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

STATEM	FNT	OF ACCOUNT	FOR COPYRIGH	Return completed workbook by email to:		
for Seconda	ary Ti	ransmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov	
Cable Syste		(Short Form) s are located		\$	For additional information, contact the U.S. Copyright Office Licensing Division a	
in the first tab	of thi	s workbook	08/28/2020	ALLOCATION NUMBER	Tel: (202) 707-8150	
		OUNTING PERIOD COVEREI	BY THIS STATEMENT:	(YYYY/(Period))		
		2020/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31		
Accounting			Barcode Data Filing Period (option	al - see instructions)		
Period	_					
В		Instructions: Give the full legal name of the owner of corporate title of the subsidiary, not tha	,	ubsidiary of another corporation, give the f	full	
Owner		List any other name or names under while the state of the		of the cable system. on the last day of the accounting period sh	ould submit	
		a single statement of account and royalt			63657	
		Check here if this is the system's first fili	ng. If not, enter the system's ID num	ber assigned by the Licensing Division.	03037	
		LEGAL NAME OF OWNER/MAILIN	IG ADDRESS OF CABLE SYSTE	M		
		Google Fiber Georgia, LLC				
		BUSINESS NAME(S) OF OWNER C	F CABLE SYSTEM (IF DIFFERE	NT)		
		MAILING ADDRESS OF OWNER O	F CABLE SYSTEM			
		1600 Amphitheatre Parkw (Number, street, rural route, apartment, or suite	ay			
		Mountain View, CA 94043				
		(City, town, state, zip)				
С				identify the business and operation of the system, it different from the a		
System	1	IDENTIFICATION OF CABLE SYSTEM:				
		MAILING ADDRESS OF CABLE SYSTE	М:			
	2	(Number, street, rural route, apartment, or suite	number)			
			· /			
	1	(City, town, state, zip code)				
Privacy Act Notic	e: Sectio	on 111 of title 17 of the United States Code	authorizes the Copyright Offce to colle	ect the personally identifying information (PII) requested on this	

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	LEGAL NAME OF OWNER OF CABLE SYSTEM: Google Fiber Georgia, LLC
	Instructions: List each separate community served by the cable system. A "comm
П	rules: "a separate and distinct community or municipal entity (including unincorpo
U	including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first con
	identification hereafter known as the "first community." Please use it as the first
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobil
Served	identified city.
-	
First	Duluth, GA
Community	Atlanta Dunwoody
Add Rows as Necessary	Peachtree Corners Marietta
	Roswell
	Roswell Sondy Springs
	Sandy Springs
	Clayton County Cobb County
	Dokalb County
	Dekalb County Douglas County
	Eulton County
	Fulton County Gwinnett County
	Alpharetta

FORM SA1-2E. PAGE 1b.

SYSTEM ID# 63657

nity" is the same as a "community unit" as defined in FCC ated communities within unincorporated areas and munity that you list will serve as a form of system ommunity on all future filings. home parks should be reported in parentheses below the

STATE
GA
 GA

	LEGAL NAME OF OWNER OF	CABLE SYSTEI	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYST									
Name	Google Fiber Georgia,	LLC						636				
-	SECONDARY TRANSMISSIO											
E	In General: The information in											
Secondary	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											
ransmission	ast day of the accounting period (June 30 or December 31, as the case may be).											
Service: Sub-	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken											
scribers and Rates	down by categories of seconda each category by counting the											
Rales	separately for the particular ser						ons charged					
	Rate: Give the standard rate	charged for ea	ach category of serv	ce. Include	both the amou	nt of the cl						
	unit in which it is generally bille				dard rate variat	ons withir	a particular rate					
	category, but do not include dis Block 1: In the left-hand bloc	k in space E, t	the form lists the cat	ent. egories of s	econdary trans	mission se	ervice that cable					
	systems most commonly provid	le to their subs	scribers. Give the nu	mber of sul	bscribers and ra	te for eac	h listed category					
	that applies to your system. No											
	categories, that person or entity subscriber who pays extra for o											
	first set" and would be counted	once again ur	nder "Service to add	tional set(s)."							
	Block 2: If your cable system											
	printed in block 1 (for example, with the number of subscribers											
	sufficient.	and fates, in t	ne nght-hand block.	A 100- 01 1								
	BLO	DCK 1				BLOCK						
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		САТЕ	EGORY OF SEI		NO. OF SUBSCRIBERS	RAT				
	Residential:	SOBSCIUD					SUBSCIUBLINS					
	Service to first set		1,708 \$30/mo									
	Service to additional set(s)											
	• FM radio (if separate rate)							ļ				
	Motel, hotel											
	Commercial Converter											
	Residential											
	Non-residential											
								Î				
	SERVICES OTHER THAN SEC	-		-								
F	In General: Space F calls for random of covered in space E, that is,	`	,	•								
-	service for a single fee. There a											
Services	furnished at cost or (2) services	s or facilities fu	irnished to nonsubse	ribers. Rate	e information sh	ould inclu	de both the					
Other Than	amount of the charge and the u enter only the letters "PP" in the		is usually billed. If a	ny rates are	charged on a v	ariable pe	er-program basis,					
Secondary		ate charged by										
Secondary ansmissions:	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											
	Block 2: List any services that						the torm of a					
ansmissions:	Block 2: List any services that listed in block 1 and for which a	a separate cha	rge was made or es	ablished. L								
ransmissions:	Block 2: List any services that	a separate cha iption and incl	rge was made or es ude the rate for eacl	ablished. L								
ransmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descr	e separate cha iption and incl BLO	rge was made or es ude the rate for eacl CK 1	ablished. L n.	ist these other s	services in	BLOCK 2	PAT				
ansmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE	a separate cha iption and incl	rge was made or es ude the rate for eacl	ablished. L n. RVICE		services in		RAT				
ansmissions:	Block 2: List any services that listed in block 1 and for which a brief (two- or three-word) descr	e separate cha iption and incl BLO	rge was made or es ude the rate for each CK 1 CATEGORY OF SE	ablished. L n. RVICE	ist these other s	CATEGO	BLOCK 2					
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel	e separate cha iption and incl BLO	rge was made or es ude the rate for each CK 1 CATEGORY OF SE Installation: Non-r • Motel, hotel • Commercial	ablished. L n. RVICE	ist these other s	CATEGO	BLOCK 2 DRY OF SERVICE	RAT				
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection	e separate cha iption and incl BLO RATE	rge was made or es ude the rate for each CK 1 CATEGORY OF SE Installation: Non-r • Motel, hotel • Commercial • Pay cable	ablished. L n. RVICE esidential	ist these other s	CATEGO	BLOCK 2 DRY OF SERVICE					
ansmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection • Burglar protection	e separate cha iption and incl BLO RATE	rge was made or es ude the rate for each CK 1 CATEGORY OF SE Installation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable-add'l	ablished. L n. RVICE esidential	ist these other s	CATEGO	BLOCK 2 DRY OF SERVICE					
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection •Burglar protection Installation: Residential	e separate cha iption and incl BLO RATE	rge was made or es ude the rate for each CK 1 CATEGORY OF SE Installation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable • Pay cable-add'l • Fire protection	ablished. L n. ERVICE esidential channel	ist these other s	CATEGO	BLOCK 2 DRY OF SERVICE					
ansmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Fire protection • Burglar protection	e separate cha iption and incl BLO RATE	rge was made or es ude the rate for each CK 1 CATEGORY OF SE Installation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable-add'l	ablished. L n. ERVICE esidential channel	ist these other s	CATEGO	BLOCK 2 DRY OF SERVICE					
ansmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set	e separate cha iption and incl BLO RATE	rge was made or es ude the rate for each CK 1 CATEGORY OF SE Installation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable • Pay cable-add'I • Fire protection • Burglar protectio	ablished. L n. ERVICE esidential channel	ist these other s	CATEGO	BLOCK 2 DRY OF SERVICE					
ansmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	e separate cha iption and incl BLO RATE	rge was made or es ude the rate for each CK 1 CATEGORY OF SE Installation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable • Pay cable-add'l • Fire protection • Burglar protectio Other services:	ablished. L n. ERVICE esidential channel	ist these other s	CATEGO	BLOCK 2 DRY OF SERVICE					
ransmissions:	Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descr CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'I channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	e separate cha iption and incl BLO RATE	rge was made or es ude the rate for each CK 1 CATEGORY OF SE Installation: Non-r • Motel, hotel • Commercial • Pay cable • Pay cable • Pay cable-add'l • Fire protection • Burglar protectio Other services: • Reconnect	RVICE esidential channel	ist these other s	CATEGO	BLOCK 2 DRY OF SERVICE					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:						
Naille	Google Fiber Georgi	a, LLC					
	PRIMARY TRANSMITTERS: TELEVISION						
G	In General: In space G, identify every television station (including translator stations and low carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on						
Ŭ		in effect on June 24, 1981, permitting					
Primary Transmitters:		e)(2) and (4), or 76.63 (referring to 7	6.61(e)(2) and (4))]; and (2) certai				
Television		as explained in the next paragraph. s: With respect to any distant stations	s carried by your cable system on				
		ules, regulations, or authorizations: e in space G—but do list it in space l	(the Special Statement and Prog				
	station was carried only or	n a substitute basis.					
		also in space I, if the station was car on concerning substitute basis statio					
	Column 1: List each statio	on's call sign. <i>Do not</i> report originatio	n program services such as HBO				
	multicast stream associate "WETA-2" as the same on	ed with a station according to its over- the form.	the-air designation. For example				
	Column 2: Give the chann	nel number the FCC assigned to the t	-				
		VRC is channel 4 in Washington, D.C h case whether the station is a netwo					
	educational station, by ente	ering the letter "N" (for network), "N-N	//" (for network multicast), "I" (for i				
	(for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educ For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.						
	Column 4: Give the location of each station. For U.S. stations, list the community to which the stati						
			list the community to which the st				
		on of each station. For U.S. stations, adian stations, if any, give the name o	list the community to which the st				
			list the community to which the sta				
			list the community to which the sta				
	FCC. For Mexican or Cana	adian stations, if any, give the name o	list the community to which the sta of the community with which the st				
	FCC. For Mexican or Cana 1. CALL SIGN	adian stations, if any, give the name of 2. B'CAST CHANNEL NUMBER	list the community to which the sta of the community with which the st 3. TYPE OF STATION				
dd Rows as Necessary	FCC. For Mexican or Cana 1. CALL SIGN WAGADT WAGADT2	adian stations, if any, give the name of 2. B'CAST CHANNEL NUMBER 27.3	list the community to which the store of the community with which the				
dd Rows as Necessary	FCC. For Mexican or Cana 1. CALL SIGN WAGADT WAGADT2	2. B'CAST CHANNEL NUMBER 27.3 27.4	list the community to which the sta of the community with which the st 3. TYPE OF STATION N N-M				
ld Rows as Necessary	FCC. For Mexican or Cana 1. CALL SIGN WAGADT WAGADT2 WAGADT3	2. B'CAST CHANNEL NUMBER 27.3 27.4 27.5	list the community to which the store of the community with which the				
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WKTBCD4	23.3	N-M
WKTBCD5	23	N-M
WPBADT	21.3	E
WPCHDT	20.3	
WPXADT	31.3	I
WPXADT2	31.4	I-M
WPXADT3	31.5	I-M
WSBDT	32	N
WSBDT2	32.2	N-M
WSBDT3	32.3	N-M
WUPADT	36	I
WUPADT2	36.2	I-M
WUVGDT	18	N
WUVGDT2	18.2	N-M
WUVGDT3	18.3	N-M
WUVGDT4	18.4	N-M
WXIADT	10.3	Ν
WXIADT2	10.4	N-M
WXIADT3	10.5	N-M
WXIADT4	10.6	N-M

FORM SA1-2E. PAGE 3.

SYSTEM ID#

63657

elevision stations) time basis under rams [sections ations carried on a

ubstitute program

Log)—if the

so on some other xtions. PN, etc. Identify each ort multistream

r the air in its community

a noncommercial pendent), "I-M" tional multicast).

n is licensed by the n is identified.

4. LOCATION OF STATION

Atlanta, GA

Athens, GA

Monroe, GA

Norcross, GA

Norcross, GA

Norcross, GA
Norcross, GA
Atlanta, GA
Atlanta, GA
Rome, GA
Rome, GA
Rome, GA
Rome, GA
Rome, GA
Rome, GA
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Google Fibe	F OWNER OF er Georgia,							SYSTEM I 636
	t every radio	station o) carried on a separate and disc enerally receivable by your ca					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: Column 4: Colum	i it is carried b monitoring, to ormation abou rm. dentify the cal State whether f the radio sta this by placin Give the statio	by the sy be rece ut the C Il sign of the stati tion's sig g a chee on's loca	All-Band FM Carriage: Under vstem whenever it is received eived at the headend, with the copyright Office regulations or f each station carried. ion is AM or FM. gnal was electronically process ck mark in the "S/D" column. tion (the community to which the the community with which the	at the system's e system's FM and this point, see p ssed by the cable the station is lice	headend, and ntenna, durin page (v) of th e system as a ensed by the	d (2) it c g certair e gener a separa	an be expected, n stated intervals. al instructions in the. ate 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										
Name	LEGAL NAME OF OWNER O Google Fiber Georgia		IMI					SYSTEM ID: 63657		
	SUBSTITUTE CARRIAG		STATEM		MIOG					
	on a <i>substitute basis</i> durin			, .		Crules rec	, iulations or a	uthorizations For		
•	a further explanation of the									
Substitute	2 form.									
Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
Special Statement and Program Log	• 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	t of this pag	ge blank. If your answ	ver is "Yes," yo	u must com	plete the prog	ram		
	log in block 2. 2. LOG OF SUBSTITUT									
	In General: List each subs clear. If you need more spa Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general categod "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call Column 4: Give the broa the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gi Column 6: State the tim	ace, please add of every nonnet distant station a egulations, or au ries like "movies Bulls." m was broadcas sign of the station's nadian stations, nth and day whe ve "5/7." es when the sub	additional twork televiand that youthorization s" or "basked st live, ente ioon broadca location (th if any, the en your system	rows to the tables. ision program ("subsi ur cable system subsi s. See page (v) of the taball." List specific pr r "Yes." Otherwise en asting the substitute p he community to whic community with which tem carried the substi	titute program' stituted for the e general instr rogram titles, fo orogram. sh the station is h the station is titute program. your cable sys) that, during programmin uctions for fu or example, licensed by identified). Use numera tem. List the	g the accounti g of another s inther informa "I Love Lucy" the FCC or, i als, with the m times accura	ng station tion. or n		
	to the nearest five minutes, stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a was substituted for program effect on October 19, 1976	er "R" if the liste and regulations nming that your	ed program in effect du	was substituted for p uring the accounting p	orogramming t period; enter th	nat your sys ne letter "P"	em was <i>requi</i> if the listed pro			
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Accounting Period	2020/1		FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID
	Google Fiber Georgia, LLC		6365
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amo all amounts (gross receipts) paid to your cable system by subscribers for the system's set (as identified in space E) during the accounting period. For a further explanation of how to 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.	condary transm o compute this a	ission service
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 the • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less the See page (vi) of the general instructions located in the paper SA1-2 form for more inform	an \$527,600 nation.	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 th accounting period is \$52.00		
	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 lines 1 ar	nd 2	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but m	ore than \$137	7,100)
	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 (bu	t less than \$52	27,600)
	1. Enter the amount of gross receipts from space K	307,440.00	
	2. Base amount under statutory formula	263,800.00	
	3. Subtract line 2 from line 1	43,640.00	
	4. Multiply line 3 by .01		436.40
	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	\$ 1,755.40
	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)	\$	1,755.40
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		\$ 1,775.40
	Important: Your remittance must be in the form of an electronic payment paya See page i of the general instructions in the paper SA1-2 form fo	-	

Name IVI Channels	to its subscribers, and (2) the cable 1. Enter the total number of channel system carried television broadcast 2. Enter the total number of activate on which the cable system carried to	which the cable ations		SYSTEM ID 6365 0115 35
IVI to Channels 1 2 0	to its subscribers, and (2) the cable 1. Enter the total number of channel system carried television broadcast 2. Enter the total number of activate on which the cable system carried to	vstem's total numb on which the cable ations channels evision broadcast	per of activated channels during the accounting period.	
o	on which the cable system carried te	evision broadcast		
			stations	. 330
	NDIVIDUAL TO BE CONTACTED		RMATION IS NEEDED (Identify an individual to whom	
for Further Information	-	eatre Parkway	-	9 (650) 253-0000
	(Number, street, rura Mountain Vie (City, town, state, zip		ite number)	
	Email acces	compliance@go	ogle.com Fax (optional)	
Certification ·	 I, the undersigned, hereby certify that (Owner other than corpored (Agent of owner other that in line 1 of space B and that X (Officer or partner) I am arring line 1 of space B. I have examined the statement of access the statement of access	Check one, <i>but only</i> ion or partnership) corporation or part e owner is not a cor officer (if a corporation unt and hereby deck	I am the owner of the cable system as identified in line 1 of space B tnership) I am the duly authorized agent of the owner of the cable sy	; or /stem as identified
	Title:	Enter an e Enter sign r printed name: Manag	/S/ Fleur Knowsley electronic signature on the line above to certify this statement. hature using an "/s/ signature" (e.g., /s/ John Smith) Fleur Knowsley per - Google Fiber Georgia, LLC n corporation or partnership) 08/31/2020	-

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 fing, a determination that would be made by a court of law.

ccounting Period: 2020/1		FORM SA1-2E. PAGE 8
GAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID
oogle Fiber Georgia, LLC		63657
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS I The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(' lowing sentence: "In determining the total number of subscribers and the gross amou service of providing secondary transmissions of primary broadcast i scribers and amounts collected from subscribers receiving secondar For more information on when to exclude these amounts, see the note on located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) belov 	1)(A), of the Copyright Act by adding the ints paid to the cable system for the bas transmitters, the system shall not includ ry transmissions pursuant to section 11 page (vii) of the general instructions of gross receipts for secondary transmis	sic de sub- 19." Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address	ess	
INTEREST ASSESSMENT		
You must complete this worksheet for those royalty payments submitted a For an explanation of interest assessment, see page (viii) of the general in Line 1 Enter the amount of late payment or underpayment	structions located in the paper SA1-2 for	orm. Q
For an explanation of interest assessment, see page (viii) of the general in	structions located in the paper SA1-2 fo	orm. Q
For an explanation of interest assessment, see page (viii) of the general in Line 1 Enter the amount of late payment or underpayment	structions located in the paper SA1-2 for the	Interest Assessment
 For an explanation of interest assessment, see page (viii) of the general in Line 1 Enter the amount of late payment or underpayment Line 2 Multiply line 1 by the interest rate* and enter the sum here Line 3 Multiply line 2 by the number of days late and enter the sum here 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 * To view the interest rate chart click on <i>www.copyright.gov/licensing/ir</i> 	structions located in the paper SA1-2 for x	Q Interest Assessment ays
 For an explanation of interest assessment, see page (viii) of the general in Line 1 Enter the amount of late payment or underpayment Line 2 Multiply line 1 by the interest rate* and enter the sum here Line 3 Multiply line 2 by the number of days late and enter the sum here 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 * To view the interest rate chart click on <i>www.copyright.gov/licensing/ir</i> contact the Licensing Division at (202) 707-8150 or licensing@loc.go 	structions located in the paper SA1-2 for x x x x x x x x x x x x x	Q Interest Assessment ays
 For an explanation of interest assessment, see page (viii) of the general in Line 1 Enter the amount of late payment or underpayment Line 2 Multiply line 1 by the interest rate* and enter the sum here Line 3 Multiply line 2 by the number of days late and enter the sum here 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 * To view the interest rate chart click on <i>www.copyright.gov/licensing/ir</i> 	structions located in the paper SA1-2 for x	orm. Q Interest Assessment - ays - please
 For an explanation of interest assessment, see page (viii) of the general in Line 1 Enter the amount of late payment or underpayment Line 2 Multiply line 1 by the interest rate* and enter the sum here Line 3 Multiply line 2 by the number of days late and enter the sum here 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 * To view the interest rate chart click on <i>www.copyright.gov/licensing/lir</i> contact the Licensing Division at (202) 707-8150 or licensing@loc.go ** This is the decimal equivalent of 1/365, which is the interest assessment. 	structions located in the paper SA1-2 for x	orm. Q Interest Assessment - ays - please

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.