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

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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 3/30/22 (202) 707-8150 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: July 1-December 31, 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. 014368 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 A, LLC 014368 2020/2 4 International Dr 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: 2 (Number, street, rural route, apartment, or suite number) City, town, 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 **ATCHISON** ĸs First Community **ATCHISON COUNTY PORTION** KS **BUCHANAN COUNTY** KS LANCASTER KS **LEWIS & CLARK** KS WESTERN PLATTE KS 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 SA1-2c Rev 04/2011

ACCOUNTING PERIOD: 2020/2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:								
Name	Vyve Broadband A, LLC								
	CITY OR TOWN	STATE	CITY OR TOWN	STATE					
-									
D									
continued)									
Area									
Served									
			Н						

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:										
Name	Vyve Broadband A, LLC										
F	SECONDARY TRANSMISSION	SERVICE: SU	BSCRIE	BERS AND RA	TES						
E	In General: The information in sp			0							
	system, that is, the retransmissio										
Secondary Transmission	about other services (including particular to a service of the accounting period		-				nose existi	ng on the			
Service: Sub-							le svstem.	broken			
scribers and	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										
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										
	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.										
					ies of seco	ondary transmis	sion servic	e that cable			
		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			-		-					
	categories, that person or entity s subscriber who pays extra for cal						•				
	first set" and would be counted o										
		0			()	service that are	different fr	om those			
	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 a	nd rates, in the	e right-ha	and block. A tw	o- or three	e-word description	on of the s	ervice is			
	sufficient.				BLOC	()					
	BLOCK 1 NO. OF					DLOOI	NO. OF				
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT		
	Residential:										
	 Service to first set 		631	28.50							
	 Service to additional set(s) 										
	 FM radio (if separate rate) 										
	Motel, hotel										
	Commercial		92	28.50							
	Converter										
	Residential										
	Non-residential										
				1				1	1		
	SERVICES OTHER THAN SECO										
F	In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were										
•	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 of										
Other Than	amount of the charge and the un		usually	billed. If any ra	tes are ch	arged on a varia	able per-pr	ogram basis,			
Secondary	enter only the letters "PP" in the rate column.										
ransmissions: Rates	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.										
Nates	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.										
		BLO	CK 1					BLOCK 2			
	CATEGORY OF SERVICE			ORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATI		
	Continuing Services:			tion: Non-res							
	• Pay cable	19.95	• Mot	el, hotel							
	• Pay cable—add'l channel		• Cor	nmercial		[]					
	Fire protection		• Pav	cable		[]					
	•Burglar protection		-	cable-add'l ch	annel	[]					
	Installation: Residential		-	protection		[]					
	• First set	64.95		glar protection		[
						<u> </u>					
	 Additional set(s) 			services:							
	 Additional set(s) FM radio (if separate rate) 			services:		39.95					
	• FM radio (if separate rate)		• Rec	connect		39.95					
	()		• Rec • Disc	connect connect							
	• FM radio (if separate rate)		• Rec • Dise • Out	connect	955	39.95 20.00 39.95					

Nama	LEGAL N	SYSTEM						
Name	Vyve E	0143						
	PRIMARY TRANSMITTERS: TELEVISION							
G	In General: In space G, identify every television station (including translator stations and low power television stations)							
0	carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under							
Primary Transmitters: Television	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 s							
	basis under specific FCC rules, regulations, or authorizations:							
	• Do not list the station here in space G-b			S S,				
		vas carried only on						
	List the station here, and also in space I, basis Fe			stitute basis stations, see page (v) of the general instructions.				
				of report origination program services such as HBO, ESPN, etc.				
				n which the station's broadcasts are carried in its own community.				
	This may be different from the channel on							
	associated with a station according to its o the same on the form.	ver-thje-air designa	ation. For example	e, report multicast stream "WEIA-2" as				
		3: Indicate in each	n case whether the	station is a network station, an independent station, or a noncomme				
	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							
	FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.							
			3. TYPE	6. LOCATION OF STATION				
	SIGN	CHANNEL	OF					
			•					
		NUMBER	STATION					
	KPXE-ION Plus HD 50	NUMBER 50	-	KANSAS CITY MO				
			-	KANSAS CITY MO KANSAS CITY MO				
	KPXE-ION Plus HD 50	50	STATION I					
	KPXE-ION Plus HD 50 KPXE-ION Qubo HD 50	50 50.1	STATION I	KANSAS CITY MO				
	KPXE-ION Plus HD 50 KPXE-ION Qubo HD 50 KCPT-Create HD 19.3	50 50.1 19.3	STATION I N I	KANSAS CITY MO KANSAS CITY MO				
	KPXE-ION Plus HD 50 KPXE-ION Qubo HD 50 KCPT-Create HD 19.3 KCPT-PBS 19	50 50.1 19.3 19	STATION I	KANSAS CITY MO KANSAS CITY MO KANSAS CITY MO				
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ACCOUNTING PERIOD: 2020/2

FORM SA1-2. F		CABLE SY	/STEM:					SYSTEM ID#	Name
Vyve Broadk								014368	inaille
	,	-						011000	
PRIMARY TRA	NSMITTERS:	RADIO							
			rried on a separate and discre						н
	-	-	nerally receivable" by your ca		-				
Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally required by the system whenever it is received at the system's headend, and (2) it can be expected								Primary Transmitters	
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.								Radio	
or detailed info	rmation abou	t the the	Copyright Office regulations						
		-	ach station carried. n is AM or FM.						
			al was electronically process	ed by	the cable sy	stem as a sep	oarate a	nd discrete	
			mark in the "S/D" column.						
			on (the community to which th he community with which the				or, in ti	ne case of	
		,,,	,			- /			
CALL SIGN	AM or FM	с/D	LOCATION OF STATION		ALL SIGN	AM or FM	<u>۹</u> /۵	LOCATION OF STATION	
CALL SIGN		S/D	LOCATION OF STATION		ALL SIGN		S/D	LOCATION OF STATION	
		†						†	
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	(
Name	LEGAL NAME OF OWNER OF O Vyve Broadband A, LLO		EM:				:	SYSTEM ID# 014368	
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	IT AND PROGRAM LO	3				
I	In General: In space I, identify <i>every nonnetwork television program</i> 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.								
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	 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 station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program								
	log in block 2.								
	2. LOG OF SUBSTITUTE			ta lina. Llaa abbraviationa	whorever	aible if their	mooning is		
	In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in								
	effect on October 19, 1976. WHEN SUBSTITUTE							7. 054000	
	S		E PROGRAM		CARRIAGE OCCURRED			7. REASON FOR DELETION	
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		- TO		
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FORM SA1-2. PAGE 6.		
LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC	SYSTEM ID# 014368	Name
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. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	263,800	L Copyright Royalty Fee
	in niv month	
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 Line 1. Royalty fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		
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	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	

		FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Vyve Broadband A, LLC	014368
	CHANNELS	
М	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stat	ions
	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	24
	system carried television broadcast stations	
	0. Establish a total sound as of a climated above als	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations and nonbroadcast services	160
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom we can write or call about this statement of account.)	
Individual to		
Be Contacted		
for Further	Name Marie Censoplano Telephone 91	4-235-8313
Information		
	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) 914-234-8363	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulatio	าร
0	as explained in the general instructions.)	io,
Certifcation	 I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) 	
Certification		
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B;	or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable sy	stom 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 owned in line 1 of space B.	r of the cable system
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained la are true, complete, and correct to the best of my knowledge, information, and helief, and are made in good faith	nerein
	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)]	
	Quital 7 9116:40	
	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: 2/26/2021	
	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 suffciency of the fling, a determination that would be made by a court of law.

FORM SA1-2. PAGE 8.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	STEM ID# Name
Vyve Broadband A, LLC	014368 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 s 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 transmission" made by satellite carriers to satellite dish owners? NO YES. Enter the total here and list the satellite carrier(s) below	sub- " Special Statement Concerning Gross Receipts
Name Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayme For an explanation of interest assessment, see page (viii) of the general instructions.	ent. Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	-
x	days
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,	
space L, (page 7)	-
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance plea 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, pleas 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	n (PII) requested on this

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.