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

(202) 707-8150

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					
DATE RECEIVED	AMOUNT				
3/30/22	\$ ALLOCATION NUMBER				

Library of Congress Copyright Office Licensing Division 101 Independence Ave. SE Washington, DC 20557-6400

For courier deliveries, see page ii of the general instructions

Α	ACCOUNTING PERIOD COVEREI	BY THIS STATEMENT:					
Accounting Period	January 1-June 30, 2020	0					
B Owner	Instructions: Your file has been established under the information given below. If there are any changes, draw a line through the incorrect information and print or type the correct information beside it. Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.						
	LEGAL NAME OF OWNER/MAILING ADD Vyve Broadband A, LLC	DRESS OF CABLE SYSTEM					
				000604 2020/1			
	4 International Dr Suite 330						
	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 IDENTIFICATION OF CABLE SYSTEM:						
	MAILING ADDRESS OF CABLE SYSTEM:						
	2 (Number, street, rural route, apartment, or suite number)						
	(City, town, state, zip code)						
D Area Served	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entitiy (including unincorporated communities 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. 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			
First Community	Winters	TX					

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The 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 SA1-2c Rev 04/2011

• FM radio (if separate rate)

Converter

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 000604 Vyve Broadband A, LLC SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES Ε 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 Secondary about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the Transmission 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 Service: Subscribers and down by categories of secondary transmission service. In general, you can compute the number of subscribers in Rates each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)." Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE **SUBSCRIBERS RATE** CATEGORY OF SERVICE **SUBSCRIBERS RATE** Residential: 51 · Service to first set 28.50 · Service to additional set(s) · FM radio (if separate rate) Motel, hotel Commercial 16 25.00 Converter Residential Non-residential SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were F not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services Services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the Other Than amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Secondary Transmissions: Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Rates Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE Continuing Services: Installation: Non-residential Pay cable 19.95 · Motel, hotel • Pay cable—add'l channel Commercial Pay cable · Fire protection Burglar protection · Pay cable-add'l channel Installation: Residential · Fire protection 64.95 First set · Burglar protection · Additional set(s) Other services:

Reconnect

 Disconnect Outlet relocation

Move to new address

39.95

20.00

39.95

FORM SA1-2. PAGE 3. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 000604 **Vvve Broadband A. LLC** PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) 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 **Primary** 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 Transmitters: 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 Television 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; e 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 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 network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions. Column 4: Give the location of each station. For U.S. stations, list the community to 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. 3. TYPE 1. CALL 2. B'CAST 6. LOCATION OF STATION SIGN **CHANNEL** OF NUMBER **STATION KPCB** Snyder, TX 17 ı **KTAB** 32 Abilene, TX N **KRBC** 9 Ν Abilene, TX **KXVA** Abilene, TX 15 ı KTXS Sweetwater, TX 12 Ν KTXS-CW 12.2 I-M Sweetwater, TX KTAB-Telemundo 32.2 I-M Abilene, TX

FORM SA1-2. F	PAGE 4.								
LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#						Name			
Vyve Broadband A, LLC 000604									
PRIMARY TRA	NSMITTERS:	RADIO							
			rried on a separate and discre	ete	e basis and list t	hose FM statio	ons carr	ied on an	Н
	•		nerally receivable" by your ca						
	_	_					•		
			-Band FM Carriage: Under C						Primary
			tem whenever it is received at						Transmitters: Radio
			ved at the headend, with the						Raulo
			Copyright Office regulations of	on	this point, see p	page (v) of the	genera	instructions.	
		-	each station carried. n is AM or FM.						
			nal was electronically process	^	hy the cable a	etom as a sor	oarata a	ad discrete	
			mark in the "S/D" column.	-	by the cable sy	stem as a sep	arate a	id discrete	
			on (the community to which th	1e	station is license	ed by the ECC	or in th	ne case of	
			the community with which the				, OI, III u	10 0430 01	
exear. er ear.	adian olanono	,,, .	community man minor and	•		۵).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	П	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		 +							
				ľ					
				ľ					
		 	 	ŀ					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC					SYSTEM ID# 000604				
Substitute	In General: In space I, identi substitute basis during the ac explanation of the programm	fy every nor counting pe ing that mus	nnetwork televis riod, under spec t be included in	ion program broadcast by a cific present and former FCI this log, see page (v) of the	distant station Crules, regula	tions, or authorizat				
Carriage: Special	SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program									
Statement and Program Log	broadcast by a distant state	tion?	•	•	·	<u> </u>	Yes ⊠No			
	Note: If your answer is "No' log in block 2.			e blank. If your answer is '	'Yes," you mu	st complete the p	rogram			
	period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call: Column 4: Give the broathe case of Mexican or Can Column 5: Give the monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	itute progra ce, please a of every no distant stati gulations, o ies like "mo Bulls." n was broac sign of the s idcast static adian statio ath and day we "5/7." es when the Example: a	m on a separa- attach additional nnetwork televical on and that your authorizations vies" or "baske dicast live, enter station broadca on's location (the ons, if any, the of when your syste substitute program carrie	al pages. sion program (substitute pur cable system substitute s. See page (v) of the genetall." List specific program "Yes." Otherwise enter "Nating the substitute programe community to which the community with which the seem carried the substitute program was carried by your of	rogram) that, d for the program instruction in titles, for example in tit.	during the accourramming of anothins for further information ample, "I Love Lucinsed by the FCC diffied), numerals, with the List the times accession p.m. should be seen accession.	nting ier station rmation. cy" or or, in he month curately be			
	to delete under FCC rules a gram was substituted for preeffect on October 19, 1976.	ind regulation	ons in effect du	ring the accounting period	; enter the let	ter "P" if the listed	l pro			
	WHEN SUBSTITUTE SUBSTITUTE PROGRAM CARRIAGE OCCURRED						ED 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	TO FOR DELETION			
						<u> </u>				
					1 1					

	YSTEM 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. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. 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. (Amount of gross)	0,771.92 uss receipts)	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 \$263,800 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.		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 this six-month accounting period is \$52.00		
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 \$137,100)		
1. Base amount under statutory formula		
2. Enter amount of gross receipts from space K		
3. Subtract line 2 from line 1		
4. Enter the amount of gross receipts from space K		
5. Enter the amount from line 3		
6. Subtract line 5 from line 4		
7. Multiply line 6 by .005 (enter figure here)		
8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)		
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)		
6. Interest charge. Enter the amount from line 4, space Q, page 8		
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 I of the general instructions for more information.		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Vyve Broadband A, LLC	000604
	CHANNELS	
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast station	ns
Chamala	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Channels	Enter the total number of channels on which the cable	_
	system carried television broadcast stations	7
		_
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations and nonbroadcast services	40
	and horizonation controls	
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom	
IN	we can write or call about this statement of account.)	
Individual to		
Be Contacted	News Maria Cananalana	1 225 0242
for Further Information	Name Marie Censoplano Telephone 914	1-233-0313
	Address A International Dr. Suita 220	
	Address 4 International Dr Suite 330 (Number, street, rural route, apartment, or suite number)	
	Rye Brook, NY 10573	
	(City, town, state, zip)	
	Freil (antional) maria concentana@yyyyahh aam	
	Email (optional) marie.censoplano@vyvebb.com Fax (optional),914-234-8363	
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations as explained in the general instructions.)	5,
O Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
Certification	1, 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; o	r
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable syst	em as identified
	in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner	of the cable system
	in line 1 of space B.	
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained he	erein
	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	
	That difficulties of signatures.	
	Typed or printed name: Daniel J White	
	Title: SVP Financial Planning (Title of official position held in corporation or partnership)	
	(Title of official position field in corporation of partitiership)	
	Date: 8/27/2020	
	0/21/2020	

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LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC SYSTEM ID# 000604	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 subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement
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	Concerning Gross Receipts Exclusion
made by satellite carriers to satellite dish owners? X NO	
YES. Enter the total here and list the satellite carrier(s) below	
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.	Q
Line 1 Enter the amount of late payment or underpayment	Interest
x	
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
xdays	
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.	
** 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	

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