This form is effective beg	jinning with the Januar	ry 1 to June 30, 2017	, accounting period (2017	/1)
If you are filing for a prior a	ccounting period, contac	ct the Licensing Divisi	on for the correct form.	

SA1-2E Short Form

STATEMENT OF ACCOUNT	FOR COPYRIC	Return completed workbook by email to	
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>
General instructions are located in the first tab of this workbook.	2-28-25	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.
A ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY	YY/(Period))	

2024/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31 20242 Barcode Data Filing Period (optional - see instructions)	
20242 Barcode Data Filing Period (optional - see instructions)	
20242 Barcode Data Filing Period (optional - see instructions)	
20242 Barcode Data Filing Period (optional - see instructions)	
Accounting Period	
Instructions:	
B Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.	
Owner List any other name or names under which the owner conducts the business of the cable system.	
If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.	
Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	
LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
CEQUEL COMMUNICATIONS LLC	
BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
SUDDENLINK COMMUNICATIONS	
MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
3027 S SE LOOP 323 (Number, street, rural route, apartment, or suite number)	
TYLER, TX 75701	
(City, town, state, zip)	
C INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.	
System 1 IDENTIFICATION OF CABLE SYSTEM:	
LAWRENCE CORRECTIONAL FACILITY	
MAILING ADDRESS OF CABLE SYSTEM:	
2 (Number, street, rural route, apartment, or suite number)	
(City, town, state, zip code)	

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

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b SYSTEM ID#
Name	CEQUEL COMMUNICATIONS LLC	062662
D Area Served	Instructions: List each separate community served by the cable system. A "commun separate and distinct community or municipal entity (including unincorporated com unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will see community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile city.	nity" is the same as a "community unit" as defined in FCC rules: "a nmunities within unincorporated areas and including single, discrete ve as a form of system identification hereafter known as the "first
	CITY OR TOWN	STATE
First	SUMNER	L
Community	(LAWRENCE CORR)	
Add Rows as Necessary		

Name CEQUEL COMMUNICATIONS LLC C E Secondary Transmission Services : Using CRIEERS AND RATES In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be). Number of Subscribers: Solt blocks in space E call for the number of subscribers in each category by counting the number of subscribers is decher category of eventure of opersons or organizations charged separately for the particular service at the rate indicated—not the number of subscribers in service the standard rate variations within a particular service at the rate indicated—not the number of subscribers and ret each category by counting the charged for each category of eventure of persons or organizations charged separately for the particular service at the rate indicated—not the number of subscribers and ret is each service in a cable space for advance payment. Nate: Give the standard rate variations within a particular rate category, but do not include discounts allowed for advance payment. Bio Additional set(S). Bio Ed: 1: In the Idf-hand block in space E, the form lists the categories of secondary transmission service that cable systems most owork by outer service to additional set(S). Bio Ed: 1: In the Idf-hand block in space E, the form lists the categories of secondary transmission service to the first set and would be counted as a subscribers in additional set(S). Bio Ed: 1: In the Idf-hand block in space E. The test		LEGAL NAME OF OWNER OF CA	BI E SYSTEM							SA1-2E. P/			
F Secondary In General: The information is açoc E about over all categories of secondary transmission service of the cable system, that is, the transmission of tevicision and radio to create star by unsystem to subscribers. Give information startices: Sub- strokers and Rates Service: Sub- strokers and Rates Secondary transmission service: Sub- strokers and Rates Secondary transmission service: Sub- secondary transmission service: Sub- scription Rate: Seve the standard rate charged for each category (the number of subscribers to the cable system, to subscribers in each category by counting the number of billings in that category (the number of subscribers or erganizations charged secondary the number of billings in that category of service, include both the amount of the charge of the rate in advanced in the subscribers. Sub- scription matca compare sub- scription in which it is generally bill de (general): Submit Di- scription matca compare sub- scription and compare sub- scription matca compare sub- scriptin sub- scriptin sub- scriptin sub- scription matca compare sub- s	Name								Ŭ	062			
E In General: The information is space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission is low of the evidence of the same of the		CEQUEL COMMUNICAT											
Secondary Transmission Retes System. India is, the retransmission of relevision and rado broadcasts by your system to subscribers. One information about other services (including pay earlie) in space F. In others. All the facts you stale must be those existing on the services shall set any of the accounting period (June 30 or December 31, as the case may be). Rates Number of Subscribers in the blocks in space E. Califor the number of subscribers to the cable system, broken down by categorise of secondary transmission service. In general, you can compute the number of subscribers in sech category by counting the number of Subscriber and the tore and the subscribers. Some separately for the particular service at the rate indicated—not the number of subscribers and rate for each category by tool include discounce payment. Biock 1: In the left-hand block in space E. The form lists the categories of secondary transmission service that cable separately tory system. Note: Where an individual or organizations is creaking service that fails under "Service to additional security to additional set words be included in the count under."Service to additional set or any output be counted once again under "Service to additional set(s): Disck 2: If your cable system has cate categories for secondary transmission service that and infa set and would be counted once again under "Service to additional set(s): Disck 2: If your cable system has existe and categories for secondary transmission service that and infa set and your paysees. If or service to additional set(s): Disck 2: If your cable system has existe and categories for secondary transmission service that and infa set and your paysees. If your cable system's services that were indiced. The secondary in the number of subscribers and the pay is additional set(s): -Find table (of separate rate) Disck 2: If your cable system has your	E												
Secondary Transmission about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the services yours Rates Barbier of Services yours Rates Services yours and by catagories of secondary transmission service. In under of subscribers in each category by counting the number of billings in that category (the number of subscribers in each category by counting there of Lample: '300ml'). Rate: Give the standard rate charged for each category of service. Include both the amount of the charger and the unit witch it is generally billed. (Example: '300ml'). Subscribers and rate for each failed category built witch it is generally billed. (Example: '300ml'). Subscribers and rate for each failed category is spatially for the each actegory of service. Include both the amount of the charger and the category, but do not include descounds allowed for organization is the category. Example: a residential subscriber with pays service to additional ests would be include: a the care include: Biock 1: In the tell-hand block: In apple: Exit for mit has been categories of secondary transmissions service that are different categories, that person or entity should be counted as a subscriber in each applicable category. Example: Biock 2: I your cable system has rate categories for secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. Biock 2: I your cable system has rate category by the cable system has rate or description of the service is sufficient. Biock 2: I your cable system has rate category the cable system has reader apples by our cable system has rate category by the cable system has reader apples by the secondary transmission service that are eavisories to thaditional set(s)													
Transmission Service: Sub- Service: Sub- Service: Sub- Rates Isst day of the accounting pencid (June 30 or December 31, as the case may be). Rates Number of Subscribers: Bith block in space E. Indicated—not the number of subscribers to the cable system, separately (or the particular service at the rate indicated—not the number of subscribers comparizations charged separately (or the particular service at the rate indicated—not the number of service. Indicated both the annound of the charge and the unit in which it is generally billed. (Example: 'S20/mth'). Summarize any standard rate variations within a particular rate category, but on include discounce payment. Block 1: In the lefthand block in space E. The form lists the category es discounce payment. Block 1: In which it is generally billed. (Example: 'S20/mth'). Summarize any standard rate variations within a classop of service. Included in the count under 'Service to subscriber who pays earts for cable service to additional set(s)." Block 1: In work of the service the additional set(s). Block 2: In work of subscribers and rates (match block. A two- or three-word description of the service in the first set' and would be counted one again under 'Service to additional set(s)." Block 2: In work of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE NO. OF Rate CATEGORY OF SERVICE NO. OF Service to risk test the service is additional set(s). O													
Scribers and Rates down by categories of secondary transmission service, in general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of secondary transmissions or organizations charged separately for the particular service at the rate indicated—not the number of secondary transmissions or organizations charged separately for the particular service at the rate indicated—not the number of secondary transmissions ervice. In Cable State: Give the standar rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: \$20/mft)", Summarize any standar rate variations within a particular rate category, but do in include discontende as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be induced and the category that applies to your system. Note: Where an individual or organization is receiving service to that first eet" and vould be counted once again under "Service to additional sets)." Bick L2: If your cable system has rate categories for secondary transmissions, juits them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE Subscribers No. OF RATE CATEGORY OF SERVICE Subscribers in the right-hand block. A two- or three-word description of the service is sufficient. Service to dational set(s) 0 - Service to dational set(s) 0 - Service to fint se		last day of the accounting period	(June 30 or De	ecember	r 31, as the case	e may be)).		0				
Rates each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of services interings envice). Rate: Bit cases		Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken											
Separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate local sequences of the standard rate variations within a particular rate category, but viol. Bioch 1:1 in the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems must commonly provide to their subscribers. Sive the number of subscribers and rate for each listed category, that applies to your system. Note: Where an individual or organization is receiving service that fail under different categories, that person or entry should be counted one again under "Service to the faint service to additional set(s)." Biock 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block / for example, terms of services to additional set(s)." Biock 2: If your cable system has rate categories for secondary transmissions, list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is subscribers. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE Subscribers Service to dialional set(s). NO. OF CATEGORY OF SERVICE Subscribers Service to dialional set(s). NO. OF CATEGORY OF SERVICE Subscribers Service to dialional set(s). NO. OF Service to dialional set(s). NO. OF Service to dialional set(s). NO. OF <													
Ret: Cive the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally bilder. (Example: "Sciumith"). Summarize any standard rate variations within a particular rate category, but do not Include discounts allowed for advance payment. Bick 11: In the left-hand block in space E, the form list the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate offerent categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional sets would be counted once again under "Service to additional sets would be counted once again under "Service to additional sets would be counted once again under "Service to additional sets would be counted once again under "Service to additional sets would be counted once again under "Service to additional sets would be counted once again under "Service to additional sets would be counted once again under "Service to additional sets would be counted once again under "Service to additional sets". Block 2: If your cable system has rate categories for secondary transmissions, list them, together with the number of subscribers and rate in the ourner under "Service to additional sets". BLOCK 1 Service to first set 0 - - Service to first set 0 - - Service to first set 0 - - Service to first set 0	Rales												
category, but do not include discounts allowed for advance payment. Secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate offerent categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for case last service to additional sets would be notuded in the count under "Service to additional sets would be included in the count under "Service to additional sets would be included in the count under "Service to additional sets would be included in the count under "Service to additional sets would be included in the count under "Service to additional sets would be included in the count under "Service to additional sets would be included in the count under "Service to additional sets would be included in the count under "Service to additional sets would be included in the count under "Service to additional sets). Block 1 (for example, liers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. Block 1 (for example, liers of services that include one or more secondary transmission service that are offerent from those survices that most offered and the count under "Service to first set" 0 • Service to dittional set(s) • All or the service is a subscriber who are service is autificated. Services to additional set(s) • Service to additional set(s) • All or the service is a subscriber who are service is a service shat were not covered in space E, that is, those services that are not offered in combination with any secondary transmission services that were nor the sel		Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the											
Biocrit 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems mat commonly provide to their subscriptes. Give the number of subscriptes and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that period not mitty should be counted as a subscripter in each applicable category. Example: a residential subscriber who pays extra for cable service to additional set(s): Biocrit 2: If your cable system has rate categories for secondary transmissions) service that are different from those printed in block. If (or example, used of services that include one rome secondary transmission), slist them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE SUBSCRIBERS Residential: 0 • Service to first set 0 • Service to first set 0 • Service to additional set(s): - • Motel, hotel - Commercial 105 Converter - • Residential - • Non-residential - • Services OTHER THAN SECONDARY TRANSINSIONS: RATES In Generat: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not offreed in comb		unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate											
systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is received that fails under different in the page scatt for cable service to additional set(s)." Biock 211 your cable system has rafe categories for secondary transmissions sorvice that are different from those printed in block 1 (for example, iters of services that include one or more secondary transmissions). Ist them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient: Biock 211 your cable system has rafe categories for secondary transmission. BLOCK 1 BLOCK 2 NO.OF CATEGORY OF SERVICE SUBSCNIBERS RATE CATEGORY OF SERVICE SUBSCNIBERS Residential: 0 - - - - Service to first set 0 - - - - Service to first set 0 - - - - - Note, hotel Commercial 105 42.41 -													
F Service of first set 0 Services Other Thanse SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES In any services that are not offered in comparing (1) services first set and work to reace the automation with any secondary transmission service that service to additional set(s). Bock 1: Grower the automatication of the service is setting control on the service is sufficient. In any setting service to the first set and work to be applied to the service is setting control on the service is sufficient. Bio Control 1: Service to first set 1: Service to the first set and setting service to additional set(s). In any setting service to additional set(s). Service to first set 1: 0: Service to additional set(s). In additional set(s). In additional set(s). Residential: 0: Service to first set 1: 0: Service to first set 1: 0: Service to additional set(s). In additional set(s). In additional set(s). Non-residential 105: 42.41 In additional set(s). In additional set(s). In additional set(s). Non-residential 105: 42.41 In additional set(s). In additional set(s). In additional set(s). Non-residential 105: 42.41 In additional set(s). In additional set(s). In additional set(s). Instruct to additional set(s) In additional set(s). In additionad set(s). In a													
F Services of additional sets, would be contended once again under "Service to additional sets, out the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 1 BLOCK 2 NO. OF Service of additional sets, or the right-hand block. A two- or three-word description of the service is sufficient. Image: Service to additional sets, or the right-hand block. A two- or three-word description of the service is sufficient. NO. OF NO. OF NO. OF NO. OF Service to subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. * Service to first set 0 - NO. OF Service to additional set(s) NO. OF NO. OF Service to additional set(s) NO. OF Service to additional set(s) NO. OF													
Inst set* and would be counted once again under "Service to additional set(s)." Bick 2: If your cable system has rate categories for secondary transmissions nervice that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 1 BLOCK 2 CATEGORY OF SERVICE SUBSCRIBERS RATE CATEGORY OF SERVICE SUBSCRIBERS Residential: • • • • • • • • • • • • • • • • • • •													
Biock 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmission). Jist then, uogether with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 1 BLOCK 2 CATEGORY OF SERVICE Subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. NO. OF Service to first set 0 - - Service to additional set(s) 0 - - Commercial 105 42.41 - - Converter - - - - - Residential - - - - - - Services of rails for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E; that is, those services that are not offered in combination with any secondary transmissions services that y transmissions should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters 'PP' in the rate column. - - - - - - - - - -							in the count und	ler "Servic	e to the				
F Services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE SUBSCRIBERS RATE CATEGORY OF SERVICE SUBSCRIBERS Residential: 0 - - Subscribers Subscribers * Service to first set 0 - - Subscribers Subscribers * FM radio (if separate rate) 0 - - Subscribers Subscribers * Residential 105 42.41 - - - - Convertor - - - - - - - * Residential -													
sufficient. BLOCK 1 BLOCK 2 NO. OF CATEGORY OF SERVICE SUBSCRIBERS Residential: • Services to first set • Service to additional set(s) • FM radio (if separate rate) Motel, hotel Converter • Residential • Non-residential 105 42,41 • Non-residential • Non-residential 105 42,41 • Non-residential • Non-residential 105 42,41 • Non-residential 106 42,41 • Non-residential 106 42,41 • Non-residential In General: Space F, calls for rate (not subscribers, Rate information should include both the and on cost or (2) services fraits from services fraits from the insubuli fold. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate colurn. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 1: Give the standard rate charge do the rate for each. Cattegory OF SERVICE Rate Block 1: Give the standar rate charge do y the cable system for each of the applicable services is listed. Block 1: Give the standa		printed in block 1 (for example, ti	ers of services	that inc	lude one or mor	re second	lary transmissio	ns), list the	em, together				
BLOCK 1 BLOCK 2 NO. OF CATEGORY OF SERVICE NO. OF SUBSCRIBERS RATE CATEGORY OF SERVICE NO. OF SUBSCRIBERS Residential: • Service to additional set(s) • • • • • Service to additional set(s) • • • • • • • FM radio (if separate rate) • • • • • • • Motel, hotel Converter • • • • • • • • Non-residential •			nd rates, in the	e right-ha	and block. A two	o- or three	e-word description	on of the se	ervice is				
F Services other than SECONDARY TRANSMISSION: RATES In General: Space F calls for rate (not subscribe) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered unique termination should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters : PPT in the rate column. Block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE SUBSCRIBERS F Residential 0 - - - - Non-residential 0 - - - - - Converter - - - - - - - Services Other rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters : PPT in the rate couble system for each of the applicable services listed.	-							BLOCK	<i>(</i>)				
Residential:	-							DLOOF					
• Service to first set 0 - • Service to additional set(s) • FM radio (if separate rate) - Motel, hotel Commercial 105 42.41 Converter • Residential - - • Residential 0 - - - • Residential 0 - - - - • Non-residential 105 42.41 - - - • Residential Non-residential 0 - </td <td rowspan="4"></td> <td>CATEGORY OF SERVICE</td> <td>SUBSCRIB</td> <td>ERS</td> <td>RATE</td> <td>CATI</td> <td>EGORY OF SEF</td> <td>RVICE</td> <td>SUBSCRIBER</td> <td>s RA</td> <td>٩ΤΕ</td>		CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATI	EGORY OF SEF	RVICE	SUBSCRIBER	s RA	٩ΤΕ		
• Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial Comverter • Residential • Non-residential 105 • Non-residential 105 • Services Other THAN SECONDARY TRANSMISSIONS: RATES In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 2: List any services that your cable system for each of the applicable services in the form of a brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE Continuing Services: Installation: Non-residential • Pay cable • Motel, hotel • Fire protection • Pay cable-add'I channel • Fire p		Residential:											
•FM radio (if separate rate)				0	-								
Motel, hotel Motel, hotel Commercial 105 42.41 Converter • Residential • Non-residential Image: Converter • Secondary Image: Converter • Image: Converter Non-residential • Image: Converter Image: Converter • Block 1: Give the sta													
Commercial Converter 105 42.41 · Residential · Non-residential · Non-residential · Non-residential · Non-residential · Non-residential Services Other Than Secondary Transmissions: Rates SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES in General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters 'PP' in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 1: Give the standard rate charged was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. ECATEGORY OF SERVICE RATE CATEGORY OF SERVICE Installation: Non-residential · Pay cable · Model, hotel · Pay cable · Model, hotel · Fire protection · Pay cable · Fire protection · Pay cable-add'I channel ·													
Converter Residential · Residential · Non-residential · Non-residential Image: Converter · Residential · Non-residential F Services Other Than Secondary Services Other Than Secondary Secondary Fee The etwo exceptions: you do not need to give rate information oncorening (1) services trunshed at cost or (2) services or facilities furnished to nonsubscribers. Rate information concerning (1) services Transmissions: Rates Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 1: Give the standard rate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. Extreme Ver Service: RATE CATEGORY OF SERVICE Orthree-word) description and include the rate for each. Installation: Non-residential · Pay cable · Motel, hotel · Pay cable · Fire protection · Pay cable · Motel, hotel · Fire protection · Pay cable · Motel, hotel · Fire protection · Pay cable · Burglar protection · Fire set et(s) · O		•											
• Residential • Non-residential • Non-residential • Intervention F Services Services Other Than Services or a single fee. There are two exceptions: you do not need to give rate information concerning (1) services of furnished at cost or (2) services or facilities furnished to consubscribers. Rate information concerning (1) services of furnished at cost or (2) services or facilities furnished to subscriber). Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 1: Give the standard rate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. ECORTY OF SERVICE RATE CATEGORY OF SERVICE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Pay cable - • Motel, hotel • Pay cable - • Motel, hotel • Fire protection • Pay cable • Pay cable • Fire protection • Pay cable • Pay cable • Fire protection • Pay cable • Burglar protection • Fire st set • Other services: • Burglar protection • Fire rotection <td></td> <td></td> <td></td> <td>105</td> <td>42.41</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>				105	42.41								
• Non-residential Image: Comparison of the second and the second													
F SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES In General: Space F. calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the damout of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services in the form of a brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Pay cable - - •Motel, hotel •Pay cable •Pay cable • Fire protection - - •Pay cable •Pay cab													
F In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services in the form of a brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Very cable - - - - - • Pay cable - - - - - - • Pay cable -		Non-residential											
Image: Construct of the product of		SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	SIONS: RATES								
Services Other Than Secondary Transmissions: Rates service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. Example BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Pay cable - - • Pay cable - - • Fire protection - - • Fire protection - - • Fire set - - - • Additional set(s) - - - • FM radio (if separate rate) - - - • Converter - - - -	E												
Services Other Than Secondary Transmissions: Rates furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. Record BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Pay cable - • Pay cable - • Motel, hotel • Pay cable - • Pay cable • Fire protection • Pay cable • Pay cable • Fire protection • Pay cable • Pay cable • Fire set - • Burglar protection • Fire set - • Burglar protection • Fire protection • Fire set - • Burglar protection • Burglar protection • Fire set - • Burglar protection • Reconnect • Reconnect	-	· · · · · ·					,	,					
Other Than Secondary Transmissions: amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. EACH CATEGORY OF SERVICE RATE CATEGORY OF SERVICE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Onther, additional services: Installation: Non-residential BLOCK 1 Pay cable - Motel, hotel - • Pay cable - Motel, hotel - • Fire protection • Pay cable - • Pay cable - • Fire protection • Pay cable - • Burglar protection - • First set - • Burglar protection • Pay cable - • First set - • Burglar protection - • Burglar protection - • First set - • Burglar protection • Burglar protection - -													
Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Continuing Services: Installation: Non-residential Other services • Pay cable - • Motel, hotel - • Fire protection • Pay cable • Pay cable - • Fire protection • Pay cable • Pay cable - • Fire set - • Burglar protection - • First set - • Burglar protection - • First set - • Burglar protection - • Additional set(s) - • Reconnect - - • FM radio (if separate rate) • Reconnect - - - • Converter • Disconnect - - -													
Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Continuing Services: Installation: Non-residential CATEGORY OF SERVICE Pay cable - Notel, hotel Pay cable - Pay cable Burglar protection Pay cable - Burglar protection Pay cable - First set - Burglar protection First set - Burglar protection First of (if separate rate) - Reconnect - Other services: - - - Fird raid (if separate rate) - Reconnect - - Burglar protection - - - - - Burglar protection - - - - - Burglar protection - - - - - Burglar protection -	-	enter only the letters "PP" in the rate column.											
listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE CONTINUING Services: Installation: Non-residential • Pay cable - • Motel, hotel - - • Pay cable - • Motel, hotel - - • Pay cable - • Commercial - - - • Fire protection - • Pay cable - - - • Burglar protection - • Pay cable-add'l channel - - - - • First set - • Burglar protection - - - - - • First set - • Burglar protection - - - - - - - - - - - - - - - - - <td></td> <td colspan="11"></td>													
brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 1 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE Continuing Services: Installation: Non-residential • Pay cable - • Motel, hotel - • Pay cable - • Motel, hotel - • Pay cable - • Commercial - • Fire protection • Pay cable-add'l channel - - • Burglar protection • Pay cable-add'l channel - - • First set - • Burglar protection - - • First set - • Burglar protection - - • Additional set(s) - Other services: - - • FM radio (if separate rate) • Reconnect - - - • Converter • Disconnect - - - -	Rales												
CATEGORY OF SERVICERATECATEGORY OF SERVICERATECATEGORY OF SERVICEContinuing Services:Installation: Non-residentialAnteCategory of Services• Pay cable• Motel, hotel• Motel, hotel• Motel, hotel• Pay cable—add'l channel• Commercial• Pay cable• Commercial• Fire protection• Pay cable• Pay cable• Commercial• Burglar protection• Pay cable-add'l channel• Fire protection• First set-• Burglar protection• Fire protection• First set-• Burglar protection• Commercial• Additional set(s)-• Reconnect-• Converter• Disconnect													
CATEGORY OF SERVICERATECATEGORY OF SERVICERATECATEGORY OF SERVICEContinuing Services:Installation: Non-residentialAnteCategory of Services• Pay cable• Motel, hotel• Motel, hotel• Motel, hotel• Pay cable—add'l channel• Commercial• Pay cable• Commercial• Fire protection• Pay cable• Pay cable• Commercial• Burglar protection• Pay cable-add'l channel• Fire protection• First set-• Burglar protection• Fire protection• First set-• Burglar protection• Commercial• Additional set(s)-• Reconnect-• Converter• Disconnect			BL O	CK 1					BLOCK 2				
• Pay cable - • Motel, hotel - - • Pay cable—add'l channel - • Commercial - - • Fire protection • Pay cable - - - • Burglar protection • Pay cable-add'l channel - - - • First set - • Burglar protection - - - • First set - • Burglar protection - - - • Additional set(s) - • Reconnect - - - • Converter • Disconnect - - - -	4	CATEGORY OF SERVICE	-	-	ORY OF SERV	/ICE	RATE	CATEG			٩ΤΕ		
• Pay cable—add'l channel • Commercial • Fire protection • Pay cable • Burglar protection • Pay cable-add'l channel • Burglar protection • Fire protection • First set • Burglar protection • First set • Burglar protection • Additional set(s) • Other services: • FM radio (if separate rate) • Reconnect • Converter • Disconnect		Continuing Services:		Installa	ation: Non-resi	dential							
• Fire protection • Pay cable • Burglar protection • Pay cable-add'l channel • Installation: Residential • Fire protection • First set - • Additional set(s) • Other services: • FM radio (if separate rate) • Reconnect • Converter • Disconnect		• Pay cable	-	• Mot	tel, hotel								
•Burglar protection •Pay cable-add'l channel Installation: Residential •Fire protection •First set •Burglar protection •Additional set(s) •Other services: •FM radio (if separate rate) •Reconnect •Converter •Disconnect		 Pay cable—add'l channel 	-	• Cor	nmercial								
Installation: Residential • Fire protection • First set • Burglar protection • Additional set(s) • Other services: • FM radio (if separate rate) • Reconnect • Converter • Disconnect		 Fire protection 		• Pay	/ cable								
• First set- Burglar protection• Additional set(s)-• FM radio (if separate rate)• Reconnect• Converter• Disconnect		 Burglar protection 		• Pay	/ cable-add'l cha	annel							
• Additional set(s) - Other services: • FM radio (if separate rate) • Reconnect • Converter • Disconnect		Installation: Residential		• Fire	e protection								
• FM radio (if separate rate) • Converter • Converter • Disconnect • Disconnect		• First set	-	• Bur	glar protection								
Converter Disconnect		 Additional set(s) 	-	Other s	services:								
				• Rec	connect		-						
• Outlet relocation		• Converter		• Dis	connect								
				• Out	let relocation		-						
Move to new address -				• Mov	ve to new addre	SS	-						

	LEGAL NAME OF OWNER O	F CABLE SYSTEM:		SYSTEM								
Name	CEQUEL COMMUNIC	ATIONS LLC		0626								
	PRIMARY TRANSMITTERS:	TELEVISION										
G Primary Transmitters: Television	FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station here, station was carried <i>only</i> or • List the station here, and basis. For further informati Column 1: List each static multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in each educational station, by ent (for independent multicast) For the meaning of these t Column 4: Give the location	ed by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 9(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.63(e)(2) and (4))]; and (2) certain stations carried on a titute program basis, as explained in the next paragraph. Stitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program so under specific FCC rules, regulations, or authorizations: <i>not</i> list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the on was carried <i>only</i> on a substitute basis. . the station here, and also in space I, if the station was carried both on a substitute basis and also on some other . . For further information concerning substitute basis stations, see page (v) of the general instructions.										
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION								
	WAWV-1	38	N	TERRE HAUTE, IN								
	WBDT-1	26	<u>I</u>	SPRINGFIELD, OH								
ws as Necessary	WTHI-1	10	N	TERRE HAUTE, IN								
	WTWO-1	2	N	TERRE HAUTE, IN								
	WUSI-1	16	Е	TERRE HAUTE, IN								
	WXIN-1	59	<u> </u>	INDIANAPOLIS, IN								
	WXIN-1	59	I	INDIANAPOLIS, IN								
Rows as Necessary	WXIN-1	59	I	INDIANAPOLIS, IN								
	WXIN-1	59	I	INDIANAPOLIS, IN								
	WXIN-1	59	I									
	WXIN-1	59	I									
	WXIN-1	59	I									
	WXIN-1	59	I									
	WXIN-1	59	I									
	WXIN-1	59	I									
	WXIN-1	59		INDIANAPOLIS, IN								
	WXIN-1	59										
	WXIN-1	59		INDIANAPOLIS, IN								
	WXIN-1	59										
	WXIN-1	59		INDIANAPOLIS, IN								
	WXIN-1											
	WXIN-1	59		INDIANAPOLIS, IN								

	FOWNER OF C								SYSTEM II 0626
	t every radio s	tation ca	rried on a separate and discre nerally receivable by your cabl					ied on an	н
eceivable if (1) n the basis of or detailed info aper SA1-2 fo Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: C	it is carried by monitoring, to prmation abou rm. dentify the call state whether t the radio stati this by placing Sive the station	y the syst be receivent t the Cop sign of e he station ion's sign g a check n's location	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. n is AM or FM. nal was electronically processes mark in the "S/D" column. on (the community to which the the community with which the	t the syste nis p ed b e sta	system's hea em's FM anter oint, see page y the cable sy ation is license	idend, and (2) nna, during cei e (v) of the gei vstem as a sep ed by the FCC	it can b rtain sta neral ins parate a	e expected, ted intervals. tructions in the. nd discrete	Primary Transmitters: Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	(CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	d: 2024/2					FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#
Name	CEQUEL COMMUNICA	TIONS LL	.C				062662
	SUBSTITUTE CARRIAGE						
I	In General: In space I, identi substitute basis during the ad						
Substitute	explanation of the programm						
Carriage:	1. SPECIAL STATEMENT	CONCER	NING SUBSTI	TUTE CARRIAGE			
Special	 During the accounting per 	iod, did you	r cable system	carry, on a substitute bas	is, any nonne	etwork television progra	m
Statement and Program Log	broadcast by a distant stati	on?				YES	× NO
r rogram Eog	Note: If your answer is "No	" leave the	rest of this nad	a blank. If your answer is	"Ves " vou m		
		, leave life	rest of this pag	je blatik. Il your atiswel is	res, you in	iusi complete the progra	111
	log in block 2. 2. LOG OF SUBSTITUTE	PROGRAM	MS				
	In General: List each subst			te line. Use abbreviations	wherever po	ssible, if their meaning i	is
	clear. If you need more spa	ce, please a	add additional	rows to the tables.		-	
	Column 1: Give the title period, was broadcast by a			ision program ("substitute			
	under certain FCC rules, re						
	Do not use general categor	ies like "mo	vies" or "baske	etball." List specific program	m titles, for e	xample, "I Love Lucy" o	r
	"NBA Basketball: 76ers vs.		laast live suite	r "Vee" Otherwise enter "I	N		
				r "Yes." Otherwise enter "I asting the substitute progra			
	Column 4: Give the broa	dcast static	on's location (th	ne community to which the	station is lice		
	the case of Mexican or Can						
	first. Example: for May 7 give		when your sys	tem carried the substitute	program. Us	e numerals, with the mo	onth
			substitute pro	gram was carried by your	cable system	. List the times accurate	ely
	to the nearest five minutes.						
	stated as "6:00–6:30 p.m."	or "D" if the	listed program	was substituted for progra	omming that	vour evetom was requir	ad
	to delete under FCC rules a						
	was substituted for program	nming that y					
	effect on October 19, 1976.						
					WHE	EN SUBSTITUTE	
	S	UBSTITUT	E PROGRAM			IAGE OCCURRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	
						_	
						_	
						_	
						_	
						_	

Accounting Period:	2024/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	S	STEM ID# 062662
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmis (as identified in space E) during the accounting period. For a further explanation of how to compute this ar page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ssion service nount, see	5 ,593.26 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less. • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$26 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600. See page (vi) of the general instructions located in the paper SA1-2 form for more information.	63,800.	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this accounting period is \$52.00.	s six-month	
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Register of See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2024/2										FOR	M SA1-2E. PAGE 7.
Name		F OWNER OF CABLE SYSTEM: MMUNICATIONS LLC										SYSTEM ID# 062662
M Channels	to its subscrit 1. Enter the tr system car 2. Enter the tr on which th	You must give (1) the number bers, and (2) the cable system's otal number of channels on whi ried television broadcast statio otal number of activated chann ne cable system carried televisi padcast services	s total nu ich the ca ons nels ion broac	umbe cable	er of activated cl	hannels durir	ng the a	accounting period	ı. 		6	
N Individual to Be Contacted		TO BE CONTACTED IF FURT ct about this statement of acco		IFORI	RMATION IS NE	EDED (Ident	tify an ir	ndividual				
for Further Information	Name	RODNEY HASKINS							Telephone	(903) 579-3	152	
	Address	3027 S SE LOOP 323 (Number, street, rural route, apar TYLER, TX 75701 (City, town, state, zip)		r suite r	number)							
	Email	RODNEY.HAS	KINS@) ALT	TICEUSA.COM	1		Fax (optional				
O Certification	I, the undersig (Ow (Age X (Off I have examin are true, comp	N (This statement of account n ned, hereby certify that (Check o ner other than corporation or p ent of owner other than corpora in line 1 of space B and that th ficer or partner) I am an officer (in line 1 of space B. ed the statement of account and olete, and correct to the best of m action 1001(1986)]	one, <i>but of</i> partnersh ation or p ne owner i (if a corpo hereby de	conly or chip) partn r is not declare edge,	ne, of the boxes and the owner of nership) I am the ot a corporation of on) or a partner (if re under penalty of	.) f the cable sys e duly authoriz r partnership; f a partnershi f a partnershi belief, and ar	rstem as zed ager ; or ip) of the stateme	identified in line 1 nt of the owner of legal entity identi	of space B; the cable sys fied as owner	tem as identified		
		Typed or printed	Enter a Enter si	an eleo signati		e on the line al signature" (e.	e.g., /s/ J	certify this statem ohn Smith)	ient.			
		Title: (T			ROGRAMMIN position held in corpo		ership)					
		Date:						2/28/2025	;			

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

EQUEL COMMUNICATIONS LLC 0626 PECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home volume of of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the folous service of providing secondary transmissions of primary broadcast transmitters, the system for the basic subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119. For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the page SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. Second Statement Mailing Address Name Mailing Address Name Mailing Address No must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Q	counting Period: 2024/2	FORM SA1-2E. PAGE 8
SPECIAL STATEMENT CONCERNING CROSS RECEIPTS EXCLUSIONS The determining the total number of 1988 amended Tale 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing settine-or: The determining the total number of absorbbers and the gross amounts paid to the cable system for the basic sorbers and anounts collected from subsorbers and the gross amounts paid to the cable system for the basic concentration on when to exclude these amounts, see the note on page (wi) of the general instructions to cated in the paper SA1-2 form. The paper SA1-2 form. The total here and list the satellite carrier(s) below. The paper SA1-2 form. The total here and list the satellite carrier(s) below. The paper SA1-2 form. Th	GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
The Stabilite home Vewer Act of 1988 amended Tile 17, section 111(0)(1)(A), of the Copyright Act by adding the following selence: In determining the total number of subscribers and the gross amounts paid to the cable system for the basic scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 115. ¹ For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. In or 125. Enter the total here and list the satellite carrier(s) below. So 125. Enter the total here and list the satellite carrier(s) below. So 125. Enter the total here and list the satellite carrier(s) below. So 125. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 126. Enter the total here and list the satellite carrier(s) below. So 206. S	EQUEL COMMUNICATIONS LLC	062662
Name Name Maling Address Maling Address INTEREST ASSESSMENT Maling Address You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Iterest Assessment Line 1 Enter the amount of late payment or underpayment	 The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO 	P Special Statement Concerning Gross Receipts Exclusion
You must complete this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served Iterest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Name Name	
You must complete this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served Iterest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.		
Line 1 Ender the antiduit of late payment of underpayment	You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q
Line 3 Multiply line 2 by the number of days late and enter the sum here - - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - x 0.00274 - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - - - - in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6 - - - - * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further assistance please - - - contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address -	Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Image: A standard		
in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6		
contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	
list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
Address ID number First community served		
First community served		
	First community served	

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

C	Cable Worksheet	Total amount of remittance	Number of	SAs rec'd	Initials	
		Date of remittance	Check] EFT	🗌 FILI	NG FEES
Cable ID #					Amount	Initials
Examined by	Reviewed by	Date examination completed	Allocation numb	er		
Space A		(enter four digit year and	/1 (for Jan-Jun period) or	/2 (for Jul-Dec p	period) No spa	ces)
Accounting Period	Letter sent	[Information received			
	Accepted	[Phone call/Date/Contact	t		
Space B Owner						
	Letter sent	[Information received			
	Accepted	[Phone call/Date/Contact	t		
Space D Area Served						
	Letter sent	[Information received			
	Accepted	[Phone call/Date/Contact	t		
Space E Secondary Transission						
Service Subscribers:	Letter sent	[Information received			
and Rates	Accepted	[Phone call/Date/Contact	t		
Space G Primary Transmitters:						
Television	Letter sent		Information received			
			Phone call/Date/Contac	t		
Space H Primary Transmitters:						
Radio	Accepted		Phone call/Date/Contac	t		

	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	