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 by email to:

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY

DATE RECEIVED 8/28/2023 \$

AMOUNT

coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2023/1 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.	4428
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		MCC Iowa, LLC (Decorah, IA)	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM ONE MEDIACOM WAY	
		(Number, street, rural route, apartment, or suite number)	
		MEDIACOM PARK, NY 10918	
		(City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unlist already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space.	
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.

Accounting Period:	2023/1	
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#
Name	MCC Iowa, LLC (Decorah, IA)	4428
D Area Served	Instructions: List each separate community served by the cable system. A "community separate and distinct community or municipal entity (including unincorporated commu unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile hor city.	nities within unincorporated areas and including single, discrete as a form of system identification hereafter known as the "first
	CITY OR TOWN	STATE
First	Decorah	IA
Community		
Add Rows as Necessary		

E Secondary Transmission Service: Sub- scribers and Rates	In General: The information in sp system, that is, the retransmissio about other services (including pa last day of the accounting period Number of Subscribers: Both down by categories of secondary	n, IA) SERVICE: SU pace E should n of television ay cable) in sp (June 30 or De	cover a and rac					515	TEM ID 442				
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in sp system, that is, the retransmissio about other services (including pa last day of the accounting period Number of Subscribers: Both down by categories of secondary	SERVICE: SU pace E should n of television ay cable) in spa (June 30 or De	cover a and rac										
E Secondary Transmission Service: Sub- scribers and Rates	In General: The information in sp system, that is, the retransmissio about other services (including pa last day of the accounting period Number of Subscribers: Both down by categories of secondary	pace E should n of television ay cable) in spa (June 30 or De	cover a and rac										
Secondary Transmission Service: Sub- scribers and Rates	system, that is, the retransmission about other services (including paralast day of the accounting period Number of Subscribers: Both down by categories of secondary	n of television ay cable) in spa (June 30 or De	and rac		SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES								
Secondary Transmission Service: Sub- scribers and Rates	about other services (including pa last day of the accounting period Number of Subscribers: Both down by categories of secondary	ay cable) in spa (June 30 or De		In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information									
Transmission Service: Sub- scribers and Rates	last day of the accounting period Number of Subscribers: Both down by categories of secondary	(June 30 or De	ace Fr										
scribers and Rates	down by categories of secondary		ecembe	er 31, as the case	e may be).		0					
Rates	, , ,	•					,						
	each caledory by counting the nu			•									
	each category by counting the number of billings in that category (the number of persons or organizations charged												
	separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the												
	unit in which it is generally billed.	· ·	,		y standaro	d rate variations	s within a pa	articular rate					
	category, but do not include disco												
	Block 1: In the left-hand block systems most commonly provide	•		•									
	that applies to your system. Note												
	categories, that person or entity s				••		•						
	subscriber who pays extra for cat					in the count une	der "Service	e to the					
	first set" and would be counted or Block 2: If your cable system h					service that are	different fr	om those					
	printed in block 1 (for example, tie												
	with the number of subscribers ar												
	sufficient.												
F	BLOCK 1						BLOCK	K 2 NO. OF					
	CATEGORY OF SERVICE	SUBSCRIBI		RATE	CATI	EGORY OF SE	RVICE	SUBSCRIBERS	RATE				
	Residential:												
	 Service to first set 		1,099	40.49-61.54									
	 Service to additional set(s) 												
	• FM radio (if separate rate)												
	Motel, hotel												
	Commercial		0	40.49-61.54									
	Converter												
	Residential												
	Non-residential												
	SERVICES OTHER THAN SECO		ISMISS										
	In General: Space F calls for rate				pect to all	your cable syst	tem's servio	ces that were					
	not covered in space E, that is, th												
	service for a single fee. There are furnished at cost or (2) services of	•	-		•		0 ()						
	amount of the charge and the uni												
	enter only the letters "PP" in the r	ate column.	-	-		-		· 3· -··· · ,					
Fransmissions:	Block 1: Give the standard rate												
Rates	Block 2: List any services that	• •			-								
	listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.												
-	(/ / I												
(CATEGORY OF SERVICE	BLO RATE		GORY OF SERV	ICE	RATE	CATEGO	BLOCK 2	RATE				
	Continuing Services:	TUTE		ation: Non-resid		TUTE	ONTEON		TUTE				
	• Pay cable	PP		tel, hotel			Family	Cable	105.0				
	 Pay cable—add'l channel 	PP		mmercial			,						
	Fire protection			y cable									
	•Burglar protection			, y cable-add'l cha	annel								
	Installation: Residential			e protection									
	• First set	109.99		rglar protection									
	Additional set(s)	49.00		services:									
	• FM radio (if separate rate)			connect		49.00							
	• Converter	10.50		connect									
				tlet relocation		49.00							
				ve to new addre	SS								

Nomo	LEGAL NAME OF OWNER OF CABL	E SYSTEM:		SYSTEM					
Name	MCC Iowa, LLC (Decorah, IA)								
	PRIMARY TRANSMITTERS:	TELEVISION							
G Primary	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a								
Transmitters: Television	basis under specific FCC rules, reg • Do <i>not</i> list the station here in spa station was carried <i>only</i> on a subs • List the station here, and also in s basis. For further information conc Column 1: List each station's call	respect to any distant stations carried b gulations, or authorizations: ice G—but do list it in space I (the Spec titute basis. space I, if the station was carried both o erning substitute basis stations, see pa sign. <i>Do not</i> report origination program	y your cable system on a substitute pro- cial Statement and Program Log)—if th on a substitute basis and also on some ige (v) of the general instructions. I services such as HBO, ESPN, etc. Id signation. For example, report multistru	e other entify each					
	of license. For example, WRC is o	per the FCC assigned to the television s channel 4 in Washington, D.C.	station for broadcasting over the air in i	-					
	educational station, by entering the (for independent multicast), "E" (fo For the meaning of these terms, se Column 4: Give the location of ea	e letter "N" (for network), "N-M" (for netw r noncommercial educational), or "E-M ee page (iv) of the general instructions ch station. For U.S. stations, list the co	an independent station, or a noncomm work multicast), "I" (for independent), "I- " (for noncommercial educational multio in the paper SA1-2 form. mmunity to which the station is licensed munity with which the station is identifie	M" cast). I by the					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION					
	KCRG/KCRG(HD) ABC	9	N	Cedar Rapids, IA					
	KCRG/KCRG-DT2 (HD) MyNET	9.2	I-M	Cedar Rapids, IA					
d Rows as Necessary	KCRG/KCRG-DT3 (HD) CW	9.3	I-M	Cedar Rapids, IA					
	KFXA-DT1 DABL	28	I-M	Cedar Rapids, IA					
	KFXA-DT2 Charge!	28.2	I-M	Cedar Rapids, IA					
	KFXA-DT3 TBD	28.3	I-M	Cedar Rapids, IA					
	KFXA-DT4 Stadium	28.4	I-M	Cedar Rapids, IA					
	KFXA-DT5 COMET	28.5	I-M	Cedar Rapids, IA					
	KFXB CTN	43	I	Dubuque, IA					
	KGAN/KGAN(HD) CBS	2	N	Cedar Rapids, IA					
	KGAN/KGAN-DT2 (HD) FOX	2.2	I-M	Cedar Rapids, IA					
	KGAN-DT3 getTV	2.3	I-M	Cedar Rapids, IA					
	KPXR/KPRX(HD) ION	47	I	Cedar Rapids, IA					
		47.2	I-M	CEDAR RAPIDS, IA					
	KPXR-DT2 Grit	41.2							
	KPXR-D12 Grit KPXR-DT3 Bounce	47.3	I-M	CEDAR RAPIDS, IA					
				CEDAR RAPIDS, IA CEDAR RAPIDS, IA					
	KPXR-DT3 Bounce	47.3	I-M						
	KPXR-DT3 Bounce KPXR-DT4 Laff	47.3 47.4	I-M	CEDAR RAPIDS, IA					
	KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy	47.3 47.4 47.5	I-M I-M I-M	CEDAR RAPIDS, IA CEDAR RAPIDS, IA					
	KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy KPXR-DT7 Scripps News	47.3 47.4 47.5 47.7	I-M I-M I-M I-M	CEDAR RAPIDS, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA					
	KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy KPXR-DT7 Scripps News KWKB/KWKB(HD) TCT	47.3 47.4 47.5 47.7 20	i-M i-M i-M i-M	CEDAR RAPIDS, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA Iowa City, IA					
	KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy KPXR-DT7 Scripps News KWKB/KWKB(HD) TCT KWKB-DT2 ION Mystery	47.3 47.4 47.5 47.7 20 20.2	i-M i-M i-M i-M i i i i i i	CEDAR RAPIDS, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA Iowa City, IA Iowa City, IA Iowa City, IA					
	KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy KPXR-DT7 Scripps News KWKB/KWKB(HD) TCT KWKB-DT2 ION Mystery KWKB-DT3 SonLife KWKB-DT4 Laff	47.3 47.4 47.5 47.7 20 20.2 20.3 20.4	i-M i-M i-M i-M i i-M	CEDAR RAPIDS, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA Iowa City, IA Iowa City, IA Iowa City, IA					
	KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy KPXR-DT7 Scripps News KWKB/KWKB(HD) TCT KWKB-DT2 ION Mystery KWKB-DT3 SonLife KWKB-DT4 Laff KWKB-DT5 thegrio	47.3 47.4 47.5 47.7 20 20.2 20.3 20.4 20.5	i-M i-M i-M i-M i-M i-M i-M	CEDAR RAPIDS, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA					
	KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy KPXR-DT7 Scripps News KWKB/KWKB(HD) TCT KWKB-DT2 ION Mystery KWKB-DT3 SonLife KWKB-DT4 Laff KWKB-DT5 thegrio KWKB-DT6 Quest	47.3 47.4 47.4 47.5 47.7 20 20.2 20.2 20.3 20.4 20.5 20.6	i-M i-M i-M i-M i-M i-M i-M i-M i-M	CEDAR RAPIDS, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA					
	KPXR-DT3 Bounce KPXR-DT4 Laff KPXR-DT5 Defy KPXR-DT7 Scripps News KWKB/KWKB(HD) TCT KWKB-DT2 ION Mystery KWKB-DT3 SonLife KWKB-DT4 Laff KWKB-DT5 thegrio	47.3 47.4 47.5 47.7 20 20.2 20.3 20.4 20.5	i-M i-M i-M i-M i-M i-M i-M	CEDAR RAPIDS, IA CEDAR RAPIDS, IA CEDAR RAPIDS, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA					

	LEGAL NAME OF OWNER OF CABI	LE SYSTEM:		SYSTEM				
Name	MCC Iowa, LLC (Decorah,			44				
	PRIMARY TRANSMITTERS:	TELEVISION						
G	carried by your cable system durin	very television station (including translate g the accounting period, <i>except</i> (1) stati	ons carried only on a part-time bas	is under				
Primary Transmitters: Television	76.59(d)(2) and (4), 76.61(e)(2) ar substitute program basis, as expla	t on June 24, 1981, permitting the carria (4), or 76.63 (referring to 76.61(e)(2) a ained in the next paragraph. respect to any distant stations carried by	nd (4))]; and (2) certain stations ca	rried on a				
	 basis under specific FCC rules, re Do <i>not</i> list the station here in spa station was carried <i>only</i> on a subs 	ace G—but do list it in space I (the Speci	al Statement and Program Log)—i	f the				
	basis. For further information cond	space I, if the station was carried both or cerning substitute basis stations, see pag sign. <i>Do not</i> report origination program :	e (v) of the general instructions.					
	multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form. Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community							
	of license. For example, WRC is channel 4 in Washington, D.C. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial							
	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). 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 station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.							
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	KWWL-DT5 True Crime Network	7.5	I-M	Waterloo, IA				
	KYIN/KYIN(HD) IPTV PBS	18	E	Mason City, IA				
	KYIN-DT2 IPTV KIDS (HD)	18.2	E-M	Mason City, IA				
	KYIN-DT3 IPTV PBS World	18.3	E-M	Mason City, IA				
			- N					
	KYIN-DT4 IPTV PBS Create	18.4	E-M	Mason City, IA				

EGAL NAME OF	OWNER OF C	CABLE S	YSTEM:					SYSTEM II
ICC Iowa, L	LC (Decor	ah, IA)						44
			mind on a concrete and discus	to boold and lists	booo 514 -1 -4	ono	riad on an	н
			rried on a separate and discre nerally receivable by your cabl					••
								Duineau
			-Band FM Carriage: Under C tem whenever it is received at					Primary Transmitters
n the basis of r	monitoring, to	be recei	ved at the headend, with the s	system's FM ante	nna, during ce	ertain sta	ated intervals.	Radio
		t the Co	pyright Office regulations on the	his point, see pag	e (v) of the ge	eneral in	structions in the.	
aper SA1-2 for Column 1: Id		sian of e	each station carried.					
Column 2: St	tate whether t	he statio	n is AM or FM.					
			nal was electronically processe	ed by the cable s	/stem as a se	parate a	nd discrete	
			< mark in the "S/D" column. on (the community to which the	e station is licens	ed by the ECC	or in t	he case of	
			the community with which the			, III U	ne case of	
		-						
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
CALL SIGN		3/0	LOCATION OF STATION	CALL SIGN		3/0	LOCATION OF STATION	
			·					

Accounting Perio	od: 2023/1					FOF	RM SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	FEM:				SYSTEM ID#
Name	MCC lowa, LLC (Deco	rah, IA)					4428
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG	ì		
Substitute	In General: In space I, identi substitute basis during the ad explanation of the programm	counting pe	eriod, under spe	cific present and former FC	C rules, regula	ations, or authorizations.	For a further
Carriage:	1. SPECIAL STATEMENT	-			general mear		
Special	During the accounting per				is any nonne	twork television program	m
Statement and	broadcast by a distant star			carry, on a cubolitato bac	io, any nonno		
Program Log						YES	
	Note: If your answer is "No	, leave the	rest of this pag	je blank. If your answer is	"Yes," you mi	ust complete the progra	im
	log in block 2. 2. LOG OF SUBSTITUTE		MS				
	In General: List each subst			te line. Use abbreviations	wherever pos	sible, if their meaning is	S
	clear. If you need more spa						
	Column 1: Give the title period, was broadcast by a			sion program ("substitute			
	under certain FCC rules, re						
	Do not use general categor						
		n was broa		r "Yes." Otherwise enter "I			
				isting the substitute progra the community to which the		ensed by the FCC or in	
	the case of Mexican or Can						
			when your sys	tem carried the substitute	program. Use	e numerals, with the mo	nth
	first. Example: for May 7 giv		e substitute pro	gram was carried by your	cable system	List the times accurate	-lv
	to the nearest five minutes.						Si y
	stated as "6:00–6:30 p.m."						
	to delete under FCC rules a			was substituted for progra			
	was substituted for program						
	effect on October 19, 1976.						
	s	UBSTITUT	TE PROGRAM			EN SUBSTITUTE IAGE OCCURRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION
						_	
					-	_	
					-	_	
					-		
					-		
					-		
					-		
					-		
					-		
					-		
					-		
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						_	
						_	
					-		
					-		

Name MCC Iowa, LLC (Decorah, IA) K GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s)	(STEM ID# 4428 198.98 is receipts)
K Gross Receipts Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vil) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. Image: Compute this amount, see page (vil) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. 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 \$263,800 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$227,600 See page (vil) of the general instructions located in the paper SA1-2 form for more information. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-month accounting period is \$52.00 Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100) 1. Base amount under statutory formula	
L Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • 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 \$263,800 • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800 • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-month 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 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 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	
Instructions: As a cable system with gross receipts of \$137,100 or less, the royality fee that you must pay for this six-month accounting period is \$52.00 Line 1. Royality fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100) 1. Base amount under statutory formula 2. Enter amount of gross receipts from space K 3. Subtract line 2 from line 1	
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 Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 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	
Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	
Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	
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	0.00
1. Base amount under statutory formula \$ 263,800.00 2. Enter amount of gross receipts from space K	
2. Enter amount of gross receipts from space K 3. Subtract line 2 from line 1	
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 \$ 405,198.98	
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)	
6. Interest charge. Enter the amount from line 4, space Q, page 8	
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$2,	,732.99
FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and 1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above) \$ 2,732.99	
Due 2. Filing Fee (See the instructions for more information on filing fee calculations)	
3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 2,	
Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights See page i of the general instructions in the paper SA1-2 form for more information.	,752.99

Accounting Period:	2023/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Decorah, IA)	SYSTEM ID 4428
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 which the cable system carried television broadcast stations on which the cable system carried television broadcast stations and nonbroadcast services	42 51
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name Kenneth J. Kohrs Telephone 845-44	3-2762
	Address One Mediacom Way (Number, street, rural route, apartment, or suite number) Mediacom Park, NY 10918 (City, town, state, zip)	
	Email Copyrights@mediacomcc.com Fax (optional	
0	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)	
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; or 	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as 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 owner of the c	
	 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)] 	
	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: Kenneth J. Kohrs	
	Title: Group Vice President, Financial Reporting (Title of official position held in corporation or partnership)	
	Date: 8/3/2023	

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.

L NAME OF OWNER OF CABLE SYSTEM: C Iowa, LLC (Decorah, IA) 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 fol- lowing 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 sub- scribers 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.	P Special Statement Concerning Gross
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 fol- lowing 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 sub- scribers 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	- Special Statement Concerning Gross
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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?	Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name 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. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x days 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 6	
 * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. 	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner	
Address	
ID number First community served	
Accounting period	

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.