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: Library of Congress

FOR COPYRIGHT OFFICE USE ONLY STATEMENT OF ACCOUNT Copyright Office for Secondary Transmissions by DATE RECEIVED AMOUNT Licensing Division Cable Systems (Short Form) 101 Independence Ave. SE \$ Washington, DC 20557-6400 (202) 707-8150 3/30/22 General instructions are at the end of this form [pages (i)-(vii)]. ALLOCATION NUMBER For courier deliveries, see page ii of the general instructions Α ACCOUNTING PERIOD COVERED BY THIS STATEMENT: January 1-June 30, 2020 Accounting Period Instructions: Your file has been established under the information given below. If there are any changes, draw a line through the В 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 corpo-Owner rate 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. 028772 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 Vyve Broadband J, LLC 028772 2020/1 Four International Drive, Suite 330 Rye Brook, NY 10573 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these С 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. IDENTIFICATION OF CABLE SYSTEM: System 1 MAILING ADDRESS OF CABLE SYSTEM: 234 N Windriver Drive 2 (Number, street, rural route, apartment, or suite number) Douglas, WY 82633 state, zip code Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entitiy (including unincorporated commuinites within unincorporated 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. Area Served Note: Entities and properties such as hotels, apartments, condiminiums, or mobile home parks should be reported in paratheses below the identified city. CITY OR TOWN STATE CITY OR TOWN STATE Torrington WY First Community **Goshen County** WY WY Lingle 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 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 suffciency of the fling, a determination that would be made by a court of law.

Form SA1-2c Rev 04/2011

LEGAL NAME OF OWNER OF CABLE SYSTEM:									
Vyve Broadband J, LLC								02877	
SECONDARY TRANSMISSION	SERVICE: SU	BSCRI	BERS AND RA	TES					
					y transmission s	service of t	he cable		
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separately for the particular service at the rate indicated—not the number of sets receiving service).									
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CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RAT	
Residential:									
 Service to first set 		570	25.00						
 Service to additional set(s) 									
• FM radio (if separate rate)									
Motel, hotel		66	25.00						
Commercial									
Converter									
• Residential									
Non-residential									
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SERVICES OTHER THAN SECO					l vour cable sys	tem's serv	ices that were		
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BLOCK 1 CATEGORY OF SERVICE SUBSCRIBERS Residential: • Service to first set • Service to additional set(s) • FM radio (if separate rate) Motel, hotel 66 Commercial Converter • Residential	Vyve Broadband J, LLC SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RA In General: The information in space E should cover all categories of system, that is, the retransmission of television and radio broadcasts about other services (including pay cable) in space F, not here. All the last day of the accounting period (June 30 or December 31, as the ca Number of Subscribers: Both blocks in space E call for the numbe down by categories of secondary transmission service. In general, you each category by counting the number of billings in that category (the separately for the particular service at the rate indicated—not the num Rate: Give the standard rate charged for each category of service. I unit in which it is generally billed. (Example: "\$20/mth"). Summarize a category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categor systems most commonly provide to their subscribers. Give the number that applies to your system. Note: Where an individual or organization categories, that person or entity should be counted as a subscriber in subscriber who pays extra for cable service to additional sets would b first set" and would be counted once again under "Service to additionan Block 2: If your cable system has rate categories for secondary trans printed in block 1 (for example, tiers of services that include one or mo with the number of subscribers and rates, in the right-hand block. A tw sufficient. ERSIDENTICE NO. OF CATEGORY OF SERVICE SUBSCRIBERS RATE Residential: • Service to additional set(s) • FM radio (if separate rate) Motel, hotel 66 Commercial Commercial Converter • Residential	Vyve Broadband J, LLC SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary system, that is, the retransmission of television and radio broadcasts by your sy about other services (including pay cable) in space F, not here. All the facts you 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 subsc down by categories of secondary transmission service. In general, you can com each category by counting the number of billings in that category (the number of separately for the particular service at the rate indicated—not the number of set Rate: Give the standard rate charged for each category of service. Include bo unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standar 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 sec systems most commonly provide to their subscribers. Give the number of subsc that applies to your system. Note: Where an individual or organization is receivi categories, that person or entity should be counted as a subscriber in each appl subscriber who pays extra for cable service to additional set(s)." Block 2: If your cable system has rate categories for secondary transmission printed in block 1 (for example, tiers of services that include one or more second with the number of subscribers and rates, in the right-hand block. A two- or three sufficient. BLOCK 1 NO. OF CATEGORY OF SERVICE SUBSCRIBERS RATE CAT Residential: • Service to first set • Service to additional set(s) • FM radio (if separate rate) 66 25.00 Commercial Con	Vyve Broadband J, LLC SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission of system, that is, the retransmission of television and radio broadcasts by your system to subscril about other services (including pay cable) in space F, not here. All the facts you state must be tast 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 call down by categories of secondary transmission service. In general, you can compute the number of separately for the particular service at the rate indicated—not the number of sets receiving serv. Rate: Give the standard rate charged for each category of service. Include both the amount or unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variation: 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 transmiss systems most commonly provide to their subscribers. Give the number of subscribers and rate that applies to your system. Note: Where an individual or organization is receiving service that categories, that person or entity should be counted as a subscriber in each applicable category. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that reate applies to your system. Note: Where an individual or organization is receiving service stat that applies to your system. Nate: a secondary transmission service that are printed in block 1 (for example, tiers of services that include one or more secondary transmission with the number of subscribers and rates,	Vyve Broadband J, LLC SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission service of t system, that is, the retransmission of television and radio brackasts by your system to subscribers. Give about other services (including pay cable) in space F, not here. All the facts you state must be those exist 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 down by categories of secondary transmission service. In general, you can compute the number of subscribers 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 unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a p 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 servic systems most commonly provide to their subscribers. Give the number of subscribers and rate for each lis that applies to your system. Note: Where an individual or organizations is receiving service that falls under categories, that person or entity should be counted as a subscriber in each applicable category. Example: subscriber who pays extra for cable service to additional set(s)." Block 1 (for example, tiers of services that include one or more secondary transmissions), list the with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the s sufficient.	Vyve Broadband J, LLC 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 table struber in each applicable category. Each end the unit in which it is generally billed (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category is that exon or entry should be counted as a subscriber in each applicable category. Each entry is the service to additional sets would be included in the count under "Service to the fi	

Vyce Broadband J, LLC 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 specific (2) and (4), r68 (6)(2) and (4), r68 (6)(2) and (4), r68 (6)(2) and (4), r68 (10)(2) and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Dasis Substitute Paragraph Distributes basis and regreater CC Crues, engrage (b) of the station has carried by your cable system on a substitute program basis, as explained only on a substitute program basis, as explained on the next paradraph the station has a substitute program Log)—if the station here, and also in space 1, if the station was carried by our cable system on a substitute basis. Columm 1: List each station's call sign. Do not report origination program services such as HG0, CFX-2 as the low the term in the channel on which he station's brace station. Identify such multicast strain the basis of a store streng which he station's brace station. Independent station, and encommercial ducational station as an encommercial educational station as control. Tw/H for noncommercial educational station and the station is identified. VCUUM To independent multicast), ET for noncommercial educations, is it dentified. I.CALL VIC in dependent multicast), ET for noncommercial educational stations. I.CALL VIC in the station is a scate as explicitly of the parametic instation. Independent multicast). For the maxing of these terms ascarega (iv) of the porterim true independent station, or	Name		LE SYSTEM:			SYSTEM ID				
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 Stations (2) and (4), 7661(e)(2) and (4), 776.83 (refering to 76.61(e)(2) and (4)); and (2) creft stations carried on a substitute program basis, ace exquisitons in after the period time tense carried on the station basis under space (1). The Stations: With respect to any distant stations carried by your cable system on a substitute program basis, ace exquisitons in a distant stations carried by sour cable system on a substitute program basis, ace exquisitons in a distant program basis, ace exquisitons in a distant program basis, ace exquisitons to a distant basis and expective for Curles and exact and by the station basis and exact and the station basis and exact and by the station basis and exact and by the statiant basis stations ace dial sign. Do not cable system on a substitute program basis, ace exact and in the basis and basis and exact and by the station basis and exact and by the station broadcasts are carried in the station be exampted in the form. To bim the station ace dial sign. Do not prove table system on a substitute program basis, ace exampted in the form. Column 2: Give the number of the channel on which the station broadcast are carried in the station is an exampted by the form. The maxing of these terms, see apple (i) of the general instructions. Column 4: Give the location of each station. For U.S, stations, list the community to which the station is identified. The maxing of these terms, see apple (ii) of the general instructions. Column 4: Give the location of each station	Nume	Vyve Broadband J, LLC				02877				
G Primary Transmitters: Television carried by your cable system during the accounting period, except (1) stations carried only on a particle basis under Primary transmitters: Television Television Corrules and regulations in effect on June 24, 1991, permitting the carrieg of certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Poster PCC rules, and explained in the next paragraph. Substitute Poster PCC rules, regulations, or authorizations: - 0 on clist the station here, and also in space I, the space I (the Special Statement and Program Log)—If the station was carried only on a substitute basis and rule basis. - 0 on clist the station here, and also in space I, the space I (the Special Statement and Program Log)—If the station was carried or by character basis carried to the general instructions. Column 1: List each station's call sign. Do not report origination program services such as HDG, ESPN, etc. Column 2: Cive the number of the channel on which by our cabe system carried the station. Usentify each nulticast stream associated with a station accord the channel on which by our cabe system carried the station, an oncommunity. This may be different from the channel on which by our cabe system carried the station, an oncommercial educational station, by entering the letter YI (for network). TAM: (for network multicast), TG (for independent, T-M* (for independent multicast). TG (for incommercial instructions. Column 4: Cive the location of each station. For U.S. stations, list the community to which the station is identifed. 1. call. 2. B'CAST SIGN 3. TYPE OF 6. LOCATION OF STATION KLWY 27 (FOX) Cheyenne 27 1. Cheyenne KLWY 27 (FOX) Cheyenne 27 1. Cheyenne KLWY 27 (FOX) Cheyenne	F	PRIMARY TRANSMITTERS: TELEVISIO	N							
1. CALL 2. B'CAST 3. TYPE 6. LOCATION OF STATION SIGN 2. B'CAST CHANNEL OF STATION KCWC 6 (PBS) Riverton 6 E Riverton KTNE 13 (PBS) Alliance 13 E Alliance KLWY 27 (FOX) Cheyenne 27 I Cheyenne KKTQ 16 (ABC) Cheyenne 16 N Cheyenne KSTF 10.2 (NBC) Scottsbluff 10.2 N-M Scottsbluff KSTF 10.3 (CW) Scottsbluff 10.3 I-M Scottsbluff KVYF-MNT/MeTV 27.3 Cheye 27.3 I-M Cheyenne KSTF 10 (CBS) Scottsbluff 10 N Scottsbluff KUWY 27 (FOX) Cheyenne 27 I Cheyenne KSTF 10 (CBS) Scottsbluff 10 N Scottsbluff KUW 27 (FOX) Cheyenne 27 I Cheyenne KTNE 13 (PBS) Alliance 13 E Alliance KCWC 6 (PBS) Riverton HD 6 E Riverton KTNE 13 (PBS) Alliance HD 13 E Alliance	G Primary nsmitters: elevision t • • • • • •	 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 specifc 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. Identify each multicast stream associated with a station according 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 a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), "E" (for oncommercial educational), or "E-M" (for noncommercial educational multicast). 								
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KTNE 13 (PBS) Alliance 13 E Alliance		ATINE 13 (PDS) Alliance	13	E						

ACCOUNTING PERIOD: 2020/1

FORM SA1-2. F LEGAL NAME OF	OWNER OF (/STEM:				SYSTEM ID#	Name
Vyve Broadk	band J, LLC	>					028772	
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 Mexican or Canadian stations, if any, the community with which the station is identified).							Primary Transmitters: Radio	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		3,0	LOOATION OF STATION			3,0		
		+						
		+						

FORM SA1-2. PAGE 5.

	LEGAL NAME OF OWNER OF O	CABLE SYST	EM:						SYSTEM ID#
Name	Vyve Broadband J, LLO	2							028772
	SUBSTITUTE CARRIAGE	: SPECIA		IT AND PROGRAM LO	G				
I	In General: In space I, identif substitute basis during the ac	counting pe	riod, under spe	cific present and former FC	C ru	les, regula	tions, or aut		
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 Statement and Program Log	 During the accounting peri broadcast by a distant stat 	od, did you			is, a	ny nonnet	work televis	sion prograr	n XNo
Program Log	Note: If your answer is "No"	, leave the	rest of this pag	e blank. If your answer is	"Yes	s," you mu	st complete		m
	log in block 2. 2. LOG OF SUBSTITUTE	PROGRA	MS						
	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.								6
	Column 1: Give the title of	of every no	nnetwork televi	sion program (substitute					tion
	period, was broadcast by a under certain FCC rules, reg	gulations, o	r authorizations	s. See page (v) of the gen	eral	instruction	ns for furthe	er informatio	n.
	Do not use general categori "NBA Basketball: 76ers vs. I	Bulls."				es, for exa	imple, "I Lo	ove Lucy" or	
	Column 2: If the program Column 3: Give the call s								
	Column 4: Give the broa the case of Mexican or Cana	dcast static	on's location (th	e community to which the	stat			FCC or, in	
	Column 5: Give the mon	th and day						with the mor	nth
	first. Example: for May 7 giv Column 6: State the time		substitute prog	gram was carried by your	cabl	e system.	List the tim	es accurate	ly
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	program carrie	ed by a system from 6:01:	15 p	o.m. to 6:28	8:30 p.m. s	hould be	-
	Column 7: Enter the letter to delete under FCC rules a								d
	gram was substituted for pro								
	effect on October 19, 1976.								
	q		E PROGRAM	1			EN SUBST		7. REASON
	1. TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5	5. MONTH		TIMES	FOR DELETION
		Yes or No	CALL SIGN	4. STATION'S LOCATION	++	AND DAY	FROM	<u> то</u>	
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FORM SA1-2. PAGE 6.		
LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 028772	Name
	020112	
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. IMPORTANT: You must complete a statement in space P concerning gross receipts.	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		
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,10	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 \$527,6	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 page general instructions for more information.	e I of the	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast sta	SYSTEM ID# 028772
CHANNELS	028772
Instructions: You must give (1) the number of channels on which the cable system carried television broadcast sta	
	tions
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	14
system carried television broadcast stations	14
2. Enter the total number of activated channels	
	216
and nonbroadcast services	
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 Concentano Telephone O	11 771 0717
Name Marie Celisopiano	14-234-0313
(Uny, town, state, zip)	
Email (optional) Fax (optional)	
 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 identified 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. 	; or
(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own	er of the cable system
	herein
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)	
Date:8/27/2020	
	System carried television broadcast stations Summarian equations

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.

ACCOUNTING PERIOD: 2020/1

FORM SA1-2. PAG	E 8	3.
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LEGAL NAME OF OWNER OF CABLE SYSTEM: S	YSTEM ID#	Name
Vyve Broadband J, LLC	028772	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 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 include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 1 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 YES. Enter the total here and list the satellite carrier(s) below	sic de sub- 19."	P Special Statement Concerning Gross Receipts Exclusion
Name Name Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpay For an explanation of interest assessment, see page (viii) of the general instructions.	/ment.	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	
xLine 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 chat * 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.	0 /	
** 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, p list below the owner, address, first community served, ID number, and accounting period as given in the original f		
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 inform 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 many personal information that can be used to identify or trace an individual, such as many personal information that can be used to identify or trace an individual, such as many personal information that can be used to identify or trace an individual, such as many personal information that can be used to identify or trace an individual, such as many personal information that can be used to identify or trace and individual.		

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.