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

Return completed workbook FOR COPYRIGHT OFFICE USE ONLY by email to: STATEMENT OF ACCOUNT for Secondary Transmissions by DATE RECEIVED AMOUNT coplicsoa@loc.gov Cable Systems (Short Form) \$ For additional information, contact the U.S. Copyright General instructions are located Office Licensing Division at: 8-31-19 Tel: (202) 707-8150 in the first tab of this workbook ALLOCATION NUMBER

Α	ACCC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		Barcode Data Filing Period (optional - see instructions)	
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.	63690
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		Google Fiber California, LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		(Number, street, rural route, apartment, or suite number)	
		Mountain View, CA 94043 (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 us already appear in space B. In line 2, give the mailing address of the system, if different from the address given in	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		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 Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Google Fiber California, LLC	63690
D	Instructions: List each separate community served by the cable system. A "ca "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future fil Note: Entities and properties such as hotels, apartments, condominiums, or a	rated communities within unincorporated areas and including single, at you list will serve as a form of system identification hereafter known lings.
Served	identified city.	
	CITY OR TOWN	STATE
First	Irvine	California
Community	Newport Beach	California
	Tustin	California
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA						FORM SA1	TEM IC
Name							313	6369
	Google Fiber California,	LLC						
Е	SECONDARY TRANSMISSION	SERVICE: SU	BSCRIBERS /	ND RATES				
E	In General: The information in s							
Secondary	system, that is, the retransmission about other services (including p							
Transmission	last day of the accounting period							
Service: Sub-	Number of Subscribers: Both					ble system	, broken	
scribers and	down by categories of secondary							
Rates	each category by counting the nu						charged	
	separately for the particular serv Rate: Give the standard rate c						e and the	
	unit in which it is generally billed							
	category, but do not include disc							
	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							
	first set" and would be counted of							
	Block 2: If your cable system					e different fr	rom those	
	printed in block 1 (for example, t							
	with the number of subscribers a	ind rates, in the	right-hand blo	ck. A two- or three	ee-word descript	tion of the s	ervice is	
	sufficient.	DCK 1				BLOC	()	
		NO. OF				BLUUR	NO. OF	[
	CATEGORY OF SERVICE	SUBSCRIBE	ERS RA	re ca	TEGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential:							
	Service to first set		719 \$2	ō/mo				
	 Service to additional set(s) 							
	 FM radio (if separate rate) 							
	Motel, hotel							
	Commercial							
	Converter							
	Residential							
	Non-residential							
				DATES				
_	SERVICES OTHER THAN SEC In General: Space F calls for rat				all your cable sve	stem's serv	ices that were	
F	not covered in space E, that is, the	•	,	•	• •			
	service for a single fee. There ar							
Services	furnished at cost or (2) services							
Other Than	amount of the charge and the un		usually billed. I	f any rates are c	harged on a vari	iable per-pr	ogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rat		ne cable system	n for each of the	annlicable servi	ces listed		
Rates	Block 2: List any services that						were not	
	listed in block 1 and for which a							
	brief (two- or three-word) descrip	tion and includ	e the rate for e	ach.				
		BLOO	CK 1				BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEGORY C	F SERVICE	RATE	CATEG	ORY OF SERVICE	RAT
			Installation: N	on-residential				
	Continuing Services:					Video d	on demand	F
			 Motel, hote 					
	Continuing Services:	PP	 Motel, hote Commercial 					
	Continuing Services: • Pay cable		-					
	Continuing Services: • Pay cable • Pay cable—add'l channel		Commercia Pay cable					
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection		Commercia Pay cable	al add'l channel				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection		 Commercia Pay cable Pay cable- 	al add'l channel tion				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential		Commercia Pay cable Pay cable Fire protect	al add'l channel tion tection				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set		 Commercia Pay cable Pay cable Fire protect Burglar protect 	al add'l channel tion tection s:				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)		Commercia Pay cable Pay cable Pay cable- Fire protect Burglar pro Other service	al add'l channel tion tection s :				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)		Commercia Pay cable Pay cable- Fire protect Burglar pro Other service Reconnect	al add'l channel tion tection s:				

	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:			SYSTEM
Name	Google Fiber Californ	nia, LLC			63
	PRIMARY TRANSMITTERS:	•			
G Primary ransmitters: Television	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, an 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 information Column 1: List each station multicast stream associated "WETA-2" as the same on the Column 2: Give the channel of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	also in space I, if the station was carrie on concerning substitute basis stations n's call sign. <i>Do not</i> report origination d with a station according to its over-th	pt (1) stations carried only on a part- the carriage of certain network progr .61(e)(2) and (4))]; and (2) certain state carried by your cable system on a su (the Special Statement and Program ed both on a substitute basis and als s, see page (v) of the general instruct program services such as HBO, ES ne-air designation. For example, rep levision station for broadcasting over k station, an independent station, or a ' (for network multicast), "I" (for indep or "E-M" (for noncommercial educat ructions in the paper SA1-2 form. st the community to which the station	time basis under ams [sections ations carried on a bstitute program Log)—if the o on some other tions. PN, etc. Identify each ort multistream the air in its community a noncommercial bendent), "I-M" ional multicast).	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION	N OF STATION
	KABCDT	7	N	LOS ANGELES, CA	
	KABCDT2	7.2	N-M	LOS ANGELES, CA	
	KABCDT2	7.3	N-M	LOS ANGELES, CA	
	KAZADT	22		LOS ANGELES, CA	
	KBEHDT	42		LOS ANGELES, CA	
	KCALDT	9	N	LOS ANGELES, CA	
	KCBSDT	31	N N	LOS ANGELES, CA	
	KCBSDT2	31.2	N-M	LOS ANGELES, CA	
		28	E		
	KCETDT			LOS ANGELES, CA	
	КСОРДТ	13	N	LOS ANGELES, CA	
	KCOPDT KCOPDT2	13 13.2	N N-M	LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3	13 13.2 13.3	N N-M N-M	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4	13 13.2 13.3 13.4	N N-M N-M N-M	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT	13 13.2 13.3 13.4 12	N N-M N-M I	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA	<u> </u>
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT	13 13.2 13.3 13.4 12 29	N N-M N-M I I N	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2	13 13.2 13.3 13.4 12 29 29.2	N N-M N-M I N N-M	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3	13 13.2 13.3 13.4 12 29 29.2 29.2 29.3	N N-M N-M I N-M N-M N-M N-M	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3 KFTRDT4	13 13.2 13.3 13.4 12 29 29.2 29.2 29.3 29.4	N N-M N-M I N-M N-M N-M N-M	LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3 KFTRDT4 KILMDT	13 13.2 13.3 13.4 12 29 29.2 29.2 29.3 29.3 29.4 29.4 24	N N-M N-M I N-M N-M N-M N-M I I	LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3 KFTRDT4 KILMDT KJLADT	13 13.2 13.3 13.4 12 29 29.2 29.2 29.3 29.4 29.4 24 51	N N-M N-M I N-M N-M N-M N-M I I I	LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3 KFTRDT4 KILMDT KJLADT KLCSDT	13 13.2 13.3 13.4 12 29 29.2 29.3 29.4 24 51 28	N N-M N-M I N-M N-M N-M N-M I I I I E	LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3 KFTRDT4 KILMDT KJLADT KLCSDT2	13 13.2 13.3 13.4 12 29 29.2 29.3 29.4 24 51 28 28.2	N N-M N-M I N-M N-M N-M N-M I I I E E	LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3 KFTRDT4 KILMDT KJLADT KLCSDT2 KLCSDT3	13 13.2 13.3 13.4 12 29 29.2 29.3 29.4 24 51 28	N N-M N-M I N-M I N-M N-M I I I I I E E E-M E-M	LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3 KFTRDT4 KILMDT KJLADT KLCSDT2	13 13.2 13.3 13.4 12 29 29.2 29.3 29.4 24 51 28 28.2	N N-M N-M I N-M N-M N-M N-M I I I E E	LOS ANGELES, CA LOS ANGELES, CA	
	KCOPDT KCOPDT2 KCOPDT3 KCOPDT4 KDOCDT KFTRDT KFTRDT2 KFTRDT3 KFTRDT4 KILMDT KJLADT KLCSDT2 KLCSDT3	13 13.2 13.3 13.4 12 29 29.2 29.2 29.3 29.4 51 28 28.2 28.3	N N-M N-M I N-M I N-M N-M I I I I I E E E-M E-M	LOS ANGELES, CA LOS ANGELES, CA	

nting Period:	-			FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF			SYSTEM I
	Google Fiber Californ	•		636
	PRIMARY TRANSMITTERS:			· · · · · · ·
G		entify every television station (including m during the accounting period, <i>except</i>		
	FCC rules and regulations i	in effect on June 24, 1981, permitting th	ne carriage of certain network progra	ms [sections
ary itters:	substitute program basis, a	e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph.		
ision		: With respect to any distant stations ca ules, regulations, or authorizations:	arried by your cable system on a sub	stitute program
	• Do not list the station here	e in space G—but do list it in space I (th	he Special Statement and Program L	.og)—if the
	 station was carried only on List the station here, and a 	a substitute basis. also in space I, if the station was carried	d both on a substitute basis and also	on some other
	basis. For further information	on concerning substitute basis stations,	see page (v) of the general instruction	ons.
		n's call sign. <i>Do not</i> report origination p d with a station according to its over-the		
	"WETA-2" as the same on t	the form. el number the FCC assigned to the tele	wision station for broadcasting over t	the air in its community
	of license. For example, W	RC is channel 4 in Washington, D.C.	0	
		n case whether the station is a network a ering the letter "N" (for network), "N-M" (•	
	(for independent multicast),	, "E" (for noncommercial educational), c	or "E-M" (for noncommercial education	
		erms, see page (iv) of the general instru n of each station. For U.S. stations, list		is licensed by the
	FCC. For Mexican or Cana	dian stations, if any, give the name of the	he community with which the station	is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
Necessary	KNBCDT2	36.2	N-M	LOS ANGELES, CA
	KOCEDT	18	E	LOS ANGELES, CA
	KOCEDT2	18.2	E-M	LOS ANGELES, CA
	KOCEDT4	18.4	E-M	LOS ANGELES, CA
	KPXNDT	24	I	LOS ANGELES, CA
	KPXNDT2	24.2	I-M	LOS ANGELES, CA
		-		LOS ANGELES, CA
	KPXNDT3	24.3	I-M	
				LOS ANGELES, CA
	KRCADT	7	I-M N I	LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT	7 18	N I	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2	7 18 18.2	N I I-M	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9	7 18 18.2 18.9	N I I-M I-M	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT	7 18 18.2 18.9 33	N I I-M I-M	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT KTLADT	7 18 18.2 18.9 33 31	N I I-M I-M I N	LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT KTLADT KTLADT2	7 18 18.2 18.9 33 31 31.2	N I I-M I-M I N N N-M	LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT KTLADT KTLADT2 KTLADT3	7 18 18.2 18.9 33 31 31.2 31.3	N I I-M I-M I N N N-M N-M	LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT KTLADT KTLADT2 KTLADT3 KTTVDT	7 18 18.2 18.9 33 31 31.2 31.3 11	N I I-M I-M I N N N-M N-M N-M N	LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT KTLADT KTLADT2 KTLADT3	7 18 18.2 18.9 33 31 31.2 31.3	N I I-M I-M I N N N-M N-M	LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT KTLADT KTLADT2 KTLADT3 KTTVDT	7 18 18.2 18.9 33 31 31.2 31.3 11	N I I-M I-M I N N N-M N-M N-M N	LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT KTLADT KTLADT2 KTLADT3 KTTVDT KVEADT	7 18 18.2 18.9 33 31 31.2 31.3 11 25	N I I-M I-M I N N N-M N-M N N N N	LOS ANGELES, CA LOS ANGELES, CA
	KRCADT KSCIDT KSCIDT2 KSCIDT9 KTBNDT KTLADT KTLADT2 KTLADT3 KTTVDT KVEADT KVEADT2	7 18 18.2 18.9 33 31 31.2 31.3 11 25 25.2	N I I-M I-M I N N N-M N-M N N N N	LOS ANGELES, CA LOS ANGELES, CA

EGAL NAME OF	OWNER OF C	CABLE SY	/STEM:					SYSTEM I
Google Fibe	r California	a, LLC						636
	t every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of i For detailed info paper SA1-2 for Column 1: Io Column 2: S	it is carried by monitoring, to prmation abou m. lentify the call tate whether t	y the sys be recei it the Co sign of e the statio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on t each station carried. on is AM or FM. nal was electronically process	t the system's he system's FM ante his point, see pa	adend, and (2 enna, during co ge (v) of the g	?) it can ertain st eneral i	be expected, ated intervals. nstructions in the.	Primary Transmitters Radio
ignal, indicate Column 4: G	this by placing live the station	g a checl n's locati	was electronically process mark in the "S/D" column. on (the community to which the the community with which the	e station is licen	sed by the FC			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Name ECAL MARC OF CONCR OF CALLE SYSTEM: SYSTEM IDUE G3689 June SUBSTTUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space 1, identify every noneknow kenken program, broadcast by a disker staton, that your cable system cannot on a substative base based on the programming that must be induced in this tog, see page (v) of the general infractions in the page SAL-2 form. Substational Tele programming that must be induced in this tog, see page (v) of the general infractions in the page SAL-2 form. Substational telephone status and the program tog the programming that your cable system status and the programming that your cable system status and the programming that status in the page SAL-2 form. Value Special STATEMENT CONCENTIONE NOR SUBSTITUTE CARRIAGE Yes. 'you must complete the program tog the control in program is special to the programming that status in the page SAL-2 form. Yes. 'you must complete the program tog the control in program is table. Value Hyper Substational Status table program is a special to the status in the information. Column 1: Give the call status table. Yes. 'you must complete the program tog the control in program is table. Column 1: Give the call status is the control in program. Column 1: Give the call status table. Column 1: Give	Accounting Perio	od: 2019/1						FORM SA1-2E. PAGE 5.	
Cooper Fuber Calinomia, LLC Cooper Fuber Calinomia, LLC Substitute Carriage: Substitute Carriage: Special Statement and Program Log SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space 1, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE Outing the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need for every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substitute for the programming of another station. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: "For vs. Bulls." Column 1: Give the title eversion broadcasting the substitute program. Column 2: If the program w	Nama	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					
In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE *Program Log *During the accounting period, idd your cable system carry, on a substitute basis, any nonnetwork television program *Dradcast by a distant station? *West *Our answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station on on use general categories like "movies" or "back Reball." Cfers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the end station broadcasting the substitute program. Column 3: Give the call sign of the substitute program. Column 3: Give the call sign of the community with which the station is ident	Name	Google Fiber Californi	a, LLC					63690	
Substitute Carriage: Special statement and Program Lo I.SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE - During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball." General: State the call sign of the station broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian station's location (the community to which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 60:115 p.m. to 6:28:30		SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
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Accounting Period:	2019/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Google Fiber California, LLC	SI	STEM ID# 63690
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	mission service	50
Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	this 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,	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 \$263,800 (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	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
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informat		nts!

Accounting Period:	2019/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Google Fiber California, LLC	SYSTEM ID# 63690
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on broadcast stations on which the cable system carried television broadcast stations and nonbroadcast services	48 338
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
Be Contacted for Further Information	Name XIXi Tian Telephone Address 1600 Amphitheatre Parkway Image: Comparison of the street, rural route, apartment, or suite number) Mountain View, CA 94043 (City, town, state, zip)	(650) 253-0000
	Email access-compliance@google.com Fax (optional) CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
O Certification	 I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy in line 1 of space B and that the owner is not a corporation or partnership; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as own in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	vstem as identified
	X /s/ Fleur Knowsley Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	
	Typed or printed name: Fleur Knowsley Title: Manager - Google Fiber California, LLC (Title of official position held in corporation or partnership)	
	Date: 08/30/2018	

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 telephol 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 fling, a determination that would be made by a court of lav

ounting Period: 2019/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
ogle Fiber California, LLC	6369
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 lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the bas service of providing secondary transmissions of primary broadcast transmitters, the system shall not inclus scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 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. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmismade by satellite carriers to satellite dish owners? NO	asic de sub- 19." Concerning Gross Receipts Exclusio
YES. Enter the total here and list the satellite carrier(s) below	
Name Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this workshoot for those revelty neumonts submitted as a result of a late neumont or underna	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpa	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 f	
	form.
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 f	form.
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 f Line 1 Enter the amount of late payment or underpayment	
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