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
2/22/2022	\$
	ALLOCATION NUMBER

Return completed workbook by email to:

#### coplicsoa@copyright.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))
		2021/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		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.
		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)
		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)
	INST	RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
C		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 suffciency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  Google Fiber Utah, LLC
D	Instructions: List each separate community served by the cable system. A "comm rules: "a separate and distinct community or municipal entity (including unincorporated including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first conidentification hereafter known as the "first community." Please use it as the first of the cable system. A "community of the cabl
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobil identified city.
	CITY OR TOWN
First	Provo
Community	Millcreek
	Salt Lake City
dd Rows as Necessary	South Salt Lake
	Taylorsville

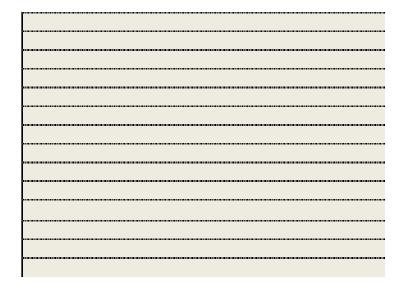
FORM SA1-2E. PAGE 1b.

# 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



Accounting Period: 44228

FORM SA1-2E. PAGE 2.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Google Fiber Utah, LLC

63494

# Ε

### 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.

BLO	OCK 1		BLOC	K 2	
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
<ul> <li>Service to first set</li> </ul>	207	\$30/mo			
<ul> <li>Service to additional set(s)</li> </ul>					
<ul> <li>FM radio (if separate rate)</li> </ul>					
Motel, hotel					
Commercial					
Converter					
Residential					
Non-residential					
	······	†····	•	†····	1

# 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.

	BLO	CK 1		BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable		Motel, hotel		Video on demand	PP
<ul> <li>Pay cable—add'l channel</li> </ul>	PP	Commercial			
Fire protection		• Pay cable			
<ul> <li>Burglar protection</li> </ul>		<ul> <li>Pay cable-add'l channel</li> </ul>			
Installation: Residential		<ul> <li>Fire protection</li> </ul>			
First set		<ul> <li>Burglar protection</li> </ul>			
<ul> <li>Additional set(s)</li> </ul>		Other services:			
FM radio (if separate rate)		Reconnect			
Converter		Disconnect			
		<ul> <li>Outlet relocation</li> </ul>			
		<ul> <li>Move to new address</li> </ul>			

	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:						
Name	Google Fiber Utah, L	_LC						
	PRIMARY TRANSMITTERS:	: TELEVISION						
G	carried by your cable syste	lentify every television station (includiner during the accounting period, excesting permitting the state on June 24, 1981, permitting	ept (1) stations carried only on a part-					
Primary Transmitters: Television	FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network prog 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 st 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 basis Stations.							
10.0	basis under specific FCC r	rules, regulations, or authorizations: re in space G—but do list it in space I						
	<ul> <li>List the station here, and basis. For further informati Column 1: List each statio multicast stream associate "WETA-2" as the same on</li> </ul>	also in space I, if the station was carrion concerning substitute basis station on's call sign. <i>Do not</i> report originationed with a station according to its over-touch the form.	ns, see page (v) of the general instruc n program services such as HBO, ES the-air designation. For example, rep					
		nel number the FCC assigned to the to	_					
		WRC is channel 4 in Washington, D.C th case whether the station is a netwo						
	educational station, by ente	ering the letter "N" (for network), "N-M	<b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent station)					
	For the meaning of these t	), "E" (for noncommercial educational) terms, see page (iv) of the general ins on of each station. For U.S. stations, I	structions in the paper SA1-2 form.					
	For the meaning of these t Column 4: Give the location	terms, see page (iv) of the general ins	structions in the paper SA1-2 form. list the community to which the statio					
	For the meaning of these t Column 4: Give the location	terms, see page (iv) of the general inson of each station. For U.S. stations, I	structions in the paper SA1-2 form. list the community to which the statio					
	For the meaning of these t Column 4: Give the location	terms, see page (iv) of the general inson of each station. For U.S. stations, I	structions in the paper SA1-2 form. list the community to which the statio					
	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal 1. CALL SIGN	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name o	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio					
	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal	terms, see page (iv) of the general inso on of each station. For U.S. stations, I adian stations, if any, give the name o	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio					
ows as Necessary	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal 1. CALL SIGN  KJZZDT	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of 2. B'CAST CHANNEL NUMBER	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio  3. TYPE OF STATION					
Rows as Necessary	For the meaning of these the Column 4: Give the location FCC. For Mexican or Canal 1. CALL SIGN  KJZZDT  KJZZDT3	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the c	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio  3. TYPE OF STATION  I  I-M					
Rows as Necessary	For the meaning of these the Column 4: Give the location FCC. For Mexican or Canal 1. CALL SIGN  KJZZDT  KJZZDT3  KJZZDT4	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the c	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio  3. TYPE OF STATION  I  I-M  I-M					
Rows as Necessary	For the meaning of these the Column 4: Give the location FCC. For Mexican or Canal 1. CALL SIGN  KJZZDT  KJZZDT3  KJZZDT4  KSLDT	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the c	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio  3. TYPE OF STATION  I  I-M  I-M  N					
ៅ Rows as Necessary	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal 1. CALL SIGN  KJZZDT  KJZZDT3  KJZZDT4  KSLDT  KSLDT2	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control o	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio of the community with which the stational state of the community with the community with the community with the community with which the stational state of the community with which the stational state of the community with which the stational state of the community with the community					
d Rows as Necessary	For the meaning of these the Column 4: Give the location FCC. For Mexican or Canal States of the Column 4: Give the location FCC. For Mexican or Canal States of the Column 4: Give the location FCC. For Mexican or Canal States of the Column 4: Give the Column 4	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control o	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio of the community with which the station.  3. TYPE OF STATION  I-M  I-M  N-M  N-M					
d Rows as Necessary	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal Section 1. CALL SIGN  KJZZDT  KJZZDT3  KJZZDT4  KSLDT  KSLDT2  KSLDT3  KSTUDT	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control o	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio  3. TYPE OF STATION  I-M  I-M  N-M  N-M  N-M  N-M					
d Rows as Necessary	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal Section 1. CALL SIGN  KJZZDT  KJZZDT3  KJZZDT4  KSLDT  KSLDT2  KSLDT3  KSTUDT  KSTUDT2	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control o	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio  3. TYPE OF STATION  I-M  I-M  N-M  N-M  N-M  N-M  N-M					
d Rows as Necessary	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal Action 1. CALL SIGN  KJZZDT  KJZZDT3  KJZZDT4  KSLDT  KSLDT2  KSLDT3  KSTUDT  KSTUDT2  KSTUDT3	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control o	structions in the paper SA1-2 form. list the community to which the statio of the community with which the statio  3. TYPE OF STATION  I I-M I-M N-M N-M N-M N-M N-M N-M					
l Rows as Necessary	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal Section 1. CALL SIGN  KJZZDT  KJZZDT3  KJZZDT4  KSLDT  KSLDT2  KSLDT3  KSTUDT  KSTUDT2  KSTUDT3  KSTUDT3  KTMWDT	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control o	structions in the paper SA1-2 form. list the community to which the static of the community with which the static  3. TYPE OF STATION  I-M  I-M  N-M  N-M  N-M  N-M  N-M  N-					
dd Rows as Necessary	For the meaning of these to Column 4: Give the location FCC. For Mexican or Canal Section 1. CALL SIGN  KJZZDT  KJZZDT  KJZZDT4  KSLDT  KSLDT2  KSLDT3  KSTUDT  KSTUDT2  KSTUDT3  KTMWDT  KTMWDT2	terms, see page (iv) of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control of the general inson of each station. For U.S. stations, I adian stations, if any, give the name of the control o	Ist the community to which the station of the community with the					

30.4

KTVXDT2

N-M

KTVXDT3	30.5	N-M
KTVXDT4	30.6	N-M
KUCWDT	30.3	I-M
KUCWDT2	30.4	I-M
KUCWDT3	30.5	I-M
KUCWDT4	30.6	I-M
KUEDDT	27.3	E
KUEDDT2	27.4	E-M
KUEDDT3	27.5	E-M
KUENDT	36.3	E
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
	KTVXDT4  KUCWDT  KUCWDT2  KUCWDT3  KUCWDT4  KUEDDT  KUEDDT2  KUEDDT3  KUENDT  KUPXDT  KUPXDT  KUTHDT  KUTHDT  KUTHDT3  KUTHDT3  KUTHDT3  KUTYDT	KTVXDT4       30.6         KUCWDT       30.3         KUCWDT2       30.4         KUCWDT3       30.5         KUCWDT4       30.6         KUEDDT       27.3         KUEDDT2       27.4         KUEDDT3       27.5         KUENDT       36.3         KUPXDT       29.3         KUTHDT       32         KUTHDT2       32.2         KUTHDT3       32.3         KUTVDT       34

## 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 tions.
PN, etc. Identify each ort multistream

r the air in its community

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

n is licensed by the n is identified.

4. LOCATION OF STATION
Salt Lake City, UT

Salt Lake City, UT
Salt Lake City, UT
Ogden, 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
Jail Lake Jily, Ji

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					

Accounting Perio								FORM	1 SA1-2E. PAGE 5.
Name	Google Fiber Utah, LL		STEM:						SYSTEM ID# 63494
Substitute Carriage: Special Statement and Program Log	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 a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program.								
	Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program								
	log in block 2.  2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables.  Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information.  Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast 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).  Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "577."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for PCC rules and regulations in effect on October 19, 1976.								
	diede dir Odebber 10, 1070.					WHEN SUBSTITUTE			
						DELETIC			7. REASON FOR DELETION
	TITLE OF PROGRAM	Yes or No	<ol><li>STATION'S CALL SIGN</li></ol>	4. STATION'S LOCATION		5. MONTH AND DAY	FROM	— TO	

Accounting Period			I-2E. PAGE 6.					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  Google Fiber Utah, LLC	51	STEM ID# 63494					
K Gross Receipts	(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)							
	IMPORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gro	,260.00 ess receipts)					
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 to \$2  • 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.	263,800						
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS							
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay accounting period is \$52.00	for this six-mo	nth					
	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							
	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 \$52	7,600)						
	Enter the amount of gross receipts from space K							
	2. Base amount under statutory formula \$ 263,800.00							
	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) \$	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							
	FILING FEE AND TOTAL REMITTANCE DUE							
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00						
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00						
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00					
	EFT Trace # or TRANSACTION ID #							
	Important: Your remittance must be in the form of an electronic payment payable to the Registon See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for remarks the second							

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

Accounting Period	: 44228					FORM SA1-2E. PAGE 7.		
Name	Google Fiber U	OWNER OF CABLE SYSTEM: Jtah, LLC	<u> :</u>			SYSTEM ID# 63494		
<b>IVI</b> 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.							
		number of channels on whic levision broadcast stations .		ole		30		
	on which the cabl	number of activated channe e system carried television t t services	broadcas	t stations		303		
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	Taj Wilson			Telephone	e (650) 253-0000		
omadon	Address	1600 Amphitheatre (Number, street, rural route, apar						
		Mountain View, CA (City, town, state, zip)	94043					
	Email	ACCESS-COM	√PLIAN	CE@google.com	Fax (optional)			
U	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)							
Certification	• I, the undersigne	ed, hereby certify that (Check o	ne, <i>but oi</i>	ly one, of the boxes.)				
	(Owne	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or						
		(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified						
	in line 1 of space B and that the owner is not a corporation or partnership; or  (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein							
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.  [18 U.S.C., Section 1001(1986)]							
			<u>X</u>	/s/Fleur Knowsley		_		
				electronic signature on the line aborature using an "/s/ signature" (e.g				
		Typed or printed	d name:	Fleur Knowsley				
		Title:	Mana	ger - Google Fiber Utah,	LLC			
	(Title of official position held in corporation or partnership)							
		Date:			02/28/2021			

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

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

ccounting Period: 44228	FORM SA1-2E. PAGE 8.
EGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
oogle 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 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?  X NO  YES. Enter the total here and list the satellite carrier(s) belov\$	P Special Statement Concerning Gross Receipts Exclusion
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 underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	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 please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number First community served Accounting period	

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