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

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: 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. 031026 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 031026 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 DALHART ТΧ First Community **DALLAM COUNTY PORTIONS** ТΧ 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.

FOR COPYRIGHT OFFICE USE ONLY

Form SA1-2c Rev 04/2011

ACCOUNTING PERIOD: 2020/2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:									
Name	Vyve Broadband A, LLC			0310						
	CITY OR TOWN	STATE	CITY OR TOWN	STATE						
D										
ontinued)										
Area Served										
Serveu										

Name	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						SYS	TEM ID	
Name	Vyve Broadband A, LLC								03102	
-	SECONDARY TRANSMISSION	SERVICE: SU	BSCRI	BERS AND RA	TES					
E	In General: The information in sp					y transmission s	ervice of th	ne cable		
	system, that is, the retransmissio									
Secondary	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).									
Transmission Service: Sub-	Number of Subscribers: Both						le system	broken		
scribers and										
Rates	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 servi									
	Rate: Give the standard rate ch	-	-	•			-			
	unit in which it is generally billed. category, but do not include disco	· · ·	,		iy standar	d rate variations	s within a p	articular rate		
	Block 1: In the left-hand block				es of seco	ondarv transmis	sion servic	e that cable		
	systems most commonly provide	•		-						
	that applies to your system. Note			-		-				
	categories, that person or entity s						•			
	subscriber who pays extra for cal first set" and would be counted o					in the count une	der "Servic	e to the		
	Block 2: If your cable system h	0			· · ·	service that are	different fr	om those		
	printed in block 1 (for example, ti									
	with the number of subscribers a					,		, 0		
	sufficient.									
	BLC	DCK 1	-				BLOCH			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT	
	Residential:	SOBSCIUD	LING	NATE	UA11		(VIOL	SOBSCINEERS	NAT	
	Service to first set		59	28.50						
	Service to additional set(s)			20.30						
	()									
	• FM radio (if separate rate) Motel, hotel									
			7	25.00						
	Commercial		7	25.00						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SECO		NGMIG							
_	In General: Space F calls for rate					l vour cable svst	em's servi	ces that were		
F	not covered in space E, that is, th	•	,		•	• •				
	service for a single fee. There are	•			•		• • •			
Services	furnished at cost or (2) services of									
Other Than Secondary	amount of the charge and the un enter only the letters "PP" in the r		usually	billed. If any rat	tes are cha	arged on a varia	able per-pro	ogram basis,		
ransmissions:	Block 1: Give the standard rate		he cable	e svstem for ead	ch of the a	applicable servic	es listed.			
Rates	Block 2: List any services that							were not		
	listed in block 1 and for which a s	separate charg	e was r	nade or establis	shed. List	these other serv	rices in the	form of a		
	brief (two- or three-word) descrip	tion and includ	le the ra	ite for each.						
		BLO	CK 1					BLOCK 2		
	CATEGORY OF SERVICE	RATE	CATEC	GORY OF SERV	/ICE	RATE	CATEG	ORY OF SERVICE	RATI	
	Continuing Services:		Installa	ation: Non-resi	dential					
	• Pay cable	19.95	• Mo	tel, hotel						
	 Pay cable—add'l channel 		• Co	mmercial						
	Fire protection		• Pa	y cable						
	•Burglar protection		• Pa	y cable-add'l ch	annel					
	Installation: Residential		• Fire	e protection						
	• First set	64.95	• Bu	glar protection					Γ	
	· FIISLSEL	I	1			·····			1	
	Additional set(s)		Other	services:			L			
	 Additional set(s) 		1	services: connect		39.95				
	• Additional set(s) • FM radio (if separate rate)		• Re	connect		39.95				
	 Additional set(s) 		• Re • Dis	connect connect						
	• Additional set(s) • FM radio (if separate rate)		• Re • Dis • Ou	connect	255	39.95 20.00 39.95				

Name		LEGA	L NAME OF OWN	IER OF CABLE SYS	STEM: SYSTEM				
		Vyve	e Broadband	A, LLC	0310				
	PRIMARY TRANSMITTERS: TELEVISION								
G	In General: In space G, identify every the carried by your cable system during the FCC rules and regulations in effect on the system of the sy	e accou	unting period, ex	cept (1) stations ca	arried only on a part-time basis under				
Primary Fransmitters: Television		, or 76 in the	6.63 (referring to next paragraph.	76.61(e)(2) and (4))]; and (2) certain stations carried on a ct to any distant stations carried by your cable system on a substitute				
	 basis under specifc FCC rules, regulati Do not list the station here in space G 	i—but	do list it in space		a b ,				
	• List the station here, and also in spac	e I, if tl basis. Colur	he station was c . For further info mn 1: List each :	arried both on a su rmation concerning station's call sign. I					
	This may be different from the channel associated with a station according to i the same on the form.	on wh ts over	ich your cab;e s r-thje-air designa	ystem carried the s ation. For example	station. Identify each multicast stream				
	educational station, by entering the lett (for independent multicast), "E" (for nor For the meaning of these terms, see pa	er "N" ncomm age (iv	(for network), "N nercial education) of the general i	-M" (for network m nal), or "E-M" (for no instructions.	ulticast), "I" (for independent), "I-M" oncommercial educational multicast).				
	FCC. For Mexican or Canadian stations				tition. For U.S. stations, list the community to which the station is lice with which the station is identifed.				
	1. CALL	2.	B'CAST	3. TYPE	6. LOCATION OF STATION				
	SIGN		CHANNEL	OF					
		· .							
			NUMBER	STATION					
	KVII - ABC HD	K٧	NUMBER 7	STATION N	AMARILLO TX				
	KVII - ABC HD KVII - Comet	KV KV			AMARILLO TX AMARILLO TX				
	•••••••••••••••••••••••••••••••••••••••		7	N					
	KVII - Comet	K٧	7 206	N N	AMARILLO TX				
	KVII - Comet KVII - CW HD	KV KV KV	7 206 11	N N N N	AMARILLO TX AMARILLO TX AMARILLO TX				
	KVII - Comet KVII - CW HD KVII - Stadium	KV KV KV	7 206 11 205 2	N N N	AMARILLO TX AMARILLO TX				
	KVII - Comet KVII - CW HD KVII - Stadium KACV-PBS 2	KV KV KA KA	7 206 11 205 2 2.2	N N N E E-M	AMARILLO TX AMARILLO TX AMARILLO TX AMARILLO TX AMARILLO TX				
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	KVII - Comet KVII - CW HD KVII - Stadium KACV-PBS 2 KACV-PBS Kids 2.2 KCPN-MNT 4.2 HD KAMR-NBC 4 KAMR-NBC HD 4 KCIT-BounceTV 14.4 KCIT-EscapeTV 14.3 KCIT-FOX 14	KV KV KV KA KA KA KA KA KA KA KA KA KA	7 206 11 205 2 2.2 4.2 4 4 4.1 14.4 14.3 14 14.5 14.2	N N E E-M E-M I-M I-M I I I I I M	AMARILLO TX AMARILLO TX				
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ACCOUNTING PERIOD: 2020/2

FORM SA1-2. F		CABLE SI	/STEM:					SYSTEM ID#	Name
Vyve Broadk								031026	Naille
PRIMARY TRA		-	rriad on a concrete and dia	·~+-	basis and list t		000 000	ind on an	н
			rried on a separate and discr nerally receivable" by your ca						п
	-	-	-Band FM Carriage: Under (Primary
eceivable if (1)	it is carried by	y the syst	em whenever it is received a	at th	ne system's hea	dend, and (2)	it can b	e expected,	Transmitters
			ved at the headend, with the Copyright Office regulations						Radio
			each station carried.	UII	tills politit, see p	age (v) of the	genera		
			n is AM or FM.		h	- 4	4		
			al was electronically process mark in the "S/D" column.	sea	by the cable sy	stem as a sep	parate a	na aiscrete	
Column 4: G	ive the statior	n's locatio	on (the community to which th				C or, in tl	ne case of	
lexican or Can	adian stations	s, if any, t	he community with which the	e st	ation is identifie	d).			
		•					r		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
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Name	LEGAL NAME OF OWNER OF O Vyve Broadband A, LLO		EM:						:	SYSTEM ID# 031026
	SUBSTITUTE CARRIAGE	: SPECIA		T AND PROGRAM LO	G					
I	In General: In space I, identif substitute basis during the ac	y every non counting pe	network televis riod, under spe	<i>ion program</i> broadcast by a cific present and former FC	a distant st C rules, re	gula	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	SPECIAL STATEMENT During the accounting peri-				is anv no	nne	twork televi	sion	program	
Statement and Program Log	broadcast by a distant stat	ion?	-	-	-				Yes	XNo
	Note: If your answer is "No" log in block 2.			e blank. Il your answer is	res, you	mu	ist complete	e ine	e program	
	 LOG OF SUBSTITUTE In General: List each substiclear. If you need more space Column 1: Give the title of period, was broadcast by a of under certain FCC rules, reg Do not use general categori "NBA Basketball: 76ers vs. If Column 2: If the program Column 3: Give the call s Column 4: Give the broat the case of Mexican or Canas Column 5: Give the mont first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the letted to delete under FCC rules a gram was substituted for pro- effect on October 19, 1976. 	tute progra ce, please a of every nor distant stati gulations, o es like "mor Bulls." a was broad sign of the s dcast statio th and day ' e "5/7." s when the Example: a er "R" if the nd regulatic	m on a separa attach additiona network televio on and that yo r authorizationa vies" or "baske least live, enter station broadca n's location (th ns, if any, the of when your syst substitute pro- program carrie listed program ons in effect du	al pages. ision program (substitute p ur cable system substitute s. See page (v) of the gen tball." List specific program "Yes." Otherwise enter "I usting the substitute progra the community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01: was substituted for progra ring the accounting period	brogram) t ad for the p eral instru n titles, fo No." am. station is station is program. cable syst 15 p.m. to amming th d; enter the	lice dem. 6:2 at y	during the ramming of ns for furthe ample, "I Lo nsed by the tified). numerals, List the tim 8:30 p.m. s our system ter "P" if the	acco ancerini ove I + FC with hes a hou was	counting other statio formation. Lucy" or C or, in the month accurately ld be s required red pro	
							EN SUBST			
			E PROGRAM				IAGE OCC	CUR TIME		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MON AND D			<u> </u>	то	
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FORM SA1-2. PAGE 6.		
LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC	SYSTEM ID# 031026	Name
	031020	
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,	500)	
1. Enter the amount of gross receipts from space K		
2. Base amount under statutory formula \$ 263,800.00		
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	

ACCOUNTING PERIOD: 2020/2

		FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Humo	Vyve Broadband A, LLC	031026
	CHANNELS	
М	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast station	IS
	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	18
	system carried television broadcast stations	10
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	153
	and nonbroadcast services	
-		
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		-235-8313
Information	Name Marie Censopiano Telephone 914	200 00.0
	A laterational Dr. Suite 220	
	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 regulations,	
0	as explained in the general instructions.)	
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 syste	m 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 owner of	f the coble system
	in line 1 of space B.	i the cable system
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained here are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. 	ein
	[18 U.S.C., Section 1001(1986)]	
	Handwritten signature: /s/ Daniel J White	
	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)	
	Dete: 0/00/0004	
	Date: 2/26/2021	

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: 2020/2

FORM SA1-2. PAG	E 8	3.
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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
/yve Broadband A, LLC 031026	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." 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.	P Special Statement Concerning Gross Receipts Exclusion
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	
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) \$-	
(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	
Accounting period	
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