THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 Short Form

				Return to:					
STATEMENT OF ACCOUNT		FOR COPYRIGH	Library of Congress Copyright Office						
-	ary Transmissions by	DATE RECEIVED AMOUNT		Licensing Division					
Cable Systems (Short Form)			\$	101 Independence Ave. SE Washington, DC 20557-6400					
General instru	ctions are at the	00/07/0040		(202) 707-8150					
end of this form [pages (i)-(vii)].		08/27/2018	ALLOCATION NUMBER	For courier deliveries, see page ii of the general instructions					
Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT:							
Accounting Period	January 1, 2018 - June	30, 2018							
D	Instructions: Your file has been established under the information given below. If there are any changes, draw a line through the								
B Owner	incorrect information and print or type the correct information beside it. 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. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LEGAL NAME OF OWNER/MAILING AD	DRESS OF CABLE SYSTEM							
	Vyve Broadband A, LLC								
				00391720181					
				003917 2018/1					
	4 International Dr Suite 330)							
	Rye Brook, NY 10573								
С	INSTRUCTIONS: In line 1, give any bunch and a line and appear in space B. In line 1								
System	IDENTIFICATION OF CABLE SYSTEM:								

System	1	l:		
	MAILING ADDRESS OF CABLE SYST	EM:		
	2 Number, street, rural route, apartment, or su	te number)		
	(City, town, state, zip code)			
D	in FCC rules: "a separate and distin	ct community or municipal entitiy	tem. A "community" is the same as a "commun (including unincorporated communites within u R. 76.5(dd). The first community that list will se	inincorporated
Aroa	of system identification bereafter kn	own as the "first community " Pl	ase use it as the first community on all future fi	linge
Area Served			ease use it as the first community on all future fi ms, or mobile home parks should be reported ir	•
	Note: Entities and properties such a the identified city.	s hotels, apartments, condiminiu	ms, or mobile home parks should be reported in	STATE
Served	Note: Entities and properties such a the identified city. CITY OR TOWN	s hotels, apartments, condiminiu STATE AR	ms, or mobile home parks should be reported in	n paratheses below
Served	Note: Entities and properties such a the identified city. CITY OR TOWN MCGEHEE MITCHELVILLE	s hotels, apartments, condiminiu STATE AR AR AR	ms, or mobile home parks should be reported in	STATE
Served	Note: Entities and properties such a the identified city. CITY OR TOWN MCGEHEE MITCHELVILLE LAKE VILLAGE	s hotels, apartments, condiminiu STATE AR AR AR AR	ms, or mobile home parks should be reported in	STATE
Served	Note: Entities and properties such a the identified city. CITY OR TOWN MCGEHEE MITCHELVILLE LAKE VILLAGE DUMAS	s hotels, apartments, condiminiu STATE AR AR AR AR AR AR	ms, or mobile home parks should be reported in	STATE
Served	Note: Entities and properties such a the identified city. CITY OR TOWN MCGEHEE MITCHELVILLE LAKE VILLAGE	s hotels, apartments, condiminiu STATE AR AR AR AR	ms, or mobile home parks should be reported in	STATE

Form SA1-2c Rev 04/2011

PRIVATELY REPRODUCED NON-GOVERNMENT FORM (TBMJ123)

				FORM SA3. PAGE 1b. SYSTEM ID#				
	LEGAL NAME OF OWNER OF CABLE SYSTEM:							
Name								
	Vyve Broadband A, LLC		-	003917				
	CITY OR TOWN	STATE	CITY OR TOWN	STATE				
D								
(continued)								
(continued)								
Area								
Served								
		••••••						
		••••••						
		••••••						
		••••••						
		••••••						

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:								TEM II 0039	
	Vyve Broadband A, LLC									
Е	SECONDARY TRANSMISSION			-	-					
E	In General: The information in s	•		•		,				
Secondary	system, that is, the retransmission about other services (including particulation)					•				
Transmission	last day of the accounting period	, , ,			,					
Service: Sub-	Number of Subscribers: Bot	•				,	ble system	ı, 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	each category by counting the n separately for the particular serv							charged		
	Rate: Give the standard rate of							ge and the		
	unit in which it is generally billed	. (Example: "\$	20/mth"). Summarize a	ny standa	ard rate variation	s within a	particular rate		
	category, but do not include disc									
	Block 1: In the left-hand block			-		•				
	systems most commonly provide that applies to your system. Not									
	categories, that person or entity			-		-				
	subscriber who pays extra for ca	ble service to	addition	al sets would b	e include	d in the count u	nder "Servi	ce to the		
	first set" and would be counted of									
	Block 2: If your cable system printed in block 1 (for example, t	-		-						
	with the number of subscribers a					,		, 0		
	sufficient.		ongin							
	BLO	DCK 1					BLOCK	(2		
		NO. OF		DATE	0.4.7			NO. OF	DAT	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT	
			669	25.00						
	Service to first set		009	25.00						
	Service to additional set(s)									
	• FM radio (if separate rate)									
	Motel, hotel Commercial		67	25.00						
	Converter		07	25.00						
	Residential Non-residential									
	• Non-residential									
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	3					
F	In General: Space F calls for ra	te (not subscril	oer) info	rmation with re-						
- F	not covered in space E, that is, t			mation with re-	spect to a	all your cable sy	stem's serv	vices that were		
-	-			not offered in c	ombinati	on with any sec	ondary trar	nsmission		
Services	service for a single fee. There are	e two exception	ns: you	not offered in o do not need to	ombinati give rate	on with any sec information cor	ondary trar cerning (1	nsmission) services		
- Services Other Than	service for a single fee. There an furnished at cost or (2) services	e two exception or facilities fur	ns: you	not offered in c do not need to o nonsubscribe	combinati give rate rs. Rate i	on with any sec information con	ondary trar cerning (1 Id include	nsmission) services both the		
	service for a single fee. There al furnished at cost or (2) services amount of the charge and the ur enter only the letters "PP" in the	e two exception or facilities furm hit in which it is rate column.	ns: you nished t usually	not offered in o do not need to o nonsubscribe billed. If any ra	combinati give rate rs. Rate i tes are c	on with any sec information cor nformation shou harged on a var	ondary trar cerning (1 Id include able per-p	nsmission) services both the		
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Primary Transmitters: Television

	•			FORM SA1-2. PAGE 3			
Name	LEGAL NAME OF OWNE	R OF CABLE SYSTEM	1:	SYSTEM ID#			
Name	Vyve Broadband A, LLC 00						
	PRIMARY TRANSMITTERS:	TELEVISION					
G Primary psmitters: elevision	 In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Column 2: Give the number of the channel on which the station's broadcasts are carried in its own community. This may be different from the channel on which your cab; system carried the station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational, "I" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instruction. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for noncommercial educational multicast). Fo						
	1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	6. LOCATION OF STATION			
	010IN	NUMBER	STATION				
	KETS-PBS	2	E	LITTLE ROCK AR			
	KATV-TBD TV	7.4	I-M	Little Rock, AR			
	KARZ-MNT	42	I	LITTLE ROCK AR			
	KTHV-Quest	11.4	I-M	Little Rock, AR			
	KATV-ABC	7	N	LITTLE ROCK AR			
	KLRT-FOX	16	I	LITTLE ROCK AR			
			+				

KATV-IDD IV	1.4	I-IVI	Little Rock, AR
KARZ-MNT	42	I	LITTLE ROCK AR
KTHV-Quest	11.4	I-M	Little Rock, AR
KATV-ABC	7	N	LITTLE ROCK AR
KLRT-FOX	16	I	LITTLE ROCK AR
KTVE-NBC	10	N	EL DORADO AR
KTHV-CBS	11	N	LITTLE ROCK AR
KASN-CW	38	I	PINE BLUFF AR
KVTN-IND	25	I	PINE BLUFF AR
KATV-COMETTV	7.2	I-M	LITTLE ROCK AR
KATV-Charge TV	7.3	I-M	LITTLE ROCK AR
KTHV-ANTENNATV	11.2	I-M	LITTLE ROCK AR
KTHV-JUSTICE	11.3	I-M	LITTLE ROCK AR
KARZ-BOUNCE	42.2	I-M	LITTLE ROCK AR
KETS-CREATE	2.2	I-M	LITTLE ROCK AR
KETS-PBS Kids	2.3	E-M	LITTLE ROCK AR
KETS-World	2.4	I-M	LITTLE ROCK AR

ACCOUNTING PERIOD: 2018/1

ORM SA1-2. F EGAL NAME OF /yve Broadl	F OWNER OF (YSTEM:				SYSTEM ID# 003917	Name
	,						500011	
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	
all-band basis whose signals were "generally receivable" by your cable system during the accounting period. 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 the Copyright Office regulations on this point, see page (v) of the general instructions. 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								Primary Transmitter: Radio
	1	s, if any, t	the community with which the		-			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

FORM SA1-2. PAGE 5.

Name	LEGAL NAME OF OWNER OF Vyve Broadband A, LL		TEM:						SYSTEM ID# 003917
Substitute	SUBSTITUTE CARRIAGE In General: In space I, identi substitute basis during the ac explanation of the programmi	fy every not	nnetwork televis eriod, under spe	sion program broadcast b cific present and former F	y a CC	distant stat Crules, regu	lations, or au		
Carriage: Special Statement and Program Log	1. SPECIAL STATEMENT • During the accounting per broadcast by a distant stat	CONCER iod, did you tion?	RNING SUBS	TITUTE CARRIAGE n carry, on a substitute b	as	is, any non	network telev	Yes	ХNо
	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 attach additional pages. 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 "5/7." 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 pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.								is tation ion. or n onth tely red n
	SU 1. TITLE OF PROGRAM	JBSTITUT 2. LIVE? Yes or No	E PROGRAM 3. STATION'S CALL SIGN	4. STATION'S LOCATION	_	CARR 5. MONTH AND DAY	IAGE OCCU 6. T FROM –	MES	7. REASON FOR DELETION

FORM SA1-2. PAGE 6.		
LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC	SYSTEM ID# 003917	Name
	000017	
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions. 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.	hission service	K Gross Receipts
COPYRIGHT ROYALTY FEE		
 COPTRIGHT 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 \$ 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 for more information. 	263,801	L Copyright Royalty Fee
BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00	his six-month	
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 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1		
1. Base amount under statutory formula \$ 263,800.00		
2. Enter amount of gross receipts from space K		
3. Subtract line 2 from line 1		
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	600)	
1. Enter the amount of gross receipts from space K		
2. Base amount under statutory formula		
3. Subtract line 2 from line 1		
4. Multiply line 3 by .01		
5. Royalty due on the first \$263,800 of gross recepits (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		
IMPORTANT : Your remittance must be in the form of an <i>electronic payment</i> payable to <i>Register of Copyrights</i> . See pageneral instructions for more information.	ge I of the	

	FORM SA1-2. PAGE	Ξ7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM I	
Name	Vyve Broadband A, LLC 0039	17
	CHANNELS	
М	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.	
Channels		
	1. Enter the total number of channels on which the cable 18	
	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	
Ν	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom we can write or call about this statement of account.)	
Individual to		
Be Contacted		
for Further	Name Marie Censoplano Telephone 914-235-8313	
Information		
	Address 4 International Dr Suite 330	
	Address <u>4 International Dr Suite 330</u> (Number, street, rural route, apartment, or suite number)	
	Rye Brook, NY 10573	
	(City, town, state, zip)	
	Email (optional) marie.censoplano@vyvebb.com Fax (optional) 914-234-8363	
	CEDTIEICATION /This statement of account must be partified and signed in accordance with Convright Office regulations	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulations, as explained in the general instructions.)	
Certifcation	 I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) 	
Gertification		
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed 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)]	
	Handwritten signature: /s/ Daniel J White	
	Typed or printed name: Daniel I White	
	Typed or printed name: Daniel J White	
	Title: SVP Financial Planning	
	(Title of official position held in corporation or partnership)	
	Date: 8/24/18	
	1	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Nama
Vyve Broadband A, LLC	003917	Name
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 th lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the bas service of providing secondary transmissions of primary broadcast transmitters, the system shall not inclu- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section ' For more information on when to exclude these amounts, see the note on page (vii) of the general instructions.	asic ide sub-	P Special Statement Concerning Gross Receipts
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmis made by satellite carriers to satellite dish owners?	ssions	Exclusion
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpa For an explanation of interest assessment, see page (viii) of the general instructions.	ayment.	Q
Line 1 Enter the amount of late payment or underpayment		Interest Assessment
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** enter here and on line 3, block 4, space L, (page 7)	- harge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, list below the owner, address, first community served, ID number, and accounting period as given in the original		
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 Offce to collect the personally identifying infor	mation (PII) requested	on th

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effects 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 filing, a determination that would be made by a court of law.