C v	Cable Worksheet		\$ Total amount of re	Number o	Number of SAs rec'd		
			Date of remittance	2	Check	🔲 EFT	G FILING FE
Cable ID #						Amount/I	nitials
Examined by	Rev	riewed by	Date examination completed	Allocatio	n number	\$	
Space A Accounting Period							
	January	/ 1 – June 30, 20		🔲 July 1 – D	ecember 31, 20		
	Letter s	ent		🔲 Informat	ion received		
	Accepte	ed 🔲 Phone call/	/Date/Contact				
Space B Owner							
	Letter se	ent		🔲 Informat	ion received		
	Accepte	ed 🔲 Phone call/	/Date/Contact				
Space D Area Served							
	Letter se	ent		🔲 Informat	ion received		
	Accepte	ed 🔲 Phone call/	/Date/Contact				
Space E Secondary Transmission							
Service Subscribers:	Letter se	ent		Informat	ion received		
and Rates	Accepte	ed 🔲 Phone call/	/Date/Contact				
Space G Primary Transmitters: Television							
	Letter se	ent		🔲 Informat	ion received		
	Accepte	ed 🔲 Phone call/	/Date/Contact				
Space H Primary Transmitters:							
Radio	Accepte	ed 🔲 Phone call/	/Date/Contact				

			Space I Substitute Carriage
Letter sent		Information received	
Accepted	Phone call/Date/Contact		
			Space J Part-time Carriage Log
Letter sent		Information received	(SA3 only)
Accepted	Phone call/Date/Contact		
			Space K Gross Receipts
Letter sent		Information received	
Accepted	Phone call/Date/Contact		
			Space L Copyright Filing and Royalty Fees
Royalty Fee s	hould be \$	Refund request to fiscal	
Letter sent		Information received	
Accepted	Phone call/Date/Contact		
			Space M Channels
Letter sent		Information received	
Accepted	Phone call/Date/Contact		
			Space O Certification
Letter sent		Information received	
Accepted	Phone call/Date/Contact		
			Space P Statement of Gross Receipts
Letter sent		Information received	
Accepted	Phone call/Date/Contact		
			Space Q Interest Assessment
Letter sent		lnfo/add'l fee received	
Accepted	Phone call/Date/Contact		

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.

DATE RECEIVED

STATEMENT OF ACCOUNT

for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are at the end of this form [pages (i)-(vii)].

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

SA1-2 Short Form

Return to:

Library of Congress Copyright Office

Licensing Division 101 Independence Ave. SE *Washington, DC 20557-6400* (202) 707-8150

For courier deliveries, see page ii of the general instructions

Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT:					
Accounting Period	January 1-June 30, 201	9					
B Owner	incorrect information and print or type the of Give the full legal name of the owner of rate title of the subsidiary, not that of the pa List any other name or names under w If there were different owners during the a single statement of account and royalty for	correct information beside it. of the cable system. If the owner is a subsider arent corporation. which the owner conducts the business of the	e last day of the accounting period should submit period.	e 00060			
	LEGAL NAME OF OWNER/MAILING AD Vyve Broadband A, LLC	DRESS OF CABLE SYSTEM					
				000604 2019/1			
	4 International Dr Suite 33	D					
	Rye Brook, NY 10573						
С	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.						
System	1						
	MAILING ADDRESS OF CABLE SYSTEM	1:					
	2 (Number, street, rural route, apartment, or suite r	number)					
	(City, town, state, zip code)						
D	in FCC rules: "a separate and distinct of	community or municipal entitiy (including	community" is the same as a "community u g unincorporated commuinites within uninco dd). The first community that list will serve a	orporated			
Area	0 0 1	. , , , ,	it as the first community on all future filings				
Served	Note: Entities and properties such as h the identified city.	notels, apartments, condiminiums, or mo	obile home parks should be reported in para	atheses below			
_	CITY OR TOWN	STATE	CITY OR TOWN	STATE			
First Community	Winters	TX					

Form SA1-2c Rev 04/2011

Name	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						SYS	STEM ID		
Name	Vyve Broadband A, LLC								00060		
_	SECONDARY TRANSMISSION	SERVICE: SU	BSCRIB	ERS AND RA	TES						
E	In General: The information in s					y transmission	service of	the cable			
	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information										
Secondary	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the										
Transmission Service: Sub-	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										
scribers and	down by categories of secondary transmission service. In general, you can compute the number of subscribers in										
Rates	each category by counting the nu	umber of billing	s in that	category (the	number o	f persons or org	anizations				
	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.										
	category, but do not include disc	· · ·	,		Ty Standa		5 within a				
	Block 1: In the left-hand block				ies of sec	ondary transmis	sion servi	ce that cable			
	systems most commonly provide										
	that applies to your system. Note			-		-					
	categories, that person or entity s subscriber who pays extra for cal										
	first set" and would be counted o										
	Block 2: If your cable system h										
	printed in block 1 (for example, ti										
	with the number of subscribers a sufficient.	nd rates, in the	e right-ha	nd block. A tv	/o- or thre	e-word descript	ion of the	Service is			
		DCK 1					BLOC	К 2			
		NO. OF	-				DLOC	NO. OF	1		
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RAT		
	Residential:										
	 Service to first set 		53	25.00							
	 Service to additional set(s) 										
	 FM radio (if separate rate) 										
	Motel, hotel										
	Commercial		15	25.00							
	Converter										
	• Residential										
	 Non-residential 										
	SERVICES OTHER THAN SEC						tom'o com	viene that ware			
F	In General: Space F calls for rate not covered in space E, that is, the	•	,		•	• •					
-	service for a single fee. There are										
Services	furnished at cost or (2) services of										
Other Than	amount of the charge and the un		usually b	illed. If any ra	tes are ch	arged on a vari	able per-p	rogram basis,			
Secondary ransmissions:	enter only the letters "PP" in the rate column.										
Rates	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										
	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) descrip	tion and includ	le the rate	e for each.							
		BLO	CK 1					BLOCK 2			
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SER	VICE	RATE	CATEC	GORY OF SERVICE	RAT		
	Continuing Services:		Installat	tion: Non-res	idential						
	• Pay cable	19.95	• Mote	el, hotel							
	 Pay cable—add'l channel 		• Com	mercial							
	 Fire protection 		• Pay	cable							
	 Burglar protection 		• Pay	cable-add'l ch	annel						
	Installation: Residential		• Fire	protection							
	• First set	64.95	• Burg	lar protection							
	 Additional set(s) 		Other s	ervices:							
	• FM radio (if separate rate)		• Reco	onnect		39.95			Ι		
	• Converter		• Disc	onnect					Ι		
			• Outle	et relocation		20.00			Ι		
			• Mov	e to new addr	ess	39.95			Τ		
				o to non adai							

Vyve Broadband A, LLC 000 PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a	Name	LEGAL NAME OF OWNE	ER OF CABLE SYSTEM	Л:	S	YSTEM ID
G Primary Tansmitters Television In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of cartian 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: - 0 oncl its the station here in space G — but do list it in space 1 (the Special Statement and Program Log)—If the station was carried only on a substitute basis. • 1 bot at list the station here in space G — but do list it in space 1 (the Special Statement and Program Log). - Dift the station moment of no channel on which your cable system carried the station State carried in its own community. This may be different from the channel on which your cable system carried the station. Identify each multicast stream associated with a station accrding to its over-thje-air designation. For example, report multicast stream "WETA-2" as the same on the form. Column 3: Indicate in each case whether the station is an etwork multicast), "f" (for independent], "LM" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational station, yet remy see apper (iv) of the general instructions. Column 4: Give the location of each station. For U.S. stations, list the co	Name	Vyve Broadband	A, LLC			00060
G 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 75.59(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 brogram 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, as explained in the next paragraph. • Do not list the station here in space C—but do list it in space 1 (the Special Statement and Program Log)—If the station was carried only on a 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 he station. Column 2: Give the number of the channel on which wour cable system carried the station, or a noncommercial educational station, by entring the letter 1%' (for network multicast). "If 'for independent, "I-M" (for independent multicast), "E' (for noncommercial educational), or "E-M" (for noncommercial educational station, by entring the letter of U.S. stations, list the community with which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. 1. CALL 2. B'CAST 3. TYPE 6. LOCATION OF STATION SIGN CHANNEL OF NuMBER STATION		PRIMARY TRANSMITTERS	: TELEVISION			
SIGNCHANNEL NUMBEROF STATIONKPCB17ISnyder, TXKTAB32NAbilene, TXKRBC9NAbilene, TXKXVA15IAbilene, TXKTXS12NSweetwater, TXKTXS-CW12.2I-MSweetwater, TX	Primary Transmitters:	carried by your cable syst FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, Substitute Basis Stat basis under specifc FCC f • Do not list the station here, and basis. For further inforn Column 1: List each s Column 2: Give the nu This may be different from associated with a station a the same on the form. Column 3: Indicate in educational station, by en (for independent multicas) For the meaning of these Column 4: Give the lo	em during the accourt s in effect on June 24 (e)(2) and (4), or 76.1 as explained in the m ions: With respect to rules, regulations, or rre in space G—but d y on a substitute bas d also in space I, if th mation concerning su tation's call sign. Do umber of the channel n the channel on whice according to its over- each case whether th tering the letter "N" (f t), "E" (for noncomment terms, see page (iv) cation of each station	nting period, exce , 1981, permitting 63 (referring to 76 ext paragraph. any distant static authorizations: o list it in space I s. e station was carr bstitute basis stat not report originat on which the stati thy your cab; e syste thje-air designation e station is a network), "N-M ercial educational) of the general inst b. For U.S. station	ot (1) stations carried only on a part-time basis under the carriage of certain network programs [sections .61(e)(2) and (4))]; and (2) certain stations carried on a ns carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ed both on a substitute basis and also on some other ions, see page (v) of the general instructions. ion program services such as HBO, ESPN, etc. on's broadcasts are carried in its own community. em carried the station. Identify each multicast stream n. For example, report multicast stream "WETA-2" as vork station, an independent station, or a noncommercial ' (for network multicast), "I" (for independent), "I-M" or "E-M" (for noncommercial educational multicast). ructions. s, list the community to which the station is licensed by the	
KTAB32NAbilene, TXKRBC9NAbilene, TXKXVA15IAbilene, TXKTXS12NSweetwater, TXKTXS-CW12.2I-MSweetwater, TX			CHANNEL	OF	6. LOCATION OF STATION	
KRBC9NAbilene, TXKXVA15IAbilene, TXKTXS12NSweetwater, TXKTXS-CW12.2I-MSweetwater, TX		КРСВ	17	I	Snyder, TX	
KXVA15IAbilene, TXKTXS12NSweetwater, TXKTXS-CW12.2I-MSweetwater, TX		КТАВ	32	N	Abilene, TX	
KTXS 12 N Sweetwater, TX KTXS-CW 12.2 I-M Sweetwater, TX		KRBC	9	N	Abilene, TX	
KTXS 12 N Sweetwater, TX KTXS-CW 12.2 I-M Sweetwater, TX		KXVA	15	I	Abilene, TX	
		KTXS	12	N		
		KTXS-CW	12.2	I-M	Sweetwater, TX	
				I-M		

ACCOUNTING PERIOD: 2019/1

FORM SA1-2. F	FOWNER OF (/STEM:				SYSTEM ID#	Name	
Vyve Broad	band A, LLO	J					000604		
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.									
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									
	1	-	he community with which the		-	ſ			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION		
	I	I				L	<u> </u>		

FORM	SA1-2.	PAGE	5

								VI SA1-2. PAGE 5.		
Name	LEGAL NAME OF OWNER OF C Vyve Broadband A, LL		EM:					SYSTEM ID# 000604		
Substitute Carriage: Special Statement and	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried 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. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?									
Program Log	Note: If your answer is "No" log in block 2.		rest of this pag	e blank. If your answer is	"Yes," you n	nust complete		⊠No		
	2. LOG OF SUBSTITUTE In General: List each substiclear. If you need more space Column 1: Give the title of period, was broadcast by a of under certain FCC rules, reg Do not use general categori "NBA Basketball: 76ers vs. I Column 2: If the program Column 3: Give the call s Column 4: Give the broa the case of Mexican or Cana Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the lette to delete under FCC rules a gram was substituted for pro- effect on October 19, 1976.	tute progra ce, please a of every noi distant stati gulations, o es like "mor Bulls." a was broac sign of the s dcast static adian statio th and day e "5/7." s when the Example: a er "R" if the nd regulatic	m on a separa attach additiona nnetwork televi on and that your r authorizations vies" or "baske dcast live, enter station broadca on's location (the ns, if any, the of when your syste substitute prop program carried listed program ons in effect du	al pages. sion program (substitute j ur cable system substitute s. See page (v) of the gen tball." List specific program "Yes." Otherwise enter "I sting the substitute progra te community to which the community with which the sem carried the substitute gram was carried by your ed by a system from 6:01: was substituted for program ring the accounting period	program) that d for the pro- neral instruction m titles, for end No." am. e station is lice station is ide program. Us cable system 15 p.m. to 6 amming that d; enter the lo	t, during the a gramming of ons for furthe xample, "I Lor ensed by the entified). e numerals, v n. List the time 28:30 p.m. sh your system v	Accounting another station r information. ve Lucy" or FCC or, in with the month es accurately hould be was required listed pro	n		
	S	JBSTITUT	E PROGRAM	l	WI CAR	7. REASON				
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		TIMES — TO	FOR DELETION		
					-	·				
							_			
							_			
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FORM SA1-2. PAGE 6.		-
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Vyve Broadband A, LLC	000604	
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Ent 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	ission service	K Gross Receipts
	(
 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 for more information. 	263,800	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 th accounting period is \$52.00	is 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	\$ 52.00	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,10		
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		
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	500)	
	,	
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 page general instructions for more information.	e I of the	

		FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC	SYSTEM ID# 000604
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast state to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations on which the cable system carried television broadcast stations and nonbroadcast services	ions 7 80
N Individual to Be Contacted for Further Information	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom we can write or call about this statement of account.) Name Marie Censoplano Telephone 91	4-235-8313
	Address 4 International Dr Suite 330 (Number, street, rural route, apartment, or suite number) Rye Brook, NY 10573 (City, town, state, zip) Email (optional) marie.censoplano@vyvebb.com Fax (optional)	
O Certifcation	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulation as explained in the general instructions.) I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system 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 identifed as owner 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 I 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 J White Title: SVP Financial Planning (Title of official position held in corporation or partnership)	or stem as identified r of the cable system
	Date: 8/23/2019	

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

FORM SA1-2. PAGE 8	FORM	SA1-2.	PAGE 8
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yve Broadband A, LLC 000604 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: 	EGAL NAME OF OWNER OF C	ABLE SYSTEM:		SYSTEM ID#	Nomo
The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "a vice of providing sectored ary transmissions of primary broadcast transmitters, the system for the basic sorbers 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. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? No YES. Enter the total here and list the satellite carrier(s) below. Name Maing Address Name Maing Address Name Maing Address Line 1 Enter the amount of late payment or underpayment. For an explanation of interest rasessment, see page (viii) of the general instructions. Line 2 Multiply line 1 by the interest rate* and enter the sum here. 1 Nume 1 Line 2 Multiply line 1 by the interest rate* and enter the sum here. 2 No0274 Line 4 Multiply line 2 by the number of days late and enter the sum here. 2 No0274 Line 4 Multiply line 2 by the number of days late and enter the sum here. 2 No0274 Line 4 Multiply line 2 by the number of days late and enter the sum here. 2 No0274 Line 4 Multiply line 3 by 0.00274*** enter here and on line 3, block 4, space L, (page 7). 3 Nover Multiply line 3 by 0.00274*** enter here and on line 3, block 4, space L, (page 7). 5 No0274 Line 4 Multiply line 3 by 0.00274*** enter here and on line 3, block 4, space L, (page 7). 5 No0274 Line 4 Multiply line 3 by 0.00274*** enter here and on line 3, block 4, space L, (page 7). 5 No0274 Line 4 Multiply line 3 by 0.00274*** enter here and on line 3, block 4, space L, (page 7). 7 No view the interest rate chart click on www.copyright.gov/licensing/interest-rate. pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	/yve Broadband A, LLC	;		000604	Name
Mailing Address Mailing Address Mailing Address INTEREST ASSESSMENTS 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. Interest Line 1 Enter the amount of late payment or underpayment.	The Satellite Home Viewer lowing sentence: "In determining the service of providing scribers and amour For more information on w During the accounting peri made by satellite carriers t X NO	Act of 1988 amended Title 17, section total number of subscribers and the gro secondary transmissions of primary br nts collected from subscribers receiving hen to exclude these amounts, see the od did the cable system exclude any ar o satellite dish owners?	111(d)(1)(A), of the Copyright Act by add oss amounts paid to the cable system for oadcast transmitters, the system shall no secondary transmissions pursuant to sec note on page (vii) of the general instruction nounts of gross receipts for secondary transmissions for secondary tran	the basic t include sub- ction 119." ons.	P Special Statement Concerning Gross Receipts Exclusion
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Line 3 Multiply line 2 by the number of days late and enter the sum here	Line 2 Multiply line 1 by the	ne interest rate* and enter the sum here		-	
space L, (page 7)	Line 3 Multiply line 2 by the	ne number of days late and enter the su		-	
contact the Licensing Division at (202) 707-8150 or licensing@loc.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address			\$	- est charge)	
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Address		-			
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First community served Accounting period	First community served				
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	Privacy Act Notice: Section 111	of title 17 of the United States Code authorizes th	e Copyright Offce to collect the personally identifyin	g information (PII) requeste	d 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 fling, a determination that would be made by a court of law.