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			
08/28/2020	\$ 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

A	ACC	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		· · · /
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		Barcode Data Filing Period (optional - see instructions)
Accounting		
Period		
		Instructions:
В		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.
2		corporate the or the subsidiary, not that or 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.
		63494
		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
		Google Fiber Utah, LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		Dodineso in une (o) or owner or or been or or end or or end or or end or or end or or or end or
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		1600 Amphitheatre Parkway (Number, street, rural route, apartment, or suite number)
		Mountain View, CA 94043
		(City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
C	name	es 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	1	IDENTIFICATION OF CABLE SYSTEM:
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
	_	(Natinuo), su ces, rui ai route, apartinent, oi 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.

Area Served id	Astructions: List each separate community served by the cable system. A "communules: "a separate and distinct community or municipal entity (including unincorport including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community or municipal entity (including unincorporticular including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community." Please use it as the first condentification hereafter known as the "first community." Please use it as the first colore: Entities and properties such as hotels, apartments, condominiums, or mobile dentified city. CITY OR TOWN Provo Salt Lake City
Area Served id	ules: "a separate and distinct community or municipal entity (including unincorpor necluding single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community of the dentification hereafter known as the "first community." Please use it as the first colote: Entities and properties such as hotels, apartments, condominiums, or mobile dentified city. CITY OR TOWN Provo
Area Served id	ncluding single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first comdentification hereafter known as the "first community." Please use it as the first colote: Entities and properties such as hotels, apartments, condominiums, or mobile dentified city. CITY OR TOWN Provo
Area Served First Community dd Rows as Necessary	dentification hereafter known as the "first community." Please use it as the first colore: Entities and properties such as hotels, apartments, condominiums, or mobile dentified city. CITY OR TOWN Provo
First Community Id Rows as Necessary	lote: Entities and properties such as hotels, apartments, condominiums, or mobile dentified city. CITY OR TOWN Provo
First Community Id Rows as Necessary	CITY OR TOWN Provo
First Community Id Rows as Necessary	CITY OR TOWN Provo
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Community III Rows as Necessary	Provo
Idd Rows as Necessary	Salt Lake City
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FORM SA1-2E. PAGE 1b.

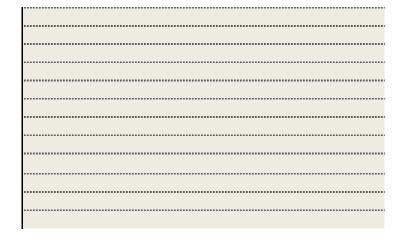
SYSTEM ID#

63494

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
UT
UT



Accounting Period: 2020/1 FORM SA1-2E. PAGE 2. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 63494 Google Fiber Utah, LLC SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES E 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 Secondary about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the Transmission last 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 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 Rates 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 BLOCK 2 NO OF NO OF CATEGORY OF SERVICE **SUBSCRIBERS RATE** CATEGORY OF SERVICE SUBSCRIBERS RATE Residential: Service to first set 2,520 \$30/mo · Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial Converter Residential Non-residential 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 F 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 Services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the Other Than amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, Secondary 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. Transmissions: Block 2: List any services that your cable system furnished or offered during the accounting period that were not Rates 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 CATEGORY OF SERVICE **RATE** Continuing Services: Installation: Non-residential PP · Pay cable · Motel, hotel Video on demand PP • Pay cable—add'l channel Commercial Fire protection Pay cable Burglar protection • Pay cable-add'l channel Installation: Residential · Fire protection First set Burglar protection Additional set(s) Other services:

Reconnect

DisconnectOutlet relocationMove to new address

• FM radio (if separate rate)

Converter

	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:				
Name	Google Fiber Utah, LLC					
	PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power carried by your cable system during the accounting period, except (1) stations carried only on a part					
G						
Primary Transmitters: Television	76.59(d)(2) and (4), 76.61(substitute program basis, a	in effect on June 24, 1981, permitting (e)(2) and (4), or 76.63 (referring to 76 as explained in the next paragraph. s: With respect to any distant stations	.61(e)(2) and (4))]; and (2) certa			
10101101011	basis under specific FCC r	rules, regulations, or authorizations: re in space G—but do list it in space I (
		also in space I, if the station was carri-				
	Column 1: List each station	ion concerning substitute basis stations on's call sign. <i>Do not</i> report origination ed with a station according to its over-th	program services such as HBC			
	"WETA-2" as the same on	<u> </u>				
	Column 3: Indicate in eac	WRC is channel 4 in Washington, D.C. th case whether the station is a network	k station, an independent statio			
	educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for network multicast), "I" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for					
	Column 4: Give the location	terms, see page (iv) of the general inst on of each station. For U.S. stations, li adian stations, if any, give the name of	st the community to which the s			
	Column 4: Give the location	on of each station. For U.S. stations, li	st the community to which the s			
	Column 4: Give the location FCC. For Mexican or Canal	on of each station. For U.S. stations, list adian stations, if any, give the name of	st the community to which the s the community with which the s			
	Column 4: Give the location FCC. For Mexican or Canal	on of each station. For U.S. stations, ligadian stations, if any, give the name of	st the community to which the s the community with which the s			
Add Rows as Necessary	Column 4: Give the location FCC. For Mexican or Canal 1. CALL SIGN KJZZDT	on of each station. For U.S. stations, list adian stations, if any, give the name of 2. B'CAST CHANNEL NUMBER 19.7	st the community to which the so the community with which the so the community to which the so			
Add Rows as Necessary	Column 4: Give the location FCC. For Mexican or Canal 1. CALL SIGN KJZZDT KJZZDT3	2. B'CAST CHANNEL NUMBER 19.7	st the community to which the so the community with which the so the community to which the so			
Add Rows as Necessary	1. CALL SIGN KJZZDT KJZZDT4	2. B'CAST CHANNEL NUMBER 19.7 19.8	st the community to which the so the community with which the so the community to which the so the community to which the so			
Add Rows as Necessary	1. CALL SIGN KJZZDT KJZZDT4 KSLDT	2. B'CAST CHANNEL NUMBER 19.7 19.8 23.3	st the community to which the so the community with which the so the community to which the so the community to which the so			
Add Rows as Necessary	1. CALL SIGN KJZZDT KJZZDT4 KSLDT2	2. B'CAST CHANNEL NUMBER 19.7 19.8 23.3 23.6	st the community to which the so the community with which the so the community to which the so the community to which the so			
Add Rows as Necessary	1. CALL SIGN KJZZDT KJZZDT4 KSLDT2 KSLDT3	2. B'CAST CHANNEL NUMBER 19.7 19.8 23.3 23.6 23.4	st the community to which the softhe community with which the softhe community to which the softhe community with the soft			
Add Rows as Necessary	1. CALL SIGN KJZZDT KJZZDT4 KSLDT2 KSTUDT	2. B'CAST CHANNEL NUMBER 19.7 19.8 23.3 23.6 23.4 28.3	st the community to which the softhe community with which the softhe community to which the softhe community with the so			
Add Rows as Necessary	1. CALL SIGN 1. CALL SIGN KJZZDT KJZZDT3 KJZZDT4 KSLDT2 KSLDT3 KSTUDT KSTUDT2	on of each station. For U.S. stations, list adian stations, if any, give the name of 2. B'CAST CHANNEL NUMBER 19.7 19.7 19.8 23.3 23.6 23.4 28.3 28.4	st the community to which the softhe community with which the softhe community to which the softhe community with the so			
Add Rows as Necessary	1. CALL SIGN 1. CALL SIGN KJZZDT KJZZDT3 KJZZDT4 KSLDT2 KSLDT3 KSTUDT KSTUDT2 KSTUDT2 KSTUDT3	2. B'CAST CHANNEL NUMBER 19.7 19.8 23.3 23.6 23.4 28.3 28.4 28.5	st the community to which the softhe community with which the softhe community to which the softhe community to which the softhe community to which the softhe community with the softhe community with which the softhe community with which the softhe community with the softhe			
Add Rows as Necessary	1. CALL SIGN 1. CALL SIGN KJZZDT KJZZDT3 KJZZDT4 KSLDT2 KSLDT3 KSTUDT KSTUDT2 KSTUDT3 KTMWDT	on of each station. For U.S. stations, list adian stations, if any, give the name of 2. B'CAST CHANNEL NUMBER 19.7 19.7 19.8 23.3 23.6 23.4 28.3 28.4 28.5 20.3	st the community to which the softhe community with which the softhe community to which the softhe community with the softhe c			
Add Rows as Necessary	1. CALL SIGN 1. CALL SIGN KJZZDT KJZZDT3 KJZZDT4 KSLDT KSLDT2 KSLDT3 KSTUDT KSTUDT2 KSTUDT3 KTMWDT KTMWDT2	on of each station. For U.S. stations, list adian stations, if any, give the name of 2. B'CAST CHANNEL NUMBER 19.7 19.7 19.8 23.3 23.6 23.4 28.3 28.4 28.5 20.3 20.4	st the community to which the softhe community with which the softhe community to which the softhe community to which the softhe community with the soft			

30.5

KTVXDT3

N-M

KTVXDT4	30.6	N-M
KTVXDT	30.3	N
KUCWDT2	30.4	I-M
KUCWDT3	30.5	I-M
KUCWDT4	30.6	I-M
KUEDDT	27.3	Е
KUEDDT2	27.4	E-M
KUEDDT3	27.5	E-M
KUENDT	36.3	Е
KUPXDT	29.3	l
KUTHDT	32	N
KUTHDT2	32.2	N-M
KUTHDT3	32.3	N-M
KUTVDT	34	N
KUTVDT2	34.2	N-M

FORM SA1-2E. PAGE 3.

SYSTEM ID# 63494

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 port 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
Salt Lake City, UT

Salt Lake City, UT
Salt Lake City, UT
Ogden, UT
Ogden, UT
Ogden, UT
Salt Lake City, UT
Salt Lake City, UT
Salt Lake City, UT
Ogden, UT
Provo, UT
Provo, UT
Provo, UT
Provo, UT
Salt Lake City, UT
Salt Lake City, UT

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Google Fiber Utah, LLC

63494

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
							
		ļ					
		l					

Accounting Perio	nd: 2020/1						FORM	1 SA1-2E. PAGE 5.
Accounting rent	LEGAL NAME OF OWNER OF	CABLE SY	STEM:				1 Ortiv	SYSTEM ID#
Name	Google Fiber Utah, LI	_C						63494
	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG						_	
	on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For							
Substitute							n the paper SA1-	
Carriage:								
Special	During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program							
Statement and Program Log	broadcast by a distant sta	ation?					YES	X NO
	Note: If your answer is "No"	, leave the	rest of this page	ge blank. If your answer	s "Yes," you r	nust complete tl	he progra	ım
	log in block 2.							
	LOG OF SUBSTITUT In General: List each subst			ate line. I lee abbreviation	s wherever n	necible if their r	meaning	ie
	clear. If you need more spa	ce, please	add additional	rows to the tables.			_	
	Column 1: Give the title period, was broadcast by a							
	under certain FCC rules, re	gulations, o	or authorization	ns. See page (v) of the ge	eneral instruct	ions for further	informati	on.
	Do not use general categor "NBA Basketball: 76ers vs.		ovies" or "bask	etball." List specific progr	am titles, for	example, "I Love	e Lucy" o	r
	Column 2: If the progran	n was broad						
	Column 3: Give the call : Column 4: Give the broa					censed by the F	CC or in	
	the case of Mexican or Can	adian statio	ons, if any, the	community with which th	e station is id	entified).	-	
	Column 5: Give the mon first. Example: for May 7 gives		when your sys	tem carried the substitut	e program. Us	se numerals, wit	th the mo	nth
	Column 6: State the time	es when the						ely
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carr	led by a system from 6:0	1:15 p.m. to 6	:28:30 p.m. sno	uld be	
	Column 7: Enter the lette							
	to delete under FCC rules a was substituted for program							gram
	effect on October 19, 1976.		•			-		
					WHI	EN SUBSTITU	TE	
	SI	1	E PROGRAM	1		IAGE OCCUR		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIME FROM —	TO	522
						_		
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Accounting Period	2020/1	FORM SA1-2E. PAGE 6							
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Google Fiber Utah, LLC	SYSTEM ID# 63494							
	300gle i ibei Otali, EEO	03434							
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary traces identified in space E) during the accounting period. For a further explanation of how to compute 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.	ansmission service							
	COPYRIGHT ROYALTY FEE								
Copyright Royalty Fee	Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60 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 mus accounting period is \$52.00	t pay for this six-month							
	Line 1. Royalty fee for accounting period								
1	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								
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$	\$137,100)							
	1. Base amount under statutory formula	00_							
	2. Enter amount of gross receipts from space K								
	3. Subtract line 2 from line 1								
	4. Enter the amount of gross receipts from space K								
	5. Enter the amount from line 3								
	6. Subtract line 5 from line 4								
	7. Multiply line 6 by .005 (enter figure here)								
	8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00							
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8								
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than	\$527,600)							
	1. Enter the amount of gross receipts from space K	00							
	2. Base amount under statutory formula	00							
	3. Subtract line 2 from line 1	00							
	4. Multiply line 3 by .01	1,898.00							
	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	\$ 3,217.00							
	FILING FEE AND TOTAL REMITTANCE DUE								
Eiling For and									
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	3,217.00							
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	. \$ 3,237.00							
	Important: Your remittance must be in the form of an electronic payment payable to the See page i of the general instructions in the paper SA1-2 form for more info								

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

Accounting Period	2020/1					FORM SA1-2E. PAGE 7	
Name	LEGAL NAME OF C Google Fiber U	OWNER OF CABLE SYSTEM:				SYSTEM ID: 63494	
Channels	CHANNELS Instructions. Tournius: 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 and nonbroadcast services.					30	
						325	
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 XiXi Tian Telephone (650) 253-0000 1600 Amphitheatre Parkway Address (Number, street, rural route, apartment, or suite number) Mountain View, CA 94043 (City, town, state, zip)						
	Email	access-complia	ance@goo	ogle.com	Fax (optional)		
Certification	(Owner (Agent on in line 1 of the	other than corporation or part of owner other than corporation of space B and that the owner is of space B. the statement of account and he and correct to the best of my known in the corporation of the statement of the stateme	e, but only urtnership) ion or part is not a corporation a corporation	one, of the boxes.) I am the owner of the cable mership) I am the duly authororation or partnership; or on) or a partner (if a partnership) are under penalty of law that	rdance with Copyright Office regulate system as identified in line 1 of space Borized agent of the owner of the cable synip) of the legal entity identified as owner all statements of fact contained hereing made in good faith.	or rstem as identified	
			Enter an e	/s/ Fleur Knowsley electronic signature on the liature using an "/s/ signature	ne above to certify this statement. " (e.g., /s/ John Smith)	-	
			Manag	Fleur Knowsley er - Google Fiber U	tah, LLC		
		Date:			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 fling, a determination that would be made by a court of law.

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

counting Period: 2020/1	FORM SA1-2E. PAGE 8
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
ogle Fiber Utah, LLC	63494
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 su 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	P
located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmission made by satellite carriers to satellite dish owners?	s
X NO	
YES. Enter the total here and list the satellite carrier(s) belov	
Name Mailing Address 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.	nt. Q
Line 1 Enter the amount of late payment or underpayment	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 pleas contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	se
** 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, pleal list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Ouner	
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.

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