This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEMENT OF ACCOUNT	FOR COPYRIGH	IT OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u> For additional information.
General instructions are located in the first tab of this workbook	8/29/2019	ALLOCATION NUMBER	Contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Δ			

A	ACCO	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2019/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.	
Owner		List any other name or names under which the owner conducts the business of the cable system.	
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.	
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		MCC Iowa, LLC (Waverly, IA)	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		ONE MEDIACOM WAY (Number, street, rural route, apartment, or suite number)	
		MEDIACOM PARK, NY 10918	
		(City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless thes s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.	e
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2		
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	

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

Name		SYSTEM ID#
Р	MCC Iowa, LLC (Waverly, IA) Instructions: List each separate community served by the cable system. A "comm "a separate and distinct community or municipal entity (including unincorporated	
D	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that yo as the "first community." Please use it as the first community on all future filings.	
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobilidentified city.	e home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	Waverly	IA
Community	Denver	IA
	Janesville	IA
Add Rows as Necessary	Shell Rock	IA

	LEGAL NAME OF OWNER OF C							FORM SA1	TEM ID
Name	MCC Iowa, LLC (Waverl							515	426
		у, ід							
Е	SECONDARY TRANSMISSION								
	In General: The information in s system, that is, the retransmission								
Secondary	about other services (including p								
Transmission	last day of the accounting period								
Service: Sub- scribers and	Number of Subscribers: Both down by categories of secondary	•							
Rates	each category by counting the n								
	separately for the particular serv							-	
	Rate: Give the standard rate c unit in which it is generally billed								
	category, but do not include disc	ounts allowed	for adva	ance payment.	-				
	Block 1: In the left-hand block								
	systems most commonly provide that applies to your system. Note								
	categories, that person or entity								
	subscriber who pays extra for ca					I in the count un	der "Servio	ce to the	
	first set" and would be counted of Block 2: If your cable system					service that are	different f	rom those	
	printed in block 1 (for example, t								
	with the number of subscribers a								
	sufficient.	OCK 1					BLOC	()	
		NO. OF	:				BLOOP	NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential:		4 0 4 0	40.40.00.00					
	Service to first set		1,312	40.49-62.36					
	 Service to additional set(s) FM radio (if separate rate) 								
	Motel, hotel								
	Commercial		2	40.49-62.36					
	Converter								
	Residential								
	Non-residential								
_	SERVICES OTHER THAN SEC In General: Space F calls for rat	-				l vour cable svs	tem's serv	ices that were	
F	not covered in space E, that is, t	•	,		•				
0	service for a single fee. There are	•			•		• • • •		
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the	rate column.	-	-		-		ogram zaolo,	
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that							wore not	
Rales	listed in block 1 and for which a								
	brief (two- or three-word) descrip								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATE	GORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:		Install	ation: Non-res	idential				
	• Pay cable	PP		otel, hotel			Family	Cable	80.4
	Pay cable—add'l channel Fire protection	PP		ommercial					
	Fire protection			y cable	oppel				
	•Burglar protection Installation: Residential			y cable-add'l ch	aiiiilei				
	First set	99.99		rglar protection					
	Additional set(s)	15.00-29.00		services:					
	• FM radio (if separate rate)			connect		29.00			
	, , , , , , , , , , , , , , , , , , ,								
	Converter	10.50	• Dis	sconnect					
	• Converter	10.50		sconnect Itlet relocation		15.00-29.00			

	T			FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF			SYSTEM I 42
	MCC Iowa, LLC (Wave			74
G Primary ansmitters: elevision	In General: In space G, ider carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e) substitute program basis, as Substitute Basis Stations: basis under specific FCC rul	ntify every television station (including n during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting t)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. With respect to any distant stations c les, regulations, or authorizations:	g translator stations and low power tele of (1) stations carried only on a part-tir the carriage of certain network program 61(e)(2) and (4))]; and (2) certain stati carried by your cable system on a subs	me basis under ms [sections ons carried on a stitute program
	station was carried only on a • List the station here, and a basis. For further information Column 1: List each station multicast stream associated "WETA-2" as the same on th Column 2: Give the channe of license. For example, WF Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter	a substitute basis. Iso in space I, if the station was carrie n concerning substitute basis stations 's call sign. <i>Do not</i> report origination with a station according to its over-the he form. I number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instru	the Special Statement and Program Lied both on a substitute basis and also is, see page (v) of the general instruction program services such as HBO, ESPI le-air designation. For example, report evision station for broadcasting over the station, an independent station, or a fulfor network multicast), "I" (for independent station, or a fulfor network multicast), "I" (for independent station, and the paper SA1-2 form.	on some other ons. N, etc. Identify each t multistream he air in its community noncommercial ndent), "I-M" nal multicast).
			3. TYPE OF STATION	
	KCRG/KCRG(HD) ABC	9	N	Cedar Rapids, IA
	KCRG-DT2/KCRG-DT2 (HD)MYNI	9.2	N I-M	Cedar Rapids, IA Cedar Rapids, IA
lows as Necessary	KCRG-D12/KCRG-D12 (HD)MYN	9.2	I-M	Cedar Rapids, IA Cedar Rapids, IA
OWS as Necessary	KCRG-DT3 Antenna	9.3	I-M	
		Чл.	1-04	
				Cedar Rapids, IA
	KCRG-DT5 Start TV	9.5	I-M	Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX	9.5 27	I-M	Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge	9.5 27 27.2	I-M I I-M	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD	9.5 27 27.2 27.3	I-M I I-M I-M	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS	9.5 27 27.2 27.3 2	i-M i i-M i-M N	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD	9.5 27 27.2 27.3	I-M I I-M I-M	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS	9.5 27 27.2 27.3 2	i-M i i-M i-M N	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV	9.5 27 27.2 27.3 2 2 2 2 2 2	I	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET	9.5 27 27.2 27.3 2 2 2.2 2.3	i-M i i-M i-M i-M i-M	Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT3 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION	9.5 27 27.2 27.3 2 2 2.2 2.3 47	i-M i i-M i-M i-M i-M i	Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2	i-M i i-M i-M i-M i-M i-M	Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff KWKB/KWKB(HD) Escape	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2 20	i-M i i i-M i-M i-M i i i i	Cedar Rapids, IA Cedar Rapids, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff KWKB/KWKB(HD) Escape KWWL/KWWL(HD) NBC	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2 20 7	I	Cedar Rapids, IA Cedar Rapids, IA IOWA CITY, IA IOWA CITY, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff KWKB/KWKB(HD) Escape KWWL/KWWL(HD) NBC	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2 20 7 7 7.2	i-M i i i i i i i i i i i i i	Cedar Rapids, IA Cedar Rapids, IA IOWA CITY, IA IOWA CITY, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff KWKB/KWKB(HD) Escape KWWL/KWWL(HD) NBC KWWL-DT2/KWWL-DT2 (HD) CW KWWL-DT3 MeTV	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2 20 7 7 7.2 7.3	I I I-M I-M I-M I <td>Cedar Rapids, IA Cedar Rapids, IA IOWA CITY, IA IOWA CITY, IA Waterloo, IA</td>	Cedar Rapids, IA Cedar Rapids, IA IOWA CITY, IA IOWA CITY, IA Waterloo, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff KWKB/KWKB(HD) Escape KWWL/KWWL(HD) NBC KWWL-DT2/KWWL-DT2 (HD) CW KWWL-DT3 MeTV KWWL-DT4 Court TV	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2 20 7 7 7.2 7.3 7.4	I-M I I-M I-M I-M I	Cedar Rapids, IA Cedar Rapids, IA IOWA CITY, IA IOWA CITY, IA IOWA CITY, IA Waterloo, IA Waterloo, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff KWKB/KWKB(HD) Escape KWWL/DT2 Laff KWKB/KWKB(HD) NBC KWWL-DT2/KWWL-DT2 (HD) CW KWWL-DT3 MeTV KWWL-DT4 Court TV KWWL-DT4 Court TV	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2 20 7 7 7.2 7.3 7.4 7.5	I-M I I-M I-M I-M I	Cedar Rapids, IA Cedar Rapids, IA Waterloo, IA Waterloo, IA Waterloo, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff KWKB/KWKB(HD) Escape KWWL/KWWL(HD) NBC KWWL-DT2/KWWL-DT2 (HD) CW KWWL-DT3 MeTV KWWL-DT3 MeTV KWWL-DT4 Court TV KWWL-DT5 Justice Network KYIN/KYIN(HD) PBS	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2 20 7 7 7.2 7.3 7.2 7.3 7.4 7.5 18	i-M i i i-M i-M i-M i i i i i i i i i i i i i	Cedar Rapids, IA Cedar Rapids, IA IOWA CITY, IA IOWA CITY, IA IOWA CITY, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA
	KCRG-DT5 Start TV KFXA/KFXA(HD) FOX KFXA-DT2 Charge KFXA-DT2 Charge KFXA-DT3 TBD KGAN/KGAN(HD) CBS KGAN-DT2 getTV KGAN-DT3 COMET KPXR/KPXR(HD) ION KWKB DT2 Laff KWKB/KWKB(HD) Escape KWWL/DT3 Laff KWKB/KWKB(HD) NBC KWWL-DT2 Laff KWWL-DT2 (HD) NBC KWWL-DT2 (HD) NBC KWWL-DT3 MeTV KWWL-DT4 Court TV KWWL-DT4 Court TV KWWL-DT5 Justice Network KYIN/KYIN(HD) PBS KYIN-DT2 IPTV KIDS (HD)	9.5 27 27.2 27.3 2 2.2 2.3 47 20.2 20 7 7 7.2 7.3 7.2 7.3 7.4 7.5 18 18 18.2	I-M I I-M I-M I-M I-M I	Cedar Rapids, IA Cedar Rapids, IA IOWA CITY, IA IOWA CITY, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA

ccounting Period:	2019/1			FORM SA1-2E. PAG
N	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM I
Name	MCC Iowa, LLC (Wave	erly, IA)		42
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations: basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on th Column 2: Give the channel of license. For example, WI Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these te Column 4: Give the location	n during the accounting period, except n effect on June 24, 1981, permitting t)(2) and (4), or 76.63 (referring to 76.63 explained in the next paragraph. With respect to any distant stations of les, regulations, or authorizations: in space G—but do list it in space I (if a substitute basis. Iso in space I, if the station was carried in concerning substitute basis stations 's call sign. <i>Do not</i> report origination with a station according to its over-the form. I number the FCC assigned to the tell RC is channel 4 in Washington, D.C. case whether the station is a network ring the letter "N" (for network), "N-M" "E" (for noncommercial educational), rms, see page (iv) of the general instr-	translator stations and low power tele of (1) stations carried only on a part-tim he carriage of certain network program 51(e)(2) and (4))]; and (2) certain static arried by your cable system on a subs the Special Statement and Program Lo ed both on a substitute basis and also of , see page (v) of the general instruction program services such as HBO, ESPN e-air designation. For example, report evision station for broadcasting over th station, an independent station, or a n (for network multicast), "I" (for indepen or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is the community with which the station is	ne basis under ns [sections ons carried on a stitute program bg)—if the on some other ns. J, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION

EGAL NAME OF	F OWNER OF C	ABLE SY	/STEM:					SYSTEM I
MCC Iowa, L	LC (Waver	ly, IA)						42
	t every radio s	tation ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G	it is carried by monitoring, to prmation about rm. dentify the call state whether to the radio stat this by placing Sive the station	y the sys be recei t the Co sign of e he static ion's sig g a checl n's locati	I-Band FM Carriage: Under the whenever it is received a ved at the headend, with the pyright Office regulations on each station carried. on is AM or FM. nal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	at the system's he system's FM ante this point, see pa sed by the cable s he station is licen	adend, and (2 enna, during o ge (v) of the g system as a so sed by the FC	2) it can œrtain s general i eparate	be expected, tated intervals. nstructions in the. and discrete	Primary Transmitters Radio
		0/5				0.15		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	+ +							

Accounting Perio	od: 2019/1					F	ORM SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				SYSTEM ID#
Name	MCC Iowa, LLC (Wave	rly, IA)					4268
	SUBSTITUTE CARRIAGE	E: SPECIA			G		
	In General: In space I, identi		-		-	ion that your cable su	stem carried on a
•	substitute basis during the a						
Substitute	explanation of the programm						
Carriage:	1. SPECIAL STATEMENT		NING SUBST	TITUTE CARRIAGE			
Special	 During the accounting period 	od, did you	r cable system	carry, on a substitute basi	s, any nonne	twork telev <u>ision</u> prog	ram
Statement and Program Log	broadcast by a distant stat	tion?				YES	× NO
Frogram Log	Note: If your answer is "No'	loovo tho	root of this pag	o block. If your onewer is	"Voo " vou mi	-	
		, leave the	rest of this pag	e Diarik. Il your answer is	res, you mu	ist complete the prog	Jiani
	log in block 2. 2. LOG OF SUBSTITUTE		Me				
	In General: List each subst			te line. Use abbreviations	wherever pos	sible if their meaning	n is
	clear. If you need more spa						910
				sion program ("substitute			
	period, was broadcast by a						
	under certain FCC rules, reg Do not use general categori	guiations, o es like "mo	vies" or "baske	s. See page (v) of the gene thall " List specific program	n titles for example	ample "I Love Lucy"	or
	"NBA Basketball: 76ers vs.			List specific program			
				r "Yes." Otherwise enter "N			
				sting the substitute progra		need by the FCC or	in
	the case of Mexican or Can			e community to which the			IN
				tem carried the substitute			nonth
	first. Example: for May 7 giv	e "5/7."	, , , , , , , , , , , , , , , , , , ,		0		
				gram was carried by your			ately
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carrie	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. should be	
		er "R" if the	listed program	was substituted for progra	imming that y	our system was requ	lired
	to delete under FCC rules a	nd regulation	ons in effect du	ring the accounting period	; enter the let	ter "P" if the listed pro	
	was substituted for program	ming that y	our system wa	s permitted to delete unde	r FCC rules a	nd regulations in	
	effect on October 19, 1976.						
					WHE	N SUBSTITUTE	
	s	UBSTITUT	E PROGRAM	1		AGE OCCURRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION
						_	
					•		
						_	
						_	
						_	

Accounting Period:	2019/1			FORM S	6A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:			Ş	SYSTEM ID#
	MCC Iowa, LLC (Waverly, IA)				4268
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file a all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explanat 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	system's s ion of how	secondary trans to compute this	mission servi s amount, see \$ 35	ce
	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 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions located in the paper SA1-2 form for more) but less tl informatio	han \$527,600 on.	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137				
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalt accounting period is \$52.00	y fee that y	ou must pay for	this six-month	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lin	nes 1 and 2			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	SS (but m	ore than \$137,	100)	
	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	3,800 (but	less than \$527	,600)	
	1. Enter the amount of gross receipts from space K	\$	357,227.56		
	2. Base amount under statutory formula	\$	263,800.00		
	- 3. Subtract line 2 from line 1	\$	93,427.56		
	- 4. Multiply line 3 by .01		\$	934.28	
	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 .		\$	2,253.28
	FILING FEE AND TOTAL REMITTANCE DU	IE			
		-			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	2,253.28	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations) .		\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	2,273.28
	Important: Your remittance must be in the form of an electronic payr See page i of the general instructions in the paper SA1		-		ghts!

Accounting Period:	2019/1				FORM SA1-2	2E. PAGE 7
Name		OWNER OF CABLE SYSTEM: C (Waverly, IA)			SYS	STEM ID: 4268
M Channels	to its subscriber 1. Enter the tota system carried	s, and (2) the cable system's t I number of channels on which	total numbe h the cable	on which the cable system carried television broadca r of activated channels during the accounting period.	st stations	
		cable system carried television		stations	62	
N Individual to Be Contacted		D BE CONTACTED IF FURTH about this statement of accourt		MATION IS NEEDED (Identify an individual to whom		
for Further Information	Name	Kenneth J. Kohrs			Telephone 845-443-2762	
	Address	One Mediacom Way (Number, street, rural route, apart	tment, or suite	number)		
		Mediacom Park, NY (City, town, state, zip)	10918			
	Email	Copyrights@m	ediacomcc	.com Fax (optional)		
0				fied and signed in accordance with Copyright Office r	egulations)	
Certification		ed, hereby certify that (Check o er other than corporation or p	-	one, of the boxes.) I am the owner of the cable system as identified in line	1 of space B; or	
	in	line 1 of space B and that the c	owner is not a	tnership) I am the duly authorized agent of the owner of a corporation or partnership; or on) or a partner (if a partnership) of the legal entity iden		
	I have examine	line 1 of space B. d the statement of account and te, and correct to the best of my	hereby decla	are under penalty of law that all statements of fact conta information, and belief, and are made in good faith.		
			Enter an el	/S/ Kenneth J. Kohrs lectronic signature on the line above to certify this statem ature using an "/s/ signature" (e.g., /s/ John Smith)	ent.	
		Typed or printed	d name:	Kenneth J. Kohrs		
		Title: (Title of o		esident, Financial Reporting		
		Date:		08/13/2019)	

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

inting Period: 2019/1	FORM SA1-2E. PAGE
NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
lowa, LLC (Waverly, IA)	420
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	P Special Statement Concerning Gross Receipts Exclusio
X NO YES. Enter the total here and list the satellite carrier(s) below. \$	
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
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