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.

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

SA1-2E Short Form

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

the first tab o	of this	workbook		ALLOCATION NUMBER	Tel: (202) 707-8150
					1
Α	ACCO	DUNTING PERIOD COVERED E	BY THIS STATEMENT: (YYYY	Y/(Period))	
		2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
			Barcode Data Filing Period (optional - s	ee instructions)	
Accounting Period			- 		
В		Instructions: Give the full legal name of the owner of th of the subsidiary, not that of the parent co		y of another corporation, give the full corp	oorate title
Owner		List any other name or names under which	n the owner conducts the business of the c	cable system.	
		If there were different owners during the a single statement of account and royalty fe			ıbmit a
		Check here if this is the system's first filing	If not, enter the system's ID number assi	gned by the Licensing Division.	1250
		-			
		LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
		MCC Iowa, LLC (Toledo, 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 n	umber)		
		MEDIACOM PARK, NY 10918 (City, town, state, zip)			
С		• RUCTIONS: In line 1, give any busin s already appear in space B. In line 2			
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		MAILING ADDRESS OF CABLE SYSTEM	:		
	2	(Number, street, rural route, apartment, or suite n	mber)		
		(City, town, state, zip code)			
	*				
rivacy Act Notice	: Sectior	111 of title 17 of the United States Code aut	horizes the Copyright Offce to collect the pe	ersonally identifying information (PII) reques	ted on this

FOR COPYRIGHT OFFICE USE ONLY

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AMOUNT

DATE RECEIVED

3/1/2021

Privacy form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

.....

		FORM SA1-2E. PAG SYSTEM
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	
	MCC Iowa, LLC (Toledo, IA)	12
	Instructions: List each separate community served by the cable system. A "commun	ity" is the same as a "community unit" as defined in FCC rule
D	"a separate and distinct community or municipal entity (including unincorporated co	ommunities within unincorporated areas and including single
U	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you I	
	as the "first community." Please use it as the first community on all future filings.	······································
		home parks should be reported in perentheces helput the
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile	nome parks should be reported in parentheses below the
Served	identified city.	
001104		
	CITY OR TOWN	STATE
First	Tama	IA
Community	*Tama County	IA
	Toledo	IA
d Rows as Necessary	Beaman	IA
	Conrad	IA
	Garwin	IA
	Gladbrook	AI IA
	Eldora	IA
	Hardin	IA
	Grundy Center	A

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						FORM SA1	TEM ID
Name	MCC lowa, LLC (Toledo	, IA)							125
_	SECONDARY TRANSMISSION	I SERVICE: SI	JBSCR	IBERS AND R	ATES				
E	In General: The information in s					ry transmission	service of t	he cable	
	system, that is, the retransmission								
Secondary	about other services (including p	, , ,	,		,		those exist	ing on the	
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both	•				,	blo svetom	brokon	
scribers and	down by categories of secondar	•							
Rates	each category by counting the n			•		•			
	separately for the particular serv	vice at the rate	indicate	ed—not the nur	nber of se	ts receiving serv	vice).	Ū	
	Rate: Give the standard rate of	-							
	unit in which it is generally billed				ny standa	rd rate variatior	ns within a	particular rate	
	category, but do not include disc Block 1: In the left-hand block				ries of sec	ondary transmi	ssion servi	ce that cable	
	systems most commonly provide								
	that applies to your system. Not								
	categories, that person or entity								
	subscriber who pays extra for ca					d in the count u	nder "Servi	ce to the	
	first set" and would be counted of Block 2: If your cable system					service that are	e different f	rom those	
	printed in block 1 (for example, t								
	with the number of subscribers a	and rates, in th	e right-	hand block. A t	wo- or thre	e-word descript	tion of the s	service is	
	sufficient.				1				
	BLO	OCK 1 NO. OF					BLOCK	12 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT
	Residential:						-		
	Service to first set		1,009	29.99-74.49					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		1	29.99-74.49					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC				e				1
-	In General: Space F calls for ra					III your cable sy	stem's serv	rices that were	
F	not covered in space E, that is, t								
. .	service for a single fee. There a		,		0		0.0		
Services Other Than	furnished at cost or (2) services amount of the charge and the ur								
Secondary	enter only the letters "PP" in the		usuunj	, billed. If dify it				ogram babis,	
ransmissions:	Block 1: Give the standard rate	te charged by t							
Rates	Block 2: List any services that	• •			-	-	-		
	listed in block 1 and for which a brief (two- or three-word) description				isned. List	these other ser	vices in the	e form of a	
	bher (two- or timee-word) descrip								
		BLO				D 4 T 5	0.750	BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER		RATE	CATEGO	DRY OF SERVICE	RATI
	Continuing Services:			ation: Non-res	Idential		Family	Cabla	84.9
	Pay cable Add'l channel	PP		itel, hotel			Family	Cable	04.3
	Pay cable—add'l channel Eire protection	PP		mmercial v cable					
	Fire protection Burglar protection			y cable y cable-add'l cł	annal				
	•Burgiar protection			e protection					
	• First set	99.99		rglar protection					
		99.99 15.00-49.00		services:					
	 Additional set(s) FM radio (if separate rate) 	13.00-49.00		connect		49.00			
			- к е	CONNECL		43.00			
	, , ,	10 50	• Di-	connect					
	• Converter	10.50		sconnect		15 00 40 00			
	, , ,	10.50	۰Ou	connect tlet relocation we to new addr	055	15.00-49.00			

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	MCC lowa, LLC (Toled	o, IA)		1:
	PRIMARY TRANSMITTERS:	· ·		
G Primary Transmitters: Television	In General: In space G, ider carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e) substitute program basis, as Substitute Basis Stations: basis under specific FCC rule • Do <i>not</i> list the station here station was carried <i>only</i> on a • List the station here, and al basis. For further information Column 1: List each station' multicast stream associated "WETA-2" as the same on th Column 2: Give the channel of license. For example, WF Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these ter Column 4: Give the location	tify every television station (including of during the accounting period, except effect on June 24, 1981, permitting t (2) and (4), or 76.63 (referring to 76.6 explained in the next paragraph. With respect to any distant stations of es, regulations, or authorizations: in space G—but do list it in space I (fr a substitute basis. so in space I, if the station was carried of concerning substitute basis stations is call sign. <i>Do not</i> report origination with a station according to its over-the form. number the FCC assigned to the tele CC is channel 4 in Washington, D.C. case whether the station is a network ing the letter "N" (for network), "N-M" "E" (for noncommercial educational), ms, see page (iv) of the general instr- of each station. For U.S. stations, lis	g translator stations and low power te of (1) stations carried only on a part-ti the carriage of certain network progra 61(e)(2) and (4))]; and (2) certain stat carried by your cable system on a sub the Special Statement and Program I ed both on a substitute basis and also , see page (v) of the general instructi program services such as HBO, ESP e-air designation. For example, repo evision station for broadcasting over t station, an independent station, or a (for network multicast), "I" (for independent or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station the community with which the station	Ime basis under Ims [sections itons carried on a postitute program Log)—if the pon some other ons. PN, etc. Identify each rt multistream the air in its community noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KCCI/KCCI(HD) CBS	8	N	Des Moines, IA
	KCCI-DT2 MeTV	8.2	I-M	Des Moines, IA
d Rows as Necessary	KCCI-DT3 MyNet/H&I	8.3	I-M	Des Moines, IA
	KCRG/KCRG(HD) ABC	9	N	Cedar Rapids, IA
	KCRG-DT2/KCRG (HD)-DT2 My N	9.2	I-M	Cedar Rapids, IA
	KCRG-DT3 Antenna	9.3	I-M	Cedar Rapids, IA
	KCRG-DT4 H&I	9.4	I-M	Cedar Rapids, IA
	KCRG-DT5 Start TV	9.5	I-M	Cedar Rapids, IA
	KCRG-DT6 Circle	9.6		
		3.0	I-M	Cedar Rapids, IA
	KCWI/KCWI (HD) CW	23	I-M	Cedar Rapids, IA Ames, IA
	KCWI/KCWI (HD) CW KCWI-DT2 Escape			
		23		Ames, IA
	KCWI-DT2 Escape	23 23.2	I	Ames, IA Ames, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV	23 23.2 23.3	I I-M I-M	Ames, IA Ames, IA Ames, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest	23 23.2 23.3 23.4	I M M	Ames, IA Ames, IA Ames, IA Ames, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest KDIN/KDIN(HD) PBS	23 23.2 23.3 23.4 11	i M M M E	Ames, IA Ames, IA Ames, IA Ames, IA Des Moines, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest KDIN/KDIN(HD) PBS KDIN-DT2 PBS KIDS HD	23 23.2 23.3 23.4 11 11.2	I I-M I-M I-M E E E-M	Ames, IA Ames, IA Ames, IA Ames, IA Des Moines, IA Des Moines, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest KDIN/KDIN(HD) PBS KDIN-DT2 PBS KIDS HD KDIN-DT3 PBS World	23 23.2 23.3 23.4 11 11.2 11.3	I I-M I-M E E E-M E-M	Ames, IA Ames, IA Ames, IA Ames, IA Des Moines, IA Des Moines, IA Des Moines, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest KDIN/KDIN(HD) PBS KDIN-DT2 PBS KIDS HD KDIN-DT3 PBS World KDIN-DT4 PBS Create	23 23.2 23.3 23.4 11 11.2 11.3 11.4	I I-M I-M I-M E E E-M E-M E-M	Ames, IA Ames, IA Ames, IA Ames, IA Des Moines, IA Des Moines, IA Des Moines, IA Des Moines, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest KDIN/KDIN(HD) PBS KDIN-DT2 PBS KIDS HD KDIN-DT3 PBS World KDIN-DT4 PBS Create KDMI TCT	23 23.2 23.3 23.4 11 11.2 11.3 11.4 56	I I-M I-M E E E-M E-M I	Ames, IA Ames, IA Ames, IA Ames, IA Des Moines, IA Des Moines, IA Des Moines, IA Des Moines, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest KDIN/KDIN(HD) PBS KDIN-DT2 PBS KIDS HD KDIN-DT3 PBS World KDIN-DT4 PBS Create KDMI TCT KDSM/KDSM(HD) FOX	23 23.2 23.3 23.4 11 11.2 11.3 11.4 56 16	I I-M I-M I-M E E E-M E-M E-M I I I	Ames, IA Ames, IA Ames, IA Ames, IA Des Moines, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest KDIN/KDIN(HD) PBS KDIN-DT2 PBS KIDS HD KDIN-DT3 PBS World KDIN-DT4 PBS Create KDMI TCT KDSM/KDSM(HD) FOX KDSM-DT2 COMET	23 23.2 23.2 23.3 23.4 11 11.2 11.3 11.4 56 16 16.2	I IM I-M I-M E E E-M E-M E-M I I I I	Ames, IA Ames, IA Ames, IA Ames, IA Des Moines, IA
	KCWI-DT2 Escape KCWI-DT3 Bounce TV KCWI-DT4 Quest KDIN/KDIN(HD) PBS KDIN-DT2 PBS KIDS HD KDIN-DT3 PBS World KDIN-DT4 PBS Create KDMI TCT KDSM/KDSM(HD) FOX KDSM-DT2 COMET KDSM-DT3 Charge	23 23.2 23.2 23.3 23.4 11 11.2 11.3 11.4 56 16 16 16.2 16.3	I I-M I-M E E E-M E-M I I I I I I I I I	Ames, IA Ames, IA Ames, IA Ames, IA Des Moines, IA

Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	MCC Iowa, LLC (Toled	io, IA)		1
	PRIMARY TRANSMITTERS:	TELEVISION		
G	carried by your cable systen FCC rules and regulations in	ntify every television station (including n during the accounting period, <i>except</i> n effect on June 24, 1981, permitting th	t (1) stations carried only on a part-t ne carriage of certain network progra	ime basis under ams [sections
Primary nsmitters: elevision	substitute program basis, as)(2) and (4), or 76.63 (referring to 76.6 explained in the next paragraph. With respect to any distant stations ca		
	• Do <i>not</i> list the station here station was carried <i>only</i> on			
	basis. For further information Column 1: List each station	Iso in space I, if the station was carried n concerning substitute basis stations, 's call sign. <i>Do not</i> report origination p	see page (v) of the general instruct program services such as HBO, ESF	ions. PN, etc. Identify each
	"WETA-2" as the same on the Column 2: Give the channe	I number the FCC assigned to the tele		
	Column 3: Indicate in each educational station, by enter	RC is channel 4 in Washington, D.C. case whether the station is a network ing the letter "N" (for network), "N-M" ((for network multicast), "I" (for indep	endent), "I-M"
	For the meaning of these ter Column 4: Give the location	"E" (for noncommercial educational), c rms, see page (iv) of the general instru- n of each station. For U.S. stations, list lian stations, if any, give the name of the lian stations, if any, give the name of the stations.	ictions in the paper SA1-2 form. the community to which the station	is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KFXA-DT2 Charge	27.2	I-M	Cedar Rapids, IA
	KFXA-DT3 TBD	27.3	I-M	Cedar Rapids, IA
	KFXA-DT4 Stadium	27.4	I-M	Cedar Rapids, IA
	KFXB CTN	40	I	Dubuque, IA
	KGAN/KGAN(HD) CBS	51	Ν	Cedar Rapids, IA
	KGAN-DT2 GET TV	51.2	I-M	Cedar Rapids, IA
	KGAN-DT3 COMET	51.3	I-M	Cedar Rapids, IA
		51.4	I-M	Cedar Rapids, IA
	KGAN-DT4 DABL			eeuu nuplue, n
	KGAN-DT4 DABL	47	I	Cedar Rapids, IA
			<u>I</u>	
	KPXR/KPXR(HD) ION	47		Cedar Rapids, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape	47 25	I	Cedar Rapids, IA Iowa City, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff	47 25 25.2	I	Cedar Rapids, IA Iowa City, IA Iowa City, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit	47 25 25.2 25.3	I M M	Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV	47 25 25.2 25.3 25.4	I M M	Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV KWKB-DT5 Light TV KWKB-DT6 Quest	47 25 25.2 25.3 25.4 25.5	I I-M I-M I-M I-M	Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV KWKB-DT5 Light TV	47 25 25.2 25.3 25.4 25.5 25.6	I M M M M M	Cedar Rapids, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA Iowa City, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV KWKB-DT5 Light TV KWKB-DT6 Quest KWWL/KWWL(HD) NBC KWWL-DT2/KWWL-DT2 CW HD	47 25 25.2 25.3 25.4 25.5 25.6 7 7.2	I M M M M M N N M	Cedar Rapids, IA Iowa City, IA Waterloo, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV KWKB-DT5 Light TV KWKB-DT5 Light TV KWKB-DT6 Quest KWWL/KWWL(HD) NBC	47 25 25.2 25.3 25.4 25.5 25.6 7	I M M M M M N	Cedar Rapids, IA lowa City, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV KWKB-DT5 Light TV KWKB-DT6 Quest KWWL/KWWL(HD) NBC KWWL-DT2/KWWL-DT2 CW HD KWWL-DT3 MeTV KWWL-DT4 Court TV	47 25 25.2 25.3 25.4 25.5 25.6 7 7.2 7.3 7.4	I M M M M N N M M 	Cedar Rapids, IA lowa City, IA Waterloo, IA Waterloo, IA Waterloo, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV KWKB-DT5 Light TV KWKB-DT6 Quest KWWL/KWWL(HD) NBC KWWL-DT2/KWWL-DT2 CW HD KWWL-DT3 MeTV KWWL-DT4 Court TV KWWL-DT5 Justice	47 25 25.2 25.3 25.4 25.5 25.6 7 7.2 7.3 7.4 7.5	I M M M M M M M 	Cedar Rapids, IA Iowa City, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV KWKB-DT5 Light TV KWKB-DT6 Quest KWWL-DT6 Quest KWWL-DT2/KWWL-DT2 CW HD KWWL-DT3 MeTV KWWL-DT3 MeTV KWWL-DT5 Justice WHO/WHO(HD) NBC	47 25 25.2 25.3 25.4 25.5 25.6 7 7.2 7.3 7.4 7.5 13	I M M M M M M M 	Cedar Rapids, IA lowa City, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA Des Moines, IA
	KPXR/KPXR(HD) ION KWKB/KWKB(HD) Escape KWKB-DT2 Laff KWKB-DT3 Grit KWKB-DT4 Bounce TV KWKB-DT5 Light TV KWKB-DT6 Quest KWWL/KWWL(HD) NBC KWWL-DT2/KWWL-DT2 CW HD KWWL-DT3 MeTV KWWL-DT4 Court TV KWWL-DT5 Justice	47 25 25.2 25.3 25.4 25.5 25.6 7 7.2 7.3 7.4 7.5	I M M M M M M M 	Cedar Rapids, IA lowa City, IA waterloo, IA Waterloo, IA Waterloo, IA Waterloo, IA

				SYSTE
Name	LEGAL NAME OF OWNER C			5131E
	MCC lowa, LLC (Tole	•		
	PRIMARY TRANSMITTERS:	TELEVISION		
<u>^</u>		dentify every television station (including tr	•	,
G		em during the accounting period, except(
Dalmany		s in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61)		
Primary Transmitters:		(e)(2) and (4), or 76.63 (referring to 76.61) as explained in the next paragraph.	(e)(2) and (4))]; and (2) certain s	tations carried on a
Television	1 0 /	s: With respect to any distant stations car	ried by your cable system on a s	ubstitute program
	basis under specific FCC r	rules, regulations, or authorizations:		
		ere in space G—but do list it in space I (the	e Special Statement and Progran	n Log)—if the
	station was carried only of			
		also in space I, if the station was carried		
		ion concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pro		
		ed with a station according to its over-the-a	-	-
	"WETA-2" as the same on	the form.		
		nel number the FCC assigned to the televi	ision station for broadcasting over	er the air in its community
	of license. For example, V	WRC is channel 4 in Washington, D.C.	5	
	of license. For example, V Column 3: Indicate in eac	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st	tation, an independent station, or	a noncommercial
	of license. For example, V Column 3: Indicate in eac educational station, by ent	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st tering the letter "N" (for network), "N-M" (fo	tation, an independent station, or or network multicast), "I" (for inde	r a noncommercial pendent), "I-M"
	of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st	tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa	r a noncommercial pendent), "I-M"
	of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the locate	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st tering the letter "N" (for network), "N-M" (for t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- tion of each station. For U.S. stations, list th	tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa stions in the paper SA1-2 form. he community to which the statio	a noncommercial pendent), "I-M" tional multicast). n is licensed by the
	of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the locate	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st tering the letter "N" (for network), "N-M" (for t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruct	tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa stions in the paper SA1-2 form. he community to which the statio	a noncommercial pendent), "I-M" tional multicast). n is licensed by the
	of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the locate	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st tering the letter "N" (for network), "N-M" (for t), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- tion of each station. For U.S. stations, list th	tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa stions in the paper SA1-2 form. he community to which the statio	a noncommercial pendent), "I-M" tional multicast). n is licensed by the
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	of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st tering the letter "N" (for network), "N-M" (for i), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- tion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. he community to which the station e community with which the station 3. TYPE OF STATION	a noncommercial pendent), "I-M" ational multicast). n is licensed by the on is identified.
	of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the locati FCC. For Mexican or Cana 1. CALL SIGN WOI/WOI(HD) ABC	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st tering the letter "N" (for network), "N-M" (fo i), "E" (for noncommercial educational), or terms, see page (iv) of the general instruction on of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. he community to which the statio e community with which the statio 3. TYPE OF STATION N	a noncommercial pendent), "I-M" tional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION Ames, IA
	of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WOI/WOI(HD) ABC WOI-DT2 Laff	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st tering the letter "N" (for network), "N-M" (for i), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- tion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 5 52	tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa- tions in the paper SA1-2 form. the community to which the station e community with which the station 3. TYPE OF STATION N	a noncommercial pendent), "I-M" titional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION Ames, IA Ames, IA
	of license. For example, V Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WOI/WOI(HD) ABC WOI-DT2 Laff WOI-DT3 Grit	WRC is channel 4 in Washington, D.C. ch case whether the station is a network st tering the letter "N" (for network), "N-M" (for i), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- tion of each station. For U.S. stations, list th adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 5 5.2 5.3	tation, an independent station, or or network multicast), "I" (for inde "E-M" (for noncommercial educa tions in the paper SA1-2 form. he community to which the station e community with which the station 3. TYPE OF STATION N I-M I-M	a noncommercial pendent), "I-M" ational multicast). n is licensed by the on is identified.

EGAL NAME OF MCC Iowa, L			YSTEM:					SYSTEM I 12
	every radio s	tation ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of it for detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If idgnal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether t the radio stati this by placing vive the station	/ the sys be recei t the Co sign of e he statio on's sign a check i's locatio	I-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante his point, see pa ed by the cable s e station is licens	eadend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st general ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		5,0		C. ILL SIGN		3,0		
						<u> </u>		
								
						<u> </u>		
						 		
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						4		

Accounting Perio							FORM	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF		STEM:					SYSTEM ID#
Name	MCC lowa, LLC (Toled	lo, IA)						1250
	SUBSTITUTE CARRIAG		AL STATEME		6			
1					-			•
•	In General: In space I, ident substitute basis during the a							
Substitute	explanation of the program	•••		•				
Carriage:	1. SPECIAL STATEMEN	-			<u></u>			
Special		-		m carry, on a substitute ba	eie anv nonr	otwork to	evision prog	ram
Statement and	а а		ui cable system	in carry, on a substitute ba	515, any nom			
Program Log	broadcast by a distant sta	luon?					YES	X NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer is	s "Yes," you r	nust comp	lete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUT			ata lina. Llas abbraviation		aaibla ifi	hoir moonin.	r io
	In General: List each subs clear. If you need more spa				s wherever po	ossidie, il i	ineir meaning	y is
				vision program ("substitute	e program") tl	nat, during	the account	ing
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general catego "NBA Basketball: 76ers vs.		ovies" or "bask	etball." List specific progra	am titles, for e	example, "	I Love Lucy"	or
			adcast live. ent	er "Yes." Otherwise enter	"No."			
				casting the substitute prog				
				the community to which th			the FCC or,	in
	the case of Mexican or Car						la with than	nonth
	first. Example: for May 7 gi		y when your sy	stem carried the substitute	e program. Us		iis, wiui uie ii	nonun
			ie substitute pr	ogram was carried by you	r cable syste	n. List the	times accura	ately
	to the nearest five minutes	. Example:	a program car	ried by a system from 6:01	1:15 p.m. to 6	:28:30 p.n	n. should be	-
	stated as "6:00–6:30 p.m."	tor "D" if the	b listed program	n was substituted for prog	romming that	your evet	om was requ	irod
	to delete under FCC rules							
	was substituted for program							- 3
	effect on October 19, 1976							
					\//НЕ	N SUBST		
	s	UBSTITUT	E PROGRAM	1		AGE OCC		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6.	TIMES	DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM	— то	
						·	 	
						·····		
						······		
						· · · · · · · · · · · · · · · · · · ·		
						· · · · · · · · · · · · · · · · · · ·		

Accounting Period:	2020/2			FORM S	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:			5	SYSTEM ID#
	MCC Iowa, LLC (Toledo, IA)				1250
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and all amounts (gross receipts) paid to your cable system by subscribers for the system in space E) during the accounting period. For a further explanation 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	stem's sec n of how to	condary transm compute this a	ission service amount, see \$ 30	
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> 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 bt • Use block 3 if the amount of gross receipts in space K is more than \$263,800 bt See page (vi) of the general instructions located in the paper SA1-2 form for more inf BLOCK 1: GROSS RECEIPTS OF \$137,	ut less tha formation.	n \$527,600	263,800	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00	fee that yo	ou must pay for	this six-mon	
	Line 1. Royalty fee for accounting period				
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add line	es 1 and 2			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS				
	1. Base amount under statutory formula	\$	263,800.00	,	
	2. Enter amount of gross receipts from space K				
	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 a	and 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,8	800 (but le	ess than \$527,	600)	
	1. Enter the amount of gross receipts from space K	\$	303,376.59		
	2. Base amount under statutory formula	\$	263,800.00		
	3. Subtract line 2 from line 1	\$	39,576.59		
	4. Multiply line 3 by .01	· · · · · · · · · · ·	\$	395.77	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	· · · · · · · · · · ·	\$	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8			0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4,	5, and 6	••••••	\$	1,714.77
	FILING FEE AND TOTAL REMITTANCE DUE				
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	· · · · · · · · · .	\$	1,714.77	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	· · · · · · · · · · ·	\$	20.00	
				¢	4 70 4
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,734.77
	Important: Your remittance must be in the form of an electronic paym See page i of the general instructions in the paper SA1-2				ghts!

Accounting Period:	2020/2	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Iowa, LLC (Toledo, IA)	SYSTEM ID# 1250
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	67 73
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 Telephon	e 845-443-2782
	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)	
O 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 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable 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 of 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 here 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)] 	e system as identified owner of the cable system
	X /s/ Kenneth J. Kohrs 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: Vice President, Financial Reporting (Title of official position held in corporation or partnership)	
	Date: 2/15/2021	

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

ounting Period: 2020/2	FORM SA1-2E. PAGE
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
CC Iowa, LLC (Toledo, IA)	125
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 add lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall no scribers and amounts collected from subscribers receiving secondary transmissions pursuant to sec For more information on when to exclude these amounts, see the note on page (vii) of the general instruction located in the paper SA1-2 form.	the basic t include sub- ction 119." Concerning Gross Receipts Exclusion
During the accounting period, did the cable system exclude any amounts of gross receipts for secondary tr made by satellite carriers to satellite dish owners?	ansmissions
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or ur For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S	A1-2 form.
	A1-2 form.
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S	A1-2 form.
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S	
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form.
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmen - days -
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmen
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmen - days -
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmen days -
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmen days - 00274 - st charge)
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmer days 00274 - st charge)
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmer days days 00274 - st charge) stance please
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmer days days 00274 - st charge) stance please Office, please
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