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 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	AMOUNT				
2/26/25	\$				
	ALLOCATION NUMBER				

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α		
_ ^	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		2024/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		2024/2
		Barcode Data Filing Period (optional - see instructions)
Accounting		
Period		
		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
В		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.
		1701
		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)
	INICTI	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
С		s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B
System	_	IDENTIFICATION OF CABLE SYSTEM:
	1	
		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.

	T	FORM SA1-2E. PAG					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM					
	MCC Iowa, LLC (Traer, IA)	17					
	Instructions: List each separate community served by the cable system. A "communi						
D	"a separate and distinct community or municipal entity (including unincorporated co						
_	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereaft						
	as the "first community." Please use it as the first community on all future filings.	and the state of t					
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	ome parks should be reported in parentheses below the					
Served	identified city.						
	CITY OR TOWN	STATE					
First	Traer	iA					
Community	Dysart	IA IA					
	TAMA (Uo Dysart)	IA					
Rows as Necessary	REINBECK	IA					
	Laporte	IA					

Accounting Period: 2024/2
FORM SA1-2E. PAGE 2

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 1701

MCC Iowa, LLC (Traer, IA)

E

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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 about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in 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. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BLOCK 1			BLOC	K 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
Service to first set	117	29.99-76.49			
 Service to additional set(s) 					
• FM radio (if separate rate)					
Motel, hotel					
Commercial	0	29.99-76.49			
Converter					
Residential					
Non-residential					
		•			[

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

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 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.

BLOCK 1				BLOCK 2	
CATEGORY OF SERVICE	RATE CATEGORY OF SERVICE RATE		RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	PP	Motel, hotel		Variety TV	#####
 Pay cable—add'l channel 	PP	Commercial			
Fire protection		• Pay cable			
•Burglar protection		 Pay cable-add'l channel 			
Installation: Residential		 Fire protection 			
• First set	75.00	Burglar protection			
Additional set(s)	49.00	Other services:			
 FM radio (if separate rate) 		Reconnect	49.00		
Converter	9.99	Disconnect			
		 Outlet relocation 	49.00		
		 Move to new address 			

Accounting Period: 2024/2 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 1701

MCC Iowa, LLC (Traer, IA)

PRIMARY TRANSMITTERS:

TELEVISION

G Primary Transmitters:

Television

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, except (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 substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do *not* list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried *only* on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

Column 1: List each station's call sign. *Do not* report origination program services such as HBO, ESPN, etc. Identify each 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.

Add Rows as Necessary

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
KCRG/KCRG-DT3 CW (HD)	9.3	I-M	Cedar Rapids, IA
KDIN/KDIN PBS (HD)	11	E	Des Moines, IA
KDIN-DT2 PBS KIDS (HD)	11.2	E-M	Des Moines, IA
KDIN-DT3 World	11.3	E-M	Des Moines, IA
KDIN-DT4 Create	11.4	E-M	Des Moines, IA
KFXA-DT1 DABL	27.1	I-M	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 Nest	27.4	I-M	Cedar Rapids, IA
KFXA-DT5 COMET	27.5	I-M	Cedar Rapids, IA
KFXB CTN	40	<u>l</u>	DUBUQUE, IA
KGAN/KGAN CBS (HD)	51	N	Cedar Rapids, IA
KGAN/KGAN-DT2 (HD) FOX	51.2	I-M	Cedar Rapids, IA
KGAN-DT3 Quest	51.3	I-M	Cedar Rapids, IA
KPXR/KPXR ION (HD)	47	I	Cedar Rapids, IA
KPXR-DT2 Grit	47.2	I-M	CEDAR RAPIDS, IA
KPXR-DT3 Bounce	47.3	I-M	CEDAR RAPIDS, IA
KPXR-DT4 Laff	47.4	I-M	CEDAR RAPIDS, IA
KPXR-DT5 ION Plus	47.5	I-M	CEDAR RAPIDS, IA
KPXR-DT6 ION Mystery	47.6	I-M	CEDAR RAPIDS, IA
KPXR-DT7 JTV	47.7	I-M	CEDAR RAPIDS, IA
KWKB/KWKB (HD)	25	1	lowa City, IA
KWKB-DT2 ION Mystery	25.2	I-M	lowa City, IA

Accounting Period: 2024/2 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 1701

MCC Iowa, LLC (Traer, IA)

PRIMARY TRANSMITTERS:

TELEVISION

Primary Transmitters: Television

G

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, except (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 substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do *not* list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried *only* on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions.

Column 1: List each station's call sign. *Do not* report origination program services such as HBO, ESPN, etc. Identify each 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
KWKB-DT3 Sonlife	25.3	I-M	Iowa City, IA
KWKB-DT4 Start TV	25.4	I-M	Iowa City, IA
KWKB-DT5 This TV	25.5	I-M	lowa City, IA
KWKB-DT9 getTV	25.9		lowa City, IA
KWWL/KWWL NBC (HD)	7		Waterloo, IA
KWWL-DT2 H&I	7.2	I-M	Waterloo, IA
KWWL-DT3 MeTV	7.3	I-M	Waterloo, IA
KWWL-DT4 Court TV	7.4	I-M	Waterloo, IA
KWWL-DT5 True Crime Network	7.5	I-M	Waterloo, IA

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

MCC Iowa, LLC (Traer, IA)

1701

PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

Column 1: Identify the call sign of each station carried.

Column 2: State whether the station is AM or FM.

Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
						_	
			ı .		1	1	1

Accounting Borio	nd: 2024/2						FORM	A SA1 2E DACE E
ccounting Perio	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				FURI	M SA1-2E. PAGE 5. SYSTEM ID#
Name	MCC Iowa, LLC (Traer	, IA)						1701
Substitute Carriage: Special Statement and Program Log	SUBSTITUTE CARRIAG In General: In space I, ident substitute basis during the a explanation of the programm 1. SPECIAL STATEMEN • During the accounting pe broadcast by a distant stat Note: If your answer is "Not log in block 2. 2. LOG OF SUBSTITUTI In General: List each subsiclear. If you need more space Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. Column 2: If the prograt Column 3: Give the call Column 4: Give the broad the case of Mexican or Cal Column 5: Give the mot first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m." Column 7: Enter the lett	E: SPECIA tify every non accounting pring that must T CONCER riod, did you tion? ", leave the E PROGRA titute progra ace, please of every non adistant state egulations, conies like "mon Bulls." m was broan sign of the adcast static andian static and day ve "5/7." es when the Example: a ter "R" if the	nnetwork televieriod, under spet be included in the included i	sion program, broadcast by ecific present and former Fn this log, see page (v) of the steep state line. Use abbreviations rows to the tables. Vision program ("substitute bour cable system substitute in See page (v) of the general street our cable system substitute in See page (v) of the general street substitute program ("See in See page (v) of the general street substitute program ("See in See page (v) of the general street substitute program was substituted by street substituted in substituted in was substituted for program wa	a distant state CC rules, reghe general insussis, any nonres "Yes," you res wherever possible for the program") the deformation is likely as tation is likely program. Using table program. Using table system of the system of the program. Using table system of the program of th	ulations, or a structions in the network televenust complete possible, if the nat, during the orgamming of ions for furth example, "I Le censed by the entified). se numerals, m. List the tire :28:30 p.m. services	ision prog YES te the prog te account f another account for the progen in the progen i	tem carried on a ns. For a further A1-2 form. ram X NO gram g is ing station tion. or in nonth ately
	to delete under FCC rules was substituted for prograr effect on October 19, 1976	and regulati nming that y	ons in effect d	uring the accounting periods as permitted to delete und	ed; enter the I ler FCC rules	etter "P" if th	e listed projects in UTE RRED	

counting Period:	2024/2 FORM	SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Traer, IA)	SYSTEM I
	MCC IOWA, LLC (Traer, IA)	17
17	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of	of
K Bross Receipts	all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission servic (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)	
	during the accounting period	55,796.76
	IMPORTANT: You must complete a statement in space P concerning gross receipts. (Amount of	gross receipts)
L	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe:	
Copyright	Complete block 1, block 2, or block 3.	
Royalty Fee	 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 \$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-mon accounting period is \$52.00	
	Line 1. Royalty fee for accounting period	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	
	1. Base amount under statutory formula	
	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)	_
	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	
	FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and otal Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	_
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	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copy	rights!
	See page i of the general instructions in the paper SA1-2 form for more information.	

Accounting Period:	2024/2		FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Traer, IA)		SYSTEM ID# 1701
M Channels	to its subscribers, and (2) the cable system's total. Enter the total number of channels on which t system carried television broadcast stations 2. Enter the total number of activated channels		42
	on which the cable system carried television by and nonbroadcast services		62
N Individual to Be Contacted	we can contact about this statement of account.		
for Further Information	Name Kenneth J. Kohrs	Telephone 845-4	443-2782
	Address One Mediacom Way (Number, street, rural route, apartme	nt, or suite number)	
	Mediacom Park, NY 1 (City, town, state, zip)	0918	
	Email Copyrights@med	iacomcc.com Fax (optional)	
	CERTIFICATION (This statement of account mus	t be certified and signed in accordance with Copyright Office regulations)	
O Certification	I, the undersigned, hereby certify that (Check one	e,but only one, of the boxes.)	
	(Owner other than corporation or par	tnership) I am the owner of the cable system as identified in line 1 of space B; or	
		on or partnership) I am the duly authorized agent of the owner of the cable system ner is not a corporation or partnership; or	n as identified
	(Officer or partner) I am an officer (if a in line 1 of space B.	a corporation) or a partner (if a partnership) of the legal entity identified as owner of	the cable system
		ereby declare under penalty of law that all statements of fact contained herein nowledge, information, and belief, and are made in good faith.	
		X /s/ Kenneth J. Kohrs	
		nter an electronic signature on the line above to certify this statement. nter signature using an "/s/ signature" (e.g., /s/ John Smith)	
	Typed or printed n	ame: Kenneth J. Kohrs	
		Group Vice President, Financial Reporting al position held in corporation or partnership)	
	Date:	2/14/2025	10000000000000000000000000000000000000

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.

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? NO	counting Period: 2024/2		FORM SA1-2E. PAGE 8
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? Norme Name Maling Address INTEREST ASSESSMENT You must complete this worksheet for those royally 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. Line 2 Multiply line 1 by the interest rate* and enter the sum here	GAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID:
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? No "YES. Enter the total here and list the satellite carrier(s) below	C Iowa, LLC (Traer, IA)		1701
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? No	The Satellite Home Viewer Act of 1988 amended Tit lowing sentence: "In determining the total number of subscribe service of providing secondary transmissions	tle 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- ers and the gross amounts paid to the cable system for the basic s of primary broadcast transmitters, the system shall not include sub-	Special Statement Concerning Gross Receipts Exclusion
Name		ounts, see the note on page (vii) of the general instructions	
Name Mailing Address In Mame Mailing Address Name Mailing Address Name Mailing Address In Interest rases a result of a late payment or underpayment. Q Interest Asses Interest Asses (interest Ass	•	exclude any amounts of gross receipts for secondary transmissions	
Name Mailing Address INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment Line 2 Multiply line 1 by the interest rate* and enter the sum here x	X NO		
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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	Line 3. Multiply line 2 by the number of days late an	·	
in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	Line 3 Multiply line 2 by the number of days late an		_
* 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 filling 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 filling. Owner Address ID number	• • •	2 line 8, or block 3 line 6 \$	
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Address ID number	•		
ID number	Owner		
First community served	ID number		
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 th 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.

U.S. Copyright Office Form SA1-2E Short Form (Rev. 05-17)