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 COPYRIGHT	OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by	DATE RECEIVED	AMOUNT	
Cable Systems (Short Form) General instructions are located	08/28/20	\$	<u>coplicsoa@loc.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at:
in the first tab of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
	2020/1 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 (Traer, 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	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	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 Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	MCC Iowa, LLC (Traer, IA)	1701
	Instructions: List each separate community served by the cable system. A "commun	
	"a separate and distinct community or municipal entity (including unincorporated co	
D	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you li	
	as the "first community." Please use it as the first community on all future filings.	,
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	nome parks should be reported in parentheses below the
Area	identified city.	ione parto should be reported in parentileses below the
Served		
	CITY OR TOWN	STATE
First	Traer	IA
Community	Dysart	A
	TAMA (Uo Dysart)	IA
	REINBECK	
d Rows as Necessary		A
	Laporte	AI
		01 011101010101010101010101010101010101
		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

	LEGAL NAME OF OWNER OF C							FORM SA1	-2E. PAGE
Name	MCC Iowa, LLC (Traer,		•					515	170
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	, , ,			,			5	
Service: Sub-	Number of Subscribers: Both	•					,		
scribers and Rates	down by categories of secondar each category by counting the n					•			
Nates	separately for the particular serv		0	•••		•		charged	
	Rate: Give the standard rate of	-					-		
	unit in which it is generally billed				any standa	rd rate variatior	ns within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				ries of sec	ondary transmi	ssion servi	ce that cable	
	systems most commonly provide			-					
	that applies to your system. Not			0		0			
	categories, that person or entity				• •	•••	•		
	subscriber who pays extra for ca first set" and would be counted of					d in the count u	nder "Servi	ce to the	
	Block 2: If your cable system	0			· · ·	service that are	e different f	rom those	
	printed in block 1 (for example, t					,		, U	
	with the number of subscribers a	and rates, in th	e right-	hand block. A t	wo- or thre	e-word descrip	tion of the s	service is	
	sufficient.	DCK 1					BLOCK	(2	
		NO. OF		DATE	0.4.7			NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CATE	EGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Service to first set		441	29.99-74.49					
	Service to additional set(s)			23.33-14.43					
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		0	29.99-74.49					
	Converter		Ĭ						
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC								
F	In General: Space F calls for ra	•	,		•	• •			
•	not covered in space E, that is, t service for a single fee. There a								
Services	furnished at cost or (2) services	•			•				
Other Than	amount of the charge and the ur		usuall	y billed. If any r	ates are ch	narged on a var	iable per-p	rogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rate		the cah	le system for e	ach of the	annlicable servi	ces listed		
Rates	Block 2: List any services that							were not	
	listed in block 1 and for which a		,		ished. List	these other ser	vices in the	e form of a	
	brief (two- or three-word) descrip	otion and inclue	de the I	rate for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATE	GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services:			ation: Non-res	idential			.	
	• Pay cable	PP		otel, hotel			Family	Cable	84.
	Pay cable—add'l channel Fire protection	PP	_	ommercial					
	Fire protection			iy cable	oprol				
	•Burglar protection			y cable-add'l ch	annei				
		99.99		e protection					
	Additional set(s)	99.99 15.00-49.00		• •					
	• FM radio (if separate rate)	13.00-49.00		services:		49.00			
	• Converter	10.50		sconnect		+J.UU			
		10.00							
	Converter		•			15 00-49 00			
				utlet relocation		15.00-49.00			

				FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF			5151EM1
	MCC Iowa, LLC (Traer	· ·		
G Primary Transmitters: Television	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 • Do not list the station here station was carried only on a • List the station here, and al basis. For further information Column 1: List each station" multicast stream associated "WETA-2" as the same on th Column 2: Give the channel of license. For example, WF Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	entify every television station (including m during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting t e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations c ules, regulations, or authorizations: e in space G—but do list it in space I (t a substitute basis. 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-the the form. el number the FCC assigned to the tele RC is channel 4 in Washington, D.C. case whether the station is a network wring the letter "N" (for network), "N-M" "E" (for noncommercial educational), or ms, see page (iv) of the general instru- n of each station. For U.S. stations, list	g translator stations and low power tele of (1) stations carried only on a part-tin the carriage of certain network program 61(e)(2) and (4))]; and (2) certain static carried by your cable system on a subs (the Special Statement and Program Lo ed both on a substitute basis and also s, see page (v) of the general instructio program services such as HBO, ESPN ne-air designation. For example, report levision station for broadcasting over th c station, an independent station, or a r (for network multicast), "I" (for indeper or "E-M" (for noncommercial education ructions in the paper SA1-2 form. st the community to which the station is the community with which the station is	me basis under ms [sections ions carried on a stitute program og)—if the on some other ons. N, etc. Identify each rt multistream he air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KCRG/KCRG ABC (HD)	9	N	Cedar Rapids, IA
	KCRG/KCRG (HD)-DT2 MyNet	9.2	I-M	Cedar Rapids, IA
Rows as Necessary	KCRG-DT3 Antenna TV	9.3	I-M	Cedar Rapids, IA
	KCRG-DT4 H&I	9.4	I-M	Cedar Rapids, IA
	KCRG-DT5 Start TV	9.5	I-M	Cedar Rapids, IA
	KCRG-DT6 Circle	9.6	I-M	Cedar Rapids, IA
	KDIN/KDIN PBS (HD)		E	Des Moines, IA
	KDIN/KDIN PBS (HD)	11.2	E-M	Des Moines, IA Des Moines, IA
	KDIN-DT3 World	11.2	E-M	Des Moines, IA Des Moines, IA
	KDIN-DT4 Create	11.3	E-M	Des Moines, IA Des Moines, IA
			-	
	KFXA/KFXA FOX(HD)	27	LM	Cedar Rapids, IA
	KFXA-DT2 Charge!	27.2	I-M	Cedar Rapids, IA
	KFXA-DT3 TBD	27.3	I-M	Cedar Rapids, IA
	KFXA-DT4 Stadium	27.4	I-M	Cedar Rapids, IA
			1	DUBUQUE, IA
	KGAN/KGAN CBS (HD)	51	N	Cedar Rapids, IA
	KGAN-DT2 getTV	51.2	I-M	Cedar Rapids, IA
	KGAN-DT3 COMET	51.3	I-M	Cedar Rapids, IA
	KGAN-DT4 DABL	51.4	I-M	Cedar Rapids, IA
	KPXR/KPXR ION (HD)	47	1	Cedar Rapids, IA
	KWKB/KWKB ESCAPE (HD)	25	I	Iowa City, IA
	KWKB-DT2 Laff	25.2	I-M	Iowa City, IA
	KWKB-DT2 Laff KWKB-DT3 Grit	25.2 25.3	I-M	lowa City, IA Iowa City, IA

				evete	
Name	LEGAL NAME OF OWNER OF			SYSTE	יייי: 17(
	MCC Iowa, LLC (Traer	, IA)			17
	PRIMARY TRANSMITTERS:	TELEVISION			
0		ntify every television station (including t	•	,	
G		n during the accounting period, <i>except</i>			
Primary	0	n effect on June 24, 1981, permitting the)(2) and (4), or 76.63 (referring to 76.61	0 1 0		
ransmitters:		explained in the next paragraph.	I(e)(2) dia (4))], dia (2) contain 3		
Television		With respect to any distant stations car	rried by your cable system on a s	ubstitute program	
		es, regulations, or authorizations:			
		in space G—but do list it in space I (the	e Special Statement and Progran	n Log)—if the	
	station was carried only on a	a substitute basis. Iso in space I, if the station was carried	both on a substitute basis and a	so on some other	
		n concerning substitute basis stations, s			
		's call sign. <i>Do not</i> report origination pr			
		with a station according to its over-the-	-air designation. For example, re	port multistream	
	"WETA-2" as the same on the	ne form. I number the FCC assigned to the telev	vision station for broadcasting over	or the cir in its community	
		RC is channel 4 in Washington, D.C.	ASION Station for producesting ove	a the air in its community	
	Column 3: Indicate in each	case whether the station is a network s	station, an independent station, or	a noncommercial	
	educational station, by enter	ing the letter "N" (for network), "N-M" (for	or network multicast), "I" (for inde	pendent), "I-M"	
	educational station, by enter (for independent multicast),	ing the letter "N" (for network), "N-M" (for "E" (for noncommercial educational), or	or network multicast), "I" (for inde r "E-M" (for noncommercial educa	pendent), "I-M"	
	educational station, by enter (for independent multicast), For the meaning of these ter	ing the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), or ms, see page (iv) of the general instruc	or network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form.	pendent), "I-M" tional multicast).	
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	ing the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), or ms, see page (iv) of the general instruc a of each station. For U.S. stations, list t	or network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static	pendent), "I-M" ational multicast). n is licensed by the	
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	ing the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), or ms, see page (iv) of the general instruc	or network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static	pendent), "I-M" ational multicast). n is licensed by the	
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	ing the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), or ms, see page (iv) of the general instruc a of each station. For U.S. stations, list t	or network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static	pendent), "I-M" ational multicast). n is licensed by the	
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	ing the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), or ms, see page (iv) of the general instruc a of each station. For U.S. stations, list t	or network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static	pendent), "I-M" ational multicast). n is licensed by the	
	educational station, by enter (for independent multicast), ' For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad	ing the letter "N" (for network), "N-M" (fo "E" (for noncommercial educational), or rms, see page (iv) of the general instruc n of each station. For U.S. stations, list t lian stations, if any, give the name of the	or network multicast), "I" (for inder r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static e community with which the static	pendent), "I-M" ational multicast). In is licensed by the on is identified. 4. LOCATION OF STATION	
	educational station, by enter (for independent multicast), ' For the meaning of these ter Column 4 : Give the location FCC. For Mexican or Canad 1. CALL SIGN KWKB-DT5 Light TV	ing the letter "N" (for network), "N-M" (fe "E" (for noncommercial educational), or ms, see page (iv) of the general instruct of each station. For U.S. stations, list t lian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 25.5	or network multicast), "I" (for inder r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static e community with which the static 3. TYPE OF STATION	pendent), "I-M" tional multicast). In is licensed by the on is identified. 4. LOCATION OF STATION	
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN KWKB-DT5 Light TV KWKB-DT6 Quest	ing the letter "N" (for network), "N-M" (fe "E" (for noncommercial educational), or rms, see page (iv) of the general instruc- of each station. For U.S. stations, list t lian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 25.5 25.6	ior network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static e community with which the static 3. TYPE OF STATION I-M I-M	pendent), "I-M" ational multicast). In is licensed by the on is identified. 4. LOCATION OF STATION Iowa City, IA Iowa City, IA	
	educational station, by enter (for independent multicast), ' For the meaning of these ter Column 4 : Give the location FCC. For Mexican or Canad 1. CALL SIGN KWKB-DT5 Light TV	ing the letter "N" (for network), "N-M" (fe "E" (for noncommercial educational), or ms, see page (iv) of the general instruct of each station. For U.S. stations, list t lian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 25.5	or network multicast), "I" (for inder r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static e community with which the static 3. TYPE OF STATION	pendent), "I-M" tional multicast). In is licensed by the on is identified. 4. LOCATION OF STATION	
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN KWKB-DT5 Light TV KWKB-DT6 Quest	ing the letter "N" (for network), "N-M" (fe "E" (for noncommercial educational), or rms, see page (iv) of the general instruc- of each station. For U.S. stations, list t lian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 25.5 25.6	ior network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the static e community with which the static 3. TYPE OF STATION I-M I-M	pendent), "I-M" ational multicast). In is licensed by the on is identified. 4. LOCATION OF STATION Iowa City, IA Iowa City, IA	
	educational station, by enter (for independent multicast), ' For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN KWKB-DT5 Light TV KWKB-DT6 Quest KWWL/KWWL NBC (HD)	ing the letter "N" (for network), "N-M" (fe "E" (for noncommercial educational), or rms, see page (iv) of the general instruc- n of each station. For U.S. stations, list t lian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 25.5 25.6 7	or network multicast), "I" (for indee r "E-M" (for noncommercial educa- ctions in the paper SA1-2 form. the community to which the static e community with which the static 3. TYPE OF STATION I-M I-M N	pendent), "I-M" ational multicast). In is licensed by the on is identified. 4. LOCATION OF STATION lowa City, IA lowa City, IA Waterloo, IA	
	educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location FCC. For Mexican or Canad 1. CALL SIGN KWKB-DT5 Light TV KWKB-DT5 Light TV KWKB-DT6 Quest KWWL/KWWL NBC (HD)	ing the letter "N" (for network), "N-M" (f "E" (for noncommercial educational), or rms, see page (iv) of the general instruc- of each station. For U.S. stations, list t lian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 25.5 25.6 7 7.2	ior network multicast), "I" (for inde r "E-M" (for noncommercial educa- ctions in the paper SA1-2 form. the community to which the static e community with which the static 3. TYPE OF STATION I-M I-M I-M	pendent), "I-M" ational multicast). In is licensed by the on is identified. A. LOCATION OF STATION Iowa City, IA Iowa City, IA Waterloo, IA Waterloo, IA	

egal name of NCC lowa, L			YSTEM:					SYSTEM I 17
	every radio s	station ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf isignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether t the radio stat this by placing vive the station	y the sys be recei t the Cc sign of e the static ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante his point, see pa ed by the cable s e station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	?) it can ertain st eneral i eparate	be expected, ated intervals. nstructions in the. and 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	od: 2020/1						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	MCC Iowa, LLC (Traer	, IA)						1701
	SUBSTITUTE CARRIAG				G			
I I	In General: In space I, ident	-	-			tion that you	r coblo ava	tom carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN				Ŭ			
Special	During the accounting per	-			sis anv noni	network telev	ision nroa	ram
Statement and		-	ui cabie syster	fically, on a substitute ba	515, any nom			
Program Log	broadcast by a distant sta	uon?					YES	× NO
	Note: If your answer is "No	", leave the	e rest of this pa	age blank. If your answer is	s "Yes," you ı	must comple	te the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI	E PROGRA	AMS					
	In General: List each subs				s wherever p	ossible, if the	eir meaning	g is
	clear. If you need more spa							
	period, was broadcast by a			vision program ("substitute				
	under certain FCC rules, re							
	Do not use general categor							
	"NBA Basketball: 76ers vs.	Bulls."						
				er "Yes." Otherwise enter				
				asting the substitute prog		oonood by th	a FCC ar	in
	the case of Mexican or Car			the community to which the community with which the				In
				stem carried the substitute			, with the n	nonth
	first. Example: for May 7 gi		, ,					
				ogram was carried by you				ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:01	:15 p.m. to 6	6:28:30 p.m.	should be	
	stated as "6:00–6:30 p.m."	er "R" if the	listed program	n was substituted for prog	ramming that	t vour systen	n was <i>rea</i> u	uired
	to delete under FCC rules							
	was substituted for program							-9.4
	effect on October 19, 1976							
						N SUBSTIT		7. REASON FOR
	5					AGE OCCU 6. TI		DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM -	- TO	
							-	
						_		
						_		
					·			
						_	-	
						-	-	
						_		
							-	
						_		
1			I	I	1	I		1

Accounting Period:	2020/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	STEM ID#
Name	MCC Iowa, LLC (Traer, IA)		1701
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmi (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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.	ission service amount, see	3,149.84 ss receipts)
	COPYRIGHT ROYALTY FEE		
L 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 \$2 • 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 t accounting period is \$52.00	this six-mon	
	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		
	1. Base amount under statutory formula		
	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:	2020/1		FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Traer, IA)		SYSTEM ID# 1701
M Channels	CHANNELS Instructions: You must give (1) the number of channels of to its subscribers, and (2) the cable system's total number 1. Enter the total number of channels on which the cable system carried television broadcast stations	stations	40 62
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFOR we can contact about this statement of account.)		
for Further Information	Name Kenneth J. Kohrs Address One Mediacom Way		845-443-2782
	(Number, street, rural route, apartment, or suite Mediacom Park, NY 10918 (City, town, state, zip)	number)	
	Email Copyrights@mediacomcc	.com Fax (optional)	
O Certification	 I, the undersigned, hereby certify that (Check one, but only (Owner other than corporation or partnership) X (Agent of owner other than corporation or part in line 1 of space B and that the owner is not (Officer or partner) I am an officer (if a corporat in line 1 of space B. I have examined the statement of account and hereby dec are true, complete, and correct to the best of my knowledge [18 U.S.C., Section 1001(1986)] 	I am the owner of the cable system as identified in line 1 of space t tnership) I am the duly authorized agent of the owner of the cable s a corporation or partnership; or ion) or a partner (if a partnership) of the legal entity identified as ow lare under penalty of law that all statements of fact contained hereir	system as identified mer of the cable system
	Enter signa Typed or printed name:	ectronic signature on the line above to certify this statement. ture using an "/s/ signature" (e.g., /s/ John Smith) Kenneth J. Kohrs esident, Financial Reporting	
	(Title of official position Date:	held in corporation or partnership) 8/12/2020	

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

	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
C Iowa, LLC (Traer, IA)	170
 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? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing 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.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessmen
x	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessme
Line 2 Multiply line 1 by the interest rate* and enter the sum here - x	Interest Assessme
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