## 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	T OFFICE USE ONLY	Library of Congress Copyright Office
for Secondary Transmissions by	DATE RECEIVED	AMOUNT	Licensing Division
Cable Systems (Short Form)		\$	101 Independence Ave. SE Washington, DC 20557-6400
General instructions are at the end of this form [pages (i)-(vii)].	3/30/22	ALLOCATION NUMBER	(202) 707-8150 For courier deliveries, see page ii of the general instructions
L			1

Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT:				
Accounting Period	July 1-December 31, 20	19				
B Owner	incorrect information and print or type the co Give the full legal name of the owner of rate title of the subsidiary, not that of the par ☐ List any other name or names under wh If there were different owners during the <u>a single statement of account and royalty fe</u>	rrect information beside it. the cable system. If the owner is a sub ent corporation. ich the owner conducts the business of <i>a accounting period, only the owner on</i> <i>e payment covering the entire accountil</i>	the last day of the accounting period should submi	# 006238		
	LEGAL NAME OF OWNER/MAILING ADD	RESS OF CABLE SYSTEM				
	Vyve Broadband A, LLC					
			*00	623820192*		
				006238 2019/2		
	4 International Dr Suite 330 Rye Brook, NY 10573					
С			tify the business and operation of the system			
-		e 2, give the mailing address of the	e system, if different from the address given in	i space B.		
System	1					
	MAILING ADDRESS OF CABLE SYSTEM:					
	2 (Number, street, rural route, apartment, or suite nu	mber)				
	(City, town, state, zip code)					
D			A "community" is the same as a "community			
		, , , ,	ding unincorporated communities within unin 5(dd) The first community that list will serve			
Area	areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.					
Served		-	r mobile home parks should be reported in pa			
	CITY OR TOWN	STATE	CITY OR TOWN	STATE		
First	Stigler	OK				
Community	Haskel Co	OK		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Whitefield	OK				
			-			
form in order to proo numbers. By provid search reports prep	cess your statement of account. PII is any personal ing PII, you are agreeing to the routine use of it to e	information that can be used to identify or tra- stablish and maintain a public record, which PII requested is that it may delay processing	personally identifying information (PII) requested on this ace an individual, such as name, address and telephone includes appearing in the Offce's public indexes and in of your statement of account and its placement in the ould be made by a court of law.			

Form SA1-2c Rev 04/2011

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					SA3. PAGE TEM II	
Name	Vyve Broadband A, LLC							00623	
	vyve Broaubanu A, LLC	,							
Е	SECONDARY TRANSMISSION								
E	In General: The information in s	•	Ũ						
Coordoni	system, that is, the retransmission								
Secondary Transmission	about other services (including plast day of the accounting period					those exis	ung on the		
Service: Sub-	Number of Subscribers: Both	`			,	ble svsten	n. broken		
scribers and	down by categories of secondar								
Rates	each category by counting the n	umber of billin	gs in that category (	the number of	of persons or or	ganization	s charged		
	separately for the particular serv				•	,			
	Rate: Give the standard rate of	-					-		
	unit in which it is generally billed category, but do not include disc				ard rate variation	is within a	particular rate		
	Block 1: In the left-hand block				condary 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					nder "Serv	ice to the		
	first set" and would be counted of Block 2: If your cable system					different	from those		
	printed in block 1 (for example, t	0	•						
	with the number of subscribers a								
	sufficient.	,	5	A two- of three-word description of the service is					
	BLC	DCK 1				BLOC			
		NO. OF		CAT			NO. OF		
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT	
			75 25.0						
	Service to first set		75 25.0	J					
	Service to additional set(s)								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial		7 25.0	0					
	Converter								
	• Residential								
	Non-residential								
	SERVICES OTHER THAN SEC			TEQ					
_	In General: Space F calls for ra				all vour cable sv	stem's ser	vices that were		
F	not covered in space E, that is, t		,	•					
	service for a single fee. There are								
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the ur		s usually billed. If an	y rates are c	harged on a var	iable 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								
	listed in block 1 and for which a			-	-				
	brief (two- or three-word) descrip	otion and inclu	de the rate for each						
		BLO	CK 1				BLOCK 2		
	CATEGORY OF SERVICE	RATE	CATEGORY OF S	ERVICE	RATE	CATEG	ORY OF SERVICE	RAT	
	Continuing Services:		Installation: Non-	residential					
	• Pay cable	19.95	<ul> <li>Motel, hotel</li> </ul>						
	<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial						
	Fire protection		• Pay cable						
	•Burglar protection		• Pay cable-add	l channel					
	Installation: Residential		Fire protection						
	First set	64.95	• Burglar protect	ion					
								1	
	<ul> <li>Additional set(s)</li> </ul>		Other services:						
	<ul> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>				39 95				
	• FM radio (if separate rate)		Reconnect		39.95				
			Reconnect     Disconnect	n					
	• FM radio (if separate rate)		Reconnect		39.95 20.00 39.95				

KTUL-Comet TV

KOKI-MeTV

204

205

Name	LEGAL NAME OF OWN	ER OF CABLE SYSTE	EM:	SYS	STEM ID
	Vyve Broadband	A, LLC			00623
G Primary ransmitters: Television	<ul> <li>PRIMARY TRANSMITTERS</li> <li>In General: In space G, ic carried by your cable syst</li> <li>FCC rules and regulation 76.59(d)(2) and (4), 76.6° substitute program basis, Substitute Basis Stat</li> <li>basis under specifc FCC</li> <li>Do not list the station here, and station was carried onl</li> <li>List the station here, and basis. For further infor Column 1: List each station associated with a station the static the station the station the station the static</li></ul>	S: TELEVISION dentify every televisi tem during the accou s in effect on June 2 1(e)(2) and (4), or 76 as explained in the tions: With respect t rules, regulations, or ere in space G—but of ly on a substitute bas d also in space I, if the mation concerning s station's call sign. Do umber of the channel on the channel on wh according to its over each case whether thering the letter "N" of "E" (for noncomm	unting period excep 4, 1981, permitting 63 (referring to 76 next paragraph o any distant station r authorizations: do list it in space I sis ne station was carr ubstitute basis station not report originate on not report originate on which the station ich your cab; e syst -thip-air designation the station is a net (for network), "N-M percial educational)	ng translator stations and low power television stations) ot (1) stations carried only on a part-time basis under g the carriage of certain network programs [section: 6.61(e)(2) and (4))]; and (2) certain stations carried on a ons carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ied both on a substitute basis and also on some othe tions, see page (v) of the general instructions ition program services such as HBO, ESPN, etc. ion's broadcasts are carried in its own community tem carried the station. Identify each multicast strean on. For example, report multicast stream "WETA-2" as work station, an independent station, or a noncommercia I" (for network multicast), "I" (for independent), "I-M b, or "E-M" (for noncommercial educational multicast)	
		2. B'CAST CHANNEL	n. For Ū.S. station y, give the name o 3. TYPE OF	6. LOCATION OF STATION	1
	KJRH-NBC	NUMBER 2	STATION N	Tulsa OK	
	KOED-PBS		E E		
	KOED-PBS	3	E	Tulsa OK	
	KGEB-IND	4	I	Tulsa OK	
	KGEB-IND KWHB-IND	4	I	Tulsa OK Tulsa OK	
	KGEB-IND KWHB-IND KOTV-CBS	4 5 6	     	Tulsa OK Tulsa OK Tulsa OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC	4 5 6 8	                 	Tulsa OK Tulsa OK Tulsa OK Tulsa OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION	4 5 6 8 9	     	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION KRSU-ETV	4 5 6 8 9 11	                 	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION KRSU-ETV KQCW-CW	4 5 6 8 9 11 12	             	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION KRSU-ETV KQCW-CW KOKI-Fox	4 5 6 8 9 11 12 13	I I N I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION KRSU-ETV KQCW-CW KOKI-Fox KMYT-MNT	4 5 6 8 9 11 12 13 15	 	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         Tulsa OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION KRSU-ETV KRSU-ETV KOKI-Fox KOKI-Fox KOKI-Fox	4 5 6 8 9 11 12 13 15 17	I I N I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         Tulsa OK         BARTLESVILLE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION KRSU-ETV KQCW-CW KOKI-Fox KOKI-Fox KMYT-MNT KDOR-TBN KTPX-QUBO	4 5 6 8 9 11 12 13 15 17 65	I N N I I I I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         BARTLESVILLE OK         OKMULGEE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTUL-ABC KTPX-ION KRSU-ETV KRSU-ETV KRQCW-CW KRQCW-CW KOKI-Fox KOKI-Fox KDOR-TBN KTPX-QUBO	4 5 6 8 9 11 12 13 15 17	I I N I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         Tulsa OK         BARTLESVILLE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION KRSU-ETV KQCW-CW KOKI-Fox KOKI-Fox KMYT-MNT KDOR-TBN KTPX-QUBO	4 5 6 8 9 11 12 13 15 17 65	I N N I I I I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         BARTLESVILLE OK         OKMULGEE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTUL-ABC KTPX-ION KRSU-ETV KRSU-ETV KOKI-FOX KOKI-FOX KOKI-FOX KODR-TBN KDOR-TBN KDOR-JUCE/Smile TV KDOR-The Hillsong	4 5 6 8 9 11 12 13 15 17 65 73	I I N I I I I I I I I I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         Tulsa OK         BARTLESVILLE OK         BARTLESVILLE OK	
	KGEB-INDKWHB-INDKOTV-CBSKTUL-ABCKTPX-IONKRSU-ETVKQCW-CWKOKI-FoxKOKI-FoxKODR-TBNKDOR-JUCE/Smile TVKDOR-The HillsongChannel	4 5 6 8 9 11 12 13 15 17 65 73 74	I N N I I I I I I I I I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         BARTLESVILLE OK         BARTLESVILLE OK         BARTLESVILLE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTUL-ABC KTPX-ION KRSU-ETV KOCW-CW KOKI-FOX KOKI-FOX KOOR-TBN KDOR-TBN KDOR-TBN KDOR-THE Hillsong Channel	4 5 6 8 9 11 12 13 15 17 65 73 74 80	I N N I I I I I I I I I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         CLAREMORE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         Tulsa OK         BARTLESVILLE OK         BARTLESVILLE OK         BARTLESVILLE OK         BARTLESVILLE OK	
	KGEB-IND KWHB-IND KOTV-CBS KTUL-ABC KTPX-ION KRSU-ETV KCCW-CW KOKI-FOX KOKI-FOX KOKI-FOX KDOR-TBN KDOR-TBN KDOR-TBN Salsa KDOR-Enlace	4 5 6 8 9 11 12 13 15 17 65 73 74 80 81	I N N I I I I I I I I I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         OKMULGEE OK         CLAREMORE OK         MUSKOGEE OK         Tulsa OK         BARTLESVILLE OK         BARTLESVILLE OK         BARTLESVILLE OK         BARTLESVILLE OK         BARTLESVILLE OK         BARTLESVILLE OK	
	KGEB-INDKWHB-INDKOTV-CBSKTUL-ABCKTPX-IONKRSU-ETVKRSU-ETVKOCKI-FOXKOCKI-FOXKODR-TBNKDOR-TBNKDOR-The Hillsong ChannelKDOR-TBN SalsaKDOR-EnlaceKDOR-EnlaceKTPX-ION Life	4 5 6 8 9 11 12 13 15 17 65 73 74 80 81 185	I N N I I I I I I I I I I I I I I I I I	Tulsa OK         Tulsa OK         Tulsa OK         Tulsa OK         CLAREMORE OK         CLAREMORE OK         Tulsa OK         Tulsa OK         DKMULGEE OK         Tulsa OK         Tulsa OK         BARTLESVILLE OK	

Tulsa OK

Tulsa OK

I-M

I-M

FORM SA1-2. PAGE 3.

Name	LEGAL NAME OF OWNE		M:	51	STEM ID#
	Vyve Broadband A				006238
	PRIMARY TRANSMITTERS	: TELEVISION			
G Primary Transmitters: Television	<ul> <li>In General: In space G, id carried by your cable syster FCC rules and regulations 76.59(d)(2) and (4), 76.61 substitute program basis, a Substitute Basis Statibasis under specific FCC r</li> <li>Do not list the station here, and basis. For further inform Column 1: List each st Column 2: Give the nut This may be different from associated with a station at the same on the form. Column 3: Indicate in a educational station, by ent (for independent multicast</li> </ul>	lentify every televisie em during the accou- i in effect on June 24 (e)(2) and (4), or 76 as explained in the r ions: With respect th ules, regulations, or re in space G—but of y on a substitute base also in space I, if the nation concerning st ation's call sign. Do imber of the channel the channel on whi according to its over- each case whether the tering the letter "N" ( ), "E" (for noncomm	Inting period, except 4, 1981, permitting t 63 (referring to 76.6 hext paragraph. o any distant station authorizations: 10 list it in space I (t sis. le station was carrie abstitute basis station not report origination 10 n which the station ch your cab; e syste thje-air designation he station is a netw for network), "N-M" ercial educational),	translator stations and low power television stations) (1) stations carried only on a part-time basis under the carriage of certain network programs [sections b1(e)(2) and (4))]; and (2) certain stations carried on a s carried by your cable system on a substitute program the Special Statement and Program Log)—if the d both on a substitute basis and also on some other ons, see page (v) of the general instructions. In program services such as HBO, ESPN, etc. In's broadcasts are carried in its own community m carried the station. Identify each multicast stream . For example, report multicast stream "WETA-2" as ork station, an independent station, or a noncommercial (for network multicast), "I" (for independent), "I-M" or "E-M" (for noncommercial educational multicast)	
		cation of each statio	n. For Ŭ.S. stations,	uctions. list the community to which the station is licensed by th he community with which the station is identifed	ie
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	6. LOCATION OF STATION	
	KMYT-GetTV	207	I-M	Tulsa OK	
	KOKI-Escape	208	I-M	Tulsa OK	
	KMYT-Grit TV	209	I-M	Tulsa OK	
	KOTV-News on 6 Now	210	I-M	Tulsa OK	
	KOED-OKLA	211	I-M		
	KTUL-Antenna TV	212	I-M	Tulsa OK	
	KMYT-Heroes and	24.4	1.84	Tules OK	
	Icons	214	I-M	Tulsa OK	
	KOED-Create KOED-Kids	217 218	E-M E-M	Tulsa OK Tulsa OK	

## ACCOUNTING PERIOD: 2019/2

FORM SA1-2. F EGAL NAME OF		CABLE S	YSTEM:				SYSTEM ID#	Name
Vyve Broadk	oand A, LL	C					006238	
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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally						counting period.		<b>H</b> Primary
n the basis of r or detailed info Column 1: Id Column 2: S Column 3: If ignal, indicate f Column 4: G	nonitoring, to rrmation about lentify the call tate whether t the radio stati this by placing ive the statior	be receivent the the the sign of e he statio ion's sign a check d's locatio	tem whenever it is received at ved at the headend, with the s Copyright Office regulations o each station carried. In is AM or FM. The was electronically processes mark in the "S/D" column. The community to which the the community with which the	ystem's FM anter n this point, see p ed by the cable sy e station is license	nna, during ce bage (v) of the vstem as a sep ed by the FCC	rtain sta e genera parate a	ted intervals. I instructions. nd discrete	Transmitters Radio
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.

	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				SYSTEM ID#	
Name	Vyve Broadband A, LL						006238	
<b>I</b> Substituto	SUBSTITUTE CARRIAG	ify every no	nnetwork televi eriod, under spe	sion program broadcast by ecific present and former FC	a distant stat CC rules, regu	lations, or authorizations.		
Substitute Carriage:	explanation of the programming that must be included in this log, see page (v) of the general instructions. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE							
Special					asis anv non	network television progr	am	
Statement and Program Log								
Flogram Log	Note: If your answer is "No	", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you	must complete the prog		
	log in block 2.							
	period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. <b>Column 2:</b> If the prograt <b>Column 3:</b> Give the call <b>Column 4:</b> Give the broat the case of Mexican or Car <b>Column 5:</b> Give the mon first. Example: for May 7 gi <b>Column 6:</b> State the tim to the nearest five minutes stated as "6:00–6:30 p.m." <b>Column 7:</b> Enter the lett to delete under FCC rules a gram was substituted for put	titute progr ace, please of every no distant sta gulations, ries like "mo Bulls." m was broa sign of the adcast stat hadian stati nath and day ve "5/7." es when th Example: regramming	am on a separ attach addition onnetwork tele tion and that y or authorizatio ovies" or "bask adcast live, ent station broadc ion's location ( ons, if any, the y when your sy e substitute pr a program car e listed program ions in effect c	nal pages. vision program (substitute our cable system substitu ns. See page (v) of the ge etball." List specific progra er "Yes." Otherwise enter casting the substitute prog the community to which the community with which the stem carried the substitut ogram was carried by you ried by a system from 6:0 m was substituted for prog luring the accounting period	e program) th ted for the pr eneral instruc am titles, for "No." ram. he station is li e station is li e program. U ur cable syste 1:15 p.m. to 6 gramming that bd; enter the	at, during the accounting ogramming of another s tions for further informat example, "I Love Lucy" of dentified). Ise numerals, with the m em. List the times accura 5:28:30 p.m. should be it your system was requi letter "P" if the listed pro	g tation ion. or n onth tely red	
	effect on October 19, 1976							
	S	IBSTITUT	E PROGRAM			EN SUBSTITUTE	7. REASON	
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	FOR DELETION	
						_		
							"	
						<u></u>		
	·							
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	· · · · · · · · · · · · · · · · · · ·							

LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC	SYSTEM ID# 006238	Name
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 transn (as identifed in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions.	hission service	K Gross Receipts
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.	<b>\$ 18,954.73</b> (Amount of 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 \$ • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60( See page (vi) of the general instructions 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	\$ 52.00	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
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	,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		
<b>IMPORTANT</b> : 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 6.

		FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Naille	Vyve Broadband A, LLC	006238
	CHANNELS	
М	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s	tations
	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	32
	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	244
Ν	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom	
Individual to	we can write or call about this statement of account.)	
Be Contacted		
for Further	Name Marie Censoplano Telephone	914-235-8313
Information		
	Address 4 International Dr Suite 330	
	(Number, street, rural route, apartment, or suite number)	
	City, town, state, zip)	
	Email (optional)       marie.censoplano@vyvebb.com       Fax (optional) 914-234-8363	5
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regul	ations
0	as explained in the general instructions.)	
Certifcation	<ul> <li>I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)</li> </ul>	
Gertification		
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space I	3; 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 identifed as ow	per of the cable system
	in line 1 of space B.	ler of the cable system
		d h
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact containe are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	a nerein
	[18 U.S.C., Section 1001(1986)]	
	Handwritten signature: /s/ Daniel J White	
	Handwritten signature: /s/ <b>Duriter</b>	
	Typed or printed name: <b>Daniel J White</b>	
	Title: SVP Financial Planning (Title of official position held in corporation or partnership)	
	(	
	Date: 2/26/2020	
	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 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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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYST	TEM ID# Name
Vyve Broadband A, LLC	006238 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 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 sub scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions. 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	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name     Name       Mailing Address     Mailing Address	
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.	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	-
	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) (interest charge)	
* 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@loc.gov.	3
** 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	
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 information (	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 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 it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.