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3E (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particular station's DSE for the accounting period.

#### TOTAL OF DSEs

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

#### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee and the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment.

The 3.75 Fee. If a cable system located in whole or in part within a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

tems fling SA3E (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable.

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following: 1) A station actually carried within any portion of a cable system prior

to June 25, 1981, pursuant to the former FCC rules. 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.

3) A station of the same type substituted for a carried network, noncommercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.

4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.

5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station that it was authorized to carry or was lawfully carrying prior to March 31, 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate, but is subject to the Base Rate, and where applicable, the Syndicated Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

# COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or part-time basis only and complete the log to determine the portion of the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

#### COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE— PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100 major television market as defined by the FCC rules and regulations in effect on June 24, 1981. If no portion of the cable system is located in a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24, 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

# DSE SCHEDULE. PAGE 11.

#### COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distantthat 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.

· If none of the stations were partially distant, calculate your base rate fee according to the following rates-for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSF 1.064% of gross receipts

Each of the second, third, and fourth DSEs 0.701% of gross receipts The fifth and each additional DSE

0.330% of gross receipts

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.

5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) 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

	Distant Stations Carried		Identification	of Subscriber (	Groups		
cases under current FCC	STATION	DSE	CITY	OUTSIDE LO	DCAL	GROS	SS RECEIPTS
of Fairvale would be within	A (independent)	1.0		SERVICE AF	REA OF	FROM S	UBSCRIBERS
service area of both stations	B (independent)	1.0	Santa Rosa	Stations A, B	, C, D ,E		\$310,000.00
and all of Rapid City and Bo-	C (part-time)	0.083	Rapid City	Stations A ar	nd C		100,000.00
ay would be within the local	D (part-time)	0.139	Bodega Bay	Stations A ar	nd C		70,000.00
areas of stations B, D, and E.	E (network)	0.25	Fairvale	Stations B, D	, and E		120,000.00
	TOTAL DSEs	2.472		TOTAL GRO	SS RECEIPTS		\$600,000.00
sa Stations A and C 35 mile zone	Minimum Fee Total Gross	Receipts		\$600,000.00 x .01064 \$6.384.00			
	First Subscriber Group		Second Subso	1-)		Third Subscriber Group	
· ·	(Santa Rosa)		(Rapid City and	l Bodega Bay)		(Fairvale)	
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 .010	64 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
Dadaaa					00.04	¢400,000 ·· 00704 ·· 000 -	207.00
Bodega Bay	\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .007	01 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23

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)

In most cas rules, all of the local ser A and C and dega Bay w service area

Santa Rosa

Rapid City

and E

35 mile zone

# DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID										
	CEQUEL COMMUNICAT	IONS LLC				020510					
	SUM OF DSEs OF CATEGORY "O" STATIONS:         • Add the DSEs of each station.         Enter the sum here and in line 1 of part 5 of this schedule.         0.75										
2	Instructions:										
Computation of DSEs for	In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncommercial educational station, give the DSE as ".25."										
Category "O"			CATEGORY "O" STATION	S: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	KERA-1	0.250									
	KERA-3	0.250									
	KERA-4	0.250									
Add rows as											
necessary.											
Remember to copy all											
formula into new											
rows.											

Name		OWNER OF CABLE SYSTEM:	c					OULE: PAGE 12 SYSTEM ID# 020510
<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 2 be carried ou Column 2 give the type- Column 2	<b>CAPACITY</b> st the call sign of all distar <b>2:</b> For each station, give th correspond with the inform <b>3:</b> For each station, give th <b>4:</b> Divide the figure in colu t at least to the third decim <b>5:</b> For each independent s value as ".25." <b>5:</b> Multiply the figure in col point. This is the station's	ne number of hou nation given in sp ne total number o mn 2 by the figur nal point. This is t tation, give the "t umn 4 by the figu	rs your cable system pace J. Calculate only f hours that the station e in column 3, and gi he "basis of carriage ype-value" as "1.0." I ure in column 5, and g	a carried the static y one DSE for eac on broadcast over ve the result in de value" for the sta For each network give the result in o	n during the accounting ch station. the air during the account ecimals in column 4. Thi tion. or noncommercial educ column 6. Round to no le	unting period. s figure must rational station, ess than the	
Capacity			CATEGORY	LAC STATIONS	COMPUTAT	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOL CARRIE SYSTE	JRS D BY	B. NUMBER OF HOURS STATION ON AIR	4. BASIS OI CARRIAC VALUE			SE
			÷			x	=	
			* *		=	x x	=	
			÷		=	x	=	
			÷		-	x	=	
			+ +		=	x x	=	
			÷		=	x	=	
<b>4</b> Computation of DSEs for Substitute- Basis Stations	Was carried tions in eff Broadcast of space I). Column 2: at your option. Column 3: Column 4:	ve the call sign of each sta d by your system in substit eact on October 19, 1976 (a one or more live, nonnetwo For each station give the This figure should corres Enter the number of days Divide the figure in column This is the station's DSE (	tution for a progra as shown by the l rrk programs durin number of live, n pond with the info in the calendar y n 2 by the figure For more informa	am that your system etter "P" in column 7 ng that optional carrie connetwork programs ormation in space I. ear: 365, except in a in column 3, and give tition on rounding, se	was permitted to o of space I); and ge (as shown by the carried in substitu- leap year. the result in colu- e page (viii) of the	delete under FCC rules the word "Yes" in column ution for programs that w umn 4. Round to no less general instructions in	2 of were deleted than the third	
						ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR		1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
			•	=			÷	=
							÷	
		-	•	=			÷	=
			•				+	=
	Add the DSEs	S OF SUBSTITUTE-BASIS of each station. um here and in line 3 of pa	S STATIONS:	ule,		0.0	00	
5		ER OF DSEs: Give the am sapplicable to your system		xes in parts 2, 3, and	4 of this schedule	and add them to provide	e the total	
Total Number	1. Number	of DSEs from part 2●				<u>ا</u>	0.75	
of DSEs	2. Number	of DSEs from part 3●				<u> ا</u>	0.00	
	3. Number	of DSEs from part 4 ●				<u>►</u>	0.00	
	TOTAL NUMB	ER OF DSEs					_ <b>&gt;</b>	0.75

								Accountin	IG PERIOD: 2024
	WNER OF CABLE S						S	YSTEM ID#	Name
EQUEL COM	IMUNICATIONS	S LLC						020510	Name
	ck A must be comp	leted.							
n block A: If your answer if '	"Yes," leave the re	mainder of pa	rt 6 and part 7	of the DSE schedu	ule blank and	complete part 8	3, (page 16) of the		6
chedule.	"No," complete blo	oka B and C k					,		_
li your ariswer ii	No, complete blo			TELEVISION M	ARKETS				Computation of
the cable syster	n located wholly ou	itside of all m				ion 76.5 of FC	C rules and regula	tions in	3.75 Fee
effect on June 24,			-						
	plete part 8 of the		O NOT COMP	LETE THE REMAI	NDER OF PA	RT 6 AND 7.			
X No-Comp	plete blocks B and	C below.							
		BLO	CK B: CARF		MITTED DS	Es			
Column 1:	List the call signs	of distant sta	tions listed in	part 2, 3, and 4 of t	his schedule t	hat your syster	n was permitted to	carry under	
CALL SIGN				981. For further ex e letter M below ref				in the	
	Satellite Televisio					npi municasi s	lieani as set iorui		
Column 2:				is on which you ca					
BASIS OF PERMITTED				low pertain to those ket quota rules [76					
CARRIAGE	76.61(b)(c)]	·							
				6.59(d)(1), 76.61(e) (c), 76.61(d), 76.63			61(e)(1)		
	D Grandfathered	station (76.6	5) (see paragr	aph regarding subs			tions in the		
	instructions fo E Carried pursua	ant to individu	al waiver of FC						
			•	e or substitute basi ontour, [76.59(d)(5	•		ring to 76 61(e)(5)]		
	M Retransmissio		•		), 10.01(0)(0),	10.00(0)10101			
Column 3:				parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	of	
	this schedule to c	letermine the	DSE.)						
4.0411		0.005	1						
1. CALL	2. PERMITTED		4 0 4 1 1		0 005	4 0 4 1		0 005	
SIGN	BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
SIGN KERA-1	BASIS C	0.25			3. DSE			3. DSE	
SIGN KERA-1 KERA-3	BASIS C M	0.25 0.25			3. DSE			3. DSE	
SIGN KERA-1	BASIS C	0.25			3. DSE			3. DSE	
SIGN KERA-1 KERA-3	BASIS C M	0.25 0.25			3. DSE			3. DSE	
SIGN KERA-1 KERA-3	BASIS C M	0.25 0.25			3. DSE			3. DSE	
SIGN KERA-1 KERA-3	BASIS C M	0.25 0.25			3. DSE			3. DSE	
SIGN KERA-1 KERA-3	BASIS C M	0.25 0.25			3. DSE			3. DSE	
SIGN KERA-1 KERA-3	BASIS C M	0.25 0.25 0.25	SIGN	BASIS					
SIGN KERA-1 KERA-3	BASIS C M	0.25 0.25 0.25	SIGN						
SIGN KERA-1 KERA-3 KERA-4	BASIS C M	0.25 0.25 0.25		BASIS DMPUTATION OF					
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M	0.25 0.25 0.25 E	SIGN	BASIS DMPUTATION OF schedule				0.75	
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M	0.25 0.25 0.25 E	SIGN	BASIS DMPUTATION OF schedule				0.75	
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter line 2 from line 1	0.25 0.25 0.25 DSEs from p d DSEs from . This is the	SIGN BLOCK C: CC part 5 of this s block B abo total number	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN		0.75	
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter	0.25 0.25 0.25 DSEs from p d DSEs from . This is the	SIGN BLOCK C: CC part 5 of this s block B abo total number	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN		0.75	
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter line 2 from line 1	0.25 0.25 0.25 DSEs from p d DSEs from p d DSEs from p d DSEs from p	SIGN BLOCK C: CC part 5 of this s h block B abo total number ceed to part	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN		0.75	
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter line 2 from line 1 leave lines 4–7 b	0.25 0.25 0.25 DSEs from p d DSEs from p d DSEs from p d DSEs from p	SIGN BLOCK C: CC part 5 of this s h block B abo total number ceed to part	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN		0.75 0.75 0.75 0.00	DSEs represe
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter line 2 from line 1 leave lines 4–7 b oss receipts from	0.25 0.25 0.25 0.25 DSEs from p d DSEs from p d DSEs from this is the lank and pro space K (pa	SIGN SIGN BLOCK C: CC part 5 of this s h block B abo total number reced to part uge 7)	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN	BASIS	0.75 0.75 0.75 0.00	DSEs represen partially permited/
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter line 2 from line 1 leave lines 4–7 b	0.25 0.25 0.25 0.25 DSEs from p d DSEs from p d DSEs from this is the lank and pro space K (pa	SIGN SIGN BLOCK C: CC part 5 of this s h block B abo total number reced to part uge 7)	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN	BASIS	0.75 0.75 0.75 0.00	DSEs represen partially permited/ partially
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter line 2 from line 1 leave lines 4–7 b oss receipts from	0.25 0.25 0.25 0.25 DSEs from p d DSEs from p d DSEs from this is the lank and pro space K (pa	SIGN SIGN BLOCK C: CC part 5 of this s h block B abo total number reced to part uge 7)	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN	BASIS	0.75 0.75 0.75 0.00	DSEs represen partially permited/ partially nonpermitted carriage?
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter line 2 from line 1 leave lines 4–7 b oss receipts from	0.25 0.25 0.25 0.25 DSEs from p d DSEs from d DSEs from this is the lank and pro- space K (pa	SIGN SIGN BLOCK C: CC part 5 of this s a block B abo total number icceed to part ige 7) m here	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN	BASIS	0.75 0.75 0.75 0.00	permited/ partially nonpermitted carriage? If yes, see par
SIGN KERA-1 KERA-3 KERA-4	BASIS C M M e total number of e sum of permitter line 2 from line 1 leave lines 4–7 b oss receipts from ine 4 by 0.0375 a	0.25 0.25 0.25 0.25 DSEs from p d DSEs from d DSEs from this is the lank and pro- space K (pa	SIGN SIGN BLOCK C: CC part 5 of this s block B abo total number icceed to part ige 7) m here	BASIS DMPUTATION OF schedule ve of DSEs subject	= 3.75 FEE to the 3.75 r	SIGN	BASIS	0.75 0.75 0.75 0.75 0.00	DSEs represer partially permited/ partially nonpermitted carriage?

DSE SCHEDULE. PAGE	13. (CONTINUED)
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LEGAL NAME OF OWNER OF CABLE SYSTEM:SYSTEM ID#CEQUEL COMMUNICATIONS LLC020510									Name
BLOCK A: TELEVISION MARKETS (CONTINUED)									
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation 3.75 Fee
									0.70100
			•						
			•						
			•						
			•						
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			•••						
			•••••••••••••••••••••••••••••••••••••••						
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								D		EDULE. PAGE 14
Nomo	LEGAL NAME OF OWN	ER OF CABLE SY	STEM:						S	YSTEM ID#
Name	CEQUEL COM	UNICATION	S LLC							020510
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried prio Column 1: List the c Column 2: Indicate f Column 3: Indicate f Column 4: Indicate f (Note that the FC A—Part-time spe 7 B—Late-night pr 7 S—Substitute ca 9 Column 5: Indicate f Column 6: Compare in b	ar to June 25, 198 call sign for each the DSE for this s the accounting pe the basis of carria CC rules and regu- ecialty programm (6.59(d)(1),76.61( ogramming: Carri (6.61(e)(3)). arriage under cert jeneral instruction the station's DSE the DSE figures block B, column 3 information you g	1, under former distant station id tation for a singl riod and year in age on which the lations cited bel ng: Carriage, or e)(1), or 76.63 (r iage under FCC ain FCC rules, ra is in the paper S for the current a listed in column of part 6 for this ive in columns 2	FCC rules gove entifed by the le le accounting pe which the carria e station was car ow pertain to the a part-time bas referring to 76.6 rules, sections egulations, or au A3 form. accounting perio is 2 and 5 and lis station.	rnin tter erioc age rried ose sis, c 1(e) 76.5 utho d as st th	ifed by the letter "F" in g part-time and substii "F" in column 2 of part d, occurring between J and DSE occurred (e.g l by listing one of the fe in effect on June 24, 1 of specialty programmi ((1)). 90(d)(3), 76.61(e)(3), o rizations. For further e is computed in parts 2, is e smaller of the two fig accurate and is subject	tute carriage t 6 of the DS anuary 1, 19 g., 1981/1). ollowing lette 981.) ing under Fe rr 76.63 (refe xplanation, 3, and 4 of gures here.	e.) SE schedule. 978 and June 30 ers: CC rules, section erring to see page (vi) of this schedule. This figure shou	), 1981. ns the ıld be ei	
		DED!								
	4.0411				ED (	ON A PART-TIME AN	1		~ F	
	1. CALL	2. PRIOR		COUNTING		4. BASIS OF		RESENT	6. P	ERMITTED
	SIGN	DSE	Р	ERIOD		CARRIAGE		DSE		DSE
<b>7</b> Computation of the	Instructions: Block A In block A: If your answer is b	"Yes," complete t	locks B and C, I		art 8	8 of the DSE schedule				
		NO, IEAVE DIOCK								
Syndicated			BLOC	K A: MAJOR	IE	LEVISION MARKE	=			
Exclusivity										
Surcharge	<ul> <li>Is any portion of the c</li> </ul>	able system within	n a top 100 major	r television marke	et as	s defned by section 76.	5 of FCC rul	es in effect June	24, 198	81?
	Yes—Complete	blocks B and C .				X No—Proceed to	part 8			
	BLOCK B: C	arriage of VHF/G	rade B Contour	Stations		BLOCI	K C: Compl	itation of Exemp	ot DSEs	
	Is any station listed in commercial VHF station or in part, over the call	on that places a g			r	Was any station listed nity served by the cabl to former FCC rule 76.	e system pr	•		
		-					,			
		ation below with its		tted DSE		Yes—List each sta			permitte	d DSE
	X No—Enter zero a	nd proceed to part	8.			X No—Enter zero ar	nd proceed to	part 8.		
								1		
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIGN	Ν	DSE
		†   <mark></mark>		<b> </b>			1			
		<u></u> ŧH <mark></mark>		<b>.</b>						
		<u></u> ∤   <mark> </mark> -		<mark></mark>			·····			
		↓   <mark> </mark>		<mark></mark>						
		↓		<mark>.</mark>						
		<u>                                     </u>		<u> </u>						
		1	TOTAL DSEs	0.00				TOTAL DSE		0.00
	1			0.00						

LEGAL NA		EM ID#	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section		100 70	7
1 Section	Enter the amount of gross receipts from space K (page 7)	,439.79	1
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?     Yes—Complete part 9 of this schedule.     No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE 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.       X       No—Complete the applicable section below.		
τα	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 DSE 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)		
	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		ME OF OWNER OF CABLE SYSTEM:	DULE. PAGE 16. SYSTEM ID# 020510
			020510
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		B. Enter 0.00189 of gross receipts (the amount in section 1)	
Exclusivity 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.	
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 part checked "Yes," use the total number of DSEs from part 5.	
Computation		ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.	
of	• If you	ur answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below	,
Base Rate Fee	blank <b>What</b> i	c. is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers	
		ocated within that station's local service area and others were located outside that area. For the definition of a station's "local	
	Service	e area," see page (v) of the general instructions.	
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did y	rour cable system retransmit the signals of any partially distant television stations during the accounting period?	
	L	Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
	Section	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	1	Enter the amount of gross receipts from space K (page 7)	79
	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," use the total number of DSEs from part 5.)	.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)▶ <u>\$</u> 23,313.	09
		B. Enter 0.00701 of gross receipts	
		(the amount in section 1)	
		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	
		E. Add lines A, and D. This is your base rate fee. Enter here	
		and in block 3, line 1, space L (page 7)	23,313.09
		Base Rate Fee	<u></u>

# DSE SCHEDULE. PAGE 17.

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
CEQU	IEL COMMUNICATIONS LLC	020510	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	A. Enter 0.01064 of gross receipts (the amount in section 1) ►\$	_	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		Base Rate Fee
	D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$		
	E. Subtract 4.000 from total DSEs		
1	(the figure in section 2) and enter here		
l	F. Multiply line D by line E and enter here		
	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	0.00	
	<b>TANT:</b> It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G		9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee s from subscribers located within the station's local service area, from your system's total gross receipts. To take a		Computation of
exclusi	on, you must:		Base Rate Fee
station DSEs a	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	the number of	and Syndicated Exclusivity Surcharge for
also co	If any portion of your cable system is located within the top 100 television market and the station is not exempt in p mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
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 stat to that community.	ion you	for Partially Permitted Stations
Step 2 outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were loo the station's local service area. A subscriber located outside the local service area of a station is distant to that station to token, the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
Compu groups	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst	em's subscriber	
	section:		
• Give	fy 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 bers in the group.	of the	
• lf:			
4 of thi	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it ir s schedule; or, portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b		
part	6 of this schedule.	,	
	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
in the	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.		
page. DSEs f	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that or that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee calculations on the form.	at is, the total	

Name		STE
	CEQUEL COMMUNICATIONS LLC	020
	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.	

FORM SA3E. F	PAGE 19.
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LEGAL NAME OF OWNER						S	O20510	Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
	FIRST	SUBSCRIBER GROU			SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA		0	COMMUNITY/ AREA 0				Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN DSE CALL SIGN [			DSE	
						-		Base Rate Fee
								and
								Syndicated Exclusivity
								Surcharge
								for
								Partially
						-		Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	P	FOURTH SUBSCRIBER GROUP			JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
Total DSEs	<u> </u>		0.00	Total DSEs	. <u> </u>	<u> </u>	0.00	
Gross Receipts Third Group \$ 0.00			Gross Receipts Fourth	Group	\$	0.00		
	-							
Base Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth	Group	\$	0.00		
Deep Data Free Addition	. haar	<b></b>				<b></b>		
<b>Base Rate Fee:</b> Add the <b>base rate fees</b> for each subscriber group as sho Enter here and in block 3, line 1, space L (page 7)				S SHOWH IN THE DOXES ADO	ve.	\$	0.00	

FORM SA3E.	PAGE	19
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# Nonpermitted 3.75 Stations

LEGAL NAME OF OWNE						S	020510 OV	Name
E				ATE FEES FOR EAC				
FIRST SUBSCRIBER GROUP COMMUNITY/ AREA 0				COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	9
						Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First Gr	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	)UP		FOURTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
				<b>#</b>	-			
Gross Receipts Third G	noup	\$	0.00	Gross Receipts Four	ui Group	\$	0.00	
Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				<u>  </u>				
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes a	above.	\$	0.00	

News	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20. SYSTEM ID#						
Name	CEQUEL COMMUNICATIONS LLC	020510						
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	IVITY SURCHARGE FOR EACH SUBSCRIBER GROUP						
9	If your cable system is located within a top 100 television market and th Syndicated Exclusivity Surcharge. Indicate which major television mark by section 76.5 of FCC rules in effect on June 24, 1981:							
Computation of	☐ First 50 major television market	Second 50 major television market						
Base Rate Fee								
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for commerce	cial VHF Grade B contour stations listed in block A, part 9 of						
Exclusivity Surcharge	this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter							
for Partially Distant Stations	Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.         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							
	,							
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP						
	Line 1: Enter the VHF DSEs	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	Line 3: Subtract line 2 from line 1						
	and enter here. This is the	and enter here. This is the						
	total number of DSEs for this subscriber group	total number of DSEs for this subscriber group						
	subject to the surcharge	subject to the surcharge						
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY						
	SURCHARGE	SURCHARGE						
	First Group	Second Group						
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP						
	Line 1: Enter the VHF DSEs	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	Line 3: Subtract line 2 from line 1						
	and enter here. This is the total number of DSEs for	and enter here. This is the total number of DSEs for						
	this subscriber group	this subscriber group						
	subject to the surcharge	subject to the surcharge						
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE						
	Third Group	Fourth Group						
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7							

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

Space I Substitute Carriage

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