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.

SA3 Long Form

Return to:

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are at the end of this form [pages i-viii].

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

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Licensing Division

Licensing Division 101 Independence Ave. SE Washington, DC 20557-6400 (202) 707-8150

For courier deliveries, see page ii of the general instructions

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:										
Accounting		July 1 - December 31, 2020									
Period											
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. 006i LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Vyve Broadband A, LLC										
		vyve Broadband A, LLC									
					006824 2020/2						
		4 International Dr Suite 330									
		Rye Brook, NY 10573									
	INS	TRUCTIONS: In line 1, give any business or trade names used to	identify the husines	ss and operation of the	system unless these						
С		nes already appear in space B. In line 2, give the mailing address of									
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	Inc	ructions: For complete space D instructions, see page 1b. Identify	, only the fret comm	nunity convod holow are	d rolist on nago 1h						
_			only the hat comm	numity served below an	iu rensi ori page 10						
Area Served	with	all communities. CITY OR TOWN	STATE								
First		Shawnee	OK								
Community				inaca C							
•	B	elow is a sample for reporting communities if you report multiple ch	1	i	SUB GRP#						
		CITY OR TOWN (SAMPLE) STATE CH LINE UP SUB GRP#									
	Alda		MD	Α	1						
Sample	Alda		MD MD	A B	1 2						

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 SA3c Rev: 04/2011

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Name			
Vyve Broadband A, LLC			006824				
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 entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you 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, condominiums, or below the identified city or town.	r mobile home parks should be	e reported in paren	theses				
If all communities receive the same complement of television broadcast sta all communities with the channel line-up "A" in the appropriate column below on a partially distant or partially permitted basis in the DSE Schedule, associated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community channel line-up designated by an alpha-letter(s) (based on your Space G re (based on your reporting from Part 9 of the DSE Schedule) in the appropriation.	w or leave the column blank. It ciate each relevant community cy-by-community basis, associa porting) and a subscriber grou	f you report any sta v with a subscriber of ate each communit	tions group, y with a				
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#				
Shawnee	OK	AA	1	First			
Bethel Acres	ОК	AA	1	Community			
Dale	OK	AA	1				
Earlsboro	ОК	AA	1				
Mcloud	OK	AA	1				
Meeker	OK	AA	1				
Pottawatomie County	ОК	AA	1				
Prague	ОК	AA	1				
Tecumseh	ОК	AA	1				
Braggs	OK	AE	4				
Bristow	ОК	AE	4				
Depew	OK	AE	4				
Eufaula	OK	AE	4				
MacIntosh	OK	AE	4				
Checotah	OK	AE	4				
Fort Gibson	OK	AE	4				
Okay	OK	AE	4				
Kellyville	OK	AE	1				
Ketchum	OK	AE					
Afton	OK	AE AE	5				
	OK						
Bernice Obstance		AE	4				
Chelsea	OK	AE	1				
Delaware County	OK	AE	1				
Fairland	ОК	AE	6				
Grand Lake / West Shores	OK	AE	1				
Grove	OK	AE	4				
Vinita	OK	AE	1				
Langley	OK	AE	1				
Spavinaw	OK	AE	1				
Strang	OK	AE	1				
Pryor	OK	AE	1				
Porum	OK	AE	4				
Salina	OK	AE	1				
Saima Chouteau	OK	AE AE	1				
Inola		AE AE	1				
	OK OK		1				
Locust Grove	OK	AE	1				
Mayes County	OK	AE	1				
Gore	OK	AB	2				
Webbers Fall	OK	AB	2				
Chandler Holdenville	OK OK	AC AD	1				

LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC			SYSTEM ID# 006824	Name			
Instructions: List each separate community served by the cable system. A "comin FCC rules: "a separate and distinct community or municipal entity (including unareas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd).	nincorporated communiti	es within unincorpo	orated	D Area			
of system identification hereafter known as the "first community." Please use it as the first community on all future fillings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses							
below the identified city or town.	·						
If all communities receive the same complement of television broadcast stations all communities with the channel line-up "A" in the appropriate column below or I on a partially distant or partially permitted basis in the DSE Schedule, associate designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-channel line-up designated by an alpha-letter(s) (based on your Space G reportin (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns.	eave the column blank. I each relevant community community basis, associ ng) and a subscriber gro	f you report any sta y with a subscriber of ate each communit	tions group, y with a				
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#				
Stroud	ОК	AF	1	First			
McAlester	OK	AG	7	Community			
Alderson	OK	AG	7				
Krebbs	OK	AG	7				
Pittsburg County	OK	AG	7				
Arpelar	OK	AH	7				
Haywood	OK	AH	7				
Stuart	OK	AH	7				
Haileyville	OK	AH	7				
Hartshorne	OK	AH	7				
Wilburton	OK	AH	7				
Red Oak	ОК	AH	7				
Cache	OK	Al	10				
Indiahoma	OK	Al	10				
Pecan Valley	OK	Al	10				
Snyder Snyder	OK	Al	11				
Mt Park	OK	Al	11				

Ε

Secondary Transmission Service: Subscribers and Rates

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 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.

BL	OCK 1			BLOC	K 2	
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS		RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:	SOBSCRIBERS		IVAIL	GATEGORY OF GERVICE	SOBSCRIBERS	IVATE
Service to first set	6,867	\$	28.50			
Service to additional set(s)						
 FM radio (if separate rate) 						
Motel, hotel		<u> </u>				
Commercial	966	\$	28.50			
Converter		<u> </u>				
Residential		<u> </u>				
Non-residential		ļ				

F

Services Other Than Secondary Transmissions: Rates

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 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 furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the 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.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a 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 2					
CATEGORY OF SERVICE	RATE		CATEGORY OF SERVICE		CATEGORY OF SERVICE	RATE	
Continuing Services:			Installation: Non-residential				
Pay cable	\$	19.95	Motel, hotel		T&M		
 Pay cable—add'l channel 	\$	14.95	Commercial		T&M		
Fire protection		N/A	Pay cable		T&M		
Burglar protection		N/A	Pay cable-add'l channel		T&M		
Installation: Residential			Fire protection		N/A		
First set	\$	64.95	Burglar protection		N/A		
Additional set(s)			Other services:				
• FM radio (if separate rate)			Reconnect	\$	39.95		
Converter			Disconnect				
			Outlet relocation	\$	20.00		
			Move to new address	\$	39.95		

KOKH-3

25.3

I-M

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Vyve Broadband A, LLC	006824	Name

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 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	IEL LINE-UP	AA	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KAUT-3	43.3	I-M	No		Oklahoma City, OK
KAUT	43	I	NO		Oklahoma City, OK
KAUT-2	43.2	I-M	NO		Oklahoma City, OK
KETA-3	13.3	E-M	NO		Oklahoma City, OK
KETA-4	13.4	E-M	NO		Oklahoma City, OK
KETA-2	13.2	E-M	NO		Oklahoma City, OK
KETA	13	Е	NO		Oklahoma City, OK
KFOR-2	4.2	I-M	NO		Oklahoma City, OK
KFOR	4	N	NO		Oklahoma City, OK
КОСВ-3	34.3	I-M	NO		Oklahoma City, OK
КОСВ	34	I	NO		Oklahoma City, OK
KOCB-2	34.2	I-M	NO		Oklahoma City, OK
KOCM	46	I	NO		Norman, OK
косо	5	N	No		Oklahoma City, OK
KOCO-2	5.2	I-M	NO		Oklahoma City, OK
кокн	25	I	NO		Oklahoma City, OK
KOKH-2	25.2	I-M	NO		Oklahoma City, OK
1/01/11 0					

NO

Oklahoma City, OK

G

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 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AA	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
КОРХ	62	ı	No		Oklahoma City, OK
КОРХ-3	62.3	I-M	NO		Oklahoma City, OK
KOPX-2	62.2	I-M	NO		Oklahoma City, OK
KSBI	52	I	NO		Oklahoma City, OK
КТВО-4	14.4	I-M	NO		Oklahoma City, OK
КТВО-3	14.3	I-M	NO		Oklahoma City, OK
ктво	14	I	NO		Oklahoma City, OK
КТВО-5	14.5	I-M	NO		Oklahoma City, OK
КТВО-2	14.2	I-M	NO		Oklahoma City, OK
KTUZ	29	I	NO		Oklahoma City, OK
KWTV	9	N	NO		Oklahoma City, OK
KWTV-2	9.2	N-M	NO		Oklahoma City, OK
KSBI-2	52.2	I-M	NO		Oklahoma City, OK
KSBI-3	52.3	I-M	NO		Oklahoma City, OK
		1		1	

G

ACCOUNTING PERIOD: 2020/2 FORM SA3. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 006824 Vyve 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 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 Primary substitute program basis, as explained in the next paragraph. Transmitters: 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. 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 (v) of the general instructions. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions. Column 6: 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. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		OHAIN	LL LINE OI	70	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KJRH-2	2.2	I-M	No		Tulsa, OK
KJRH-3	2.3	I-M	No		Tulsa, OK
KOED-3	11.3	E-M	No		Tulsa, OK
KOED-4	11.4	E-M	No		Tulsa, OK
KOED-2	11.2	E-M	No		Tulsa, OK
KOKI-3	23.3	I-M	No		Tulsa, OK
KOKI-2	23.2	I-M	No		Tulsa, OK
KOTV-3	6.3	I-M	No		Tulsa, OK
KTPX-3	44.3	I-M	Yes	0	Okmulgee, OK
KTPX-2	44.2	I-M	Yes	0	Okmulgee, OK
KJRH	2	N	No		Tulsa, OK
KOED	11	E	No		Tulsa, OK
KOTV	6	N	No		Tulsa, OK
кокі	23	I	No		Tulsa, OK
КТРХ	44	ı	Yes	0	Okmulgee, OK
KFSM	5	N	No		Fort Smith, AR
KHBS	40	N	No		Fort Smith, AR
KXNW	34	ı	Yes	0	Fort Smith, AR

CHANNEL LINE-UP AB

It is strongly recommended that operators list call signs in alphabetical

FORM SA3. PAGE 3.					Т	
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
Vyve Broadbar	nd A, LLC				006824	
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
					and low power television stations)	G
, ,		•		• •	d only on a part-time basis under in network programs [sections	•
•				•	nd (2) certain stations carried on a	Primary
substitute program ba						Transmitters:
basis under specifc F				carried by your ca	able system on a substitute program	Television
•				e Special Stateme	ent and Program Log)—if the	
station was carried	,					
	•				ute basis and also on some other the general instructions.	
					s such as HBO, ESPN, etc. Identify	
					ion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	A-2″. Simulcast	streams must	be reported in c	column 1 (list each	stream separately; for example	
,	e channel numb	ber the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in	
•	•		annel 4 in Washi	ington, D.C. This	may be different from the channel	
on which your cable s	,		ation is a networ	rk station, an inde	pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
,	,		,.	•	mmercial educational multicast).	
For the meaning of the			•		s". If not, enter "No". For an ex-	
planation of local serv				,.	3 . If flot, chief 140 . For all ex	
•			•	•	tating the basis on which your	
cable system carried t carried the distant star		•	0 1	,	ering "LAC" if your cable system	
	•				payment because it is the subject	
of a written agreemen	t entered into o	n or before Ju	ne 30, 2009, bet	ween a cable sys	tem or an association representing	
•			•		y transmitter, enter the designa-	
explanation of these th					ner basis, enter "O." For a further	
Column 6: Give th	e location of ea	ch station. Fo	r U.S. stations, I	ist the community	to which the station is licensed by the	
FCC. For Mexican or (Note: If you are utilizing				•	which the station is identifed.	
Note: If you are utilizing	ig multiple chai	•	•		Statillet lifte-up.	
	1	1	EL LINE-UP			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
KUDC 3	NUMBER	STATION	No	(If Distant)	Fort Smith AD	
KHBS-2	40.2	I-M	No		Fort Smith, AR	
				••••••••••••		
	-					

It is strongly recommended that operators list call signs in alphabetical

PRIMARY TRANSMITTERS: TELEVISION

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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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KAUT-3	43.3	I-M	No		Oklahoma City, OK
KAUT-2	43.2	I-M	No		Oklahoma City, OK
KETA-3	13.3	E-M	No		Oklahoma City, OK
KETA-4	13.4	E-M	No		Oklahoma City, OK
KETA-2	13.2	E-M	No		Oklahoma City, OK
KFOR-2	4.2	I-M	No		Oklahoma City, OK
KOCB-3	34.3	I-M	No		Oklahoma City, OK
KOCB-2	34.2	I-M	No		Oklahoma City, OK
KOCO-2	5.2	I-M	No		Oklahoma City, OK
KOKH-2	25.2	I-M	No		Oklahoma City, OK
KOKH-3	25.3	I-M	No		Oklahoma City, OK
KOPX-3	62.3	I-M	No		Oklahoma City, OK
KTBO-4	14.4	I-M	No		Oklahoma City, OK
КТВО-3	14.3	I-M	No		Oklahoma City, OK
КТВО	14	I	No		Oklahoma City, OK
KTBO-5	14.5	I-M	No		Oklahoma City, OK
KTBO-2	14.2	I-M	No		Oklahoma City, OK
KWTV-2	9.2	N-M	No		Oklahoma City, OK

G

PRIMARY TRANSMITTERS: TELEVISION

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Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AC	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
косо	5	N	No		Oklahoma City, OK
KTUZ	29	I	No		Oklahoma City, OK
КОСВ	34	I	No		Oklahoma City, OK
KFOR	4	N	No		Oklahoma City, OK
кокн	25	I	No		Oklahoma City, OK
KWTV	9	N	No		Oklahoma City, OK
KOPX	62	I	No		Oklahoma City, OK
KETA	13	E	No		Oklahoma City, OK
KOCM	46	I	No		Norman, OK
KSBI	52	I	No		Oklahoma City, OK
KOPX-2	62.2	I-M	No		Oklahoma City, OK
KAUT	43	I	No		Oklahoma City, OK
KSBI-2	52.2	I-M	No		Oklahoma City, OK
KSBI-3	52.3	I-M	No		Oklahoma City, OK

G

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Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

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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 (v) of the general instructions.

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		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KETA-3	13.3	E-M	No		Oklahoma City, OK
KETA-4	13.4	E-M	No		Oklahoma City, OK
KETA-2	13.2	E-M	No		Oklahoma City, OK
KFOR-2	4.2	I-M	No		Oklahoma City, OK
KOCB-3	34.3	I-M	No		Oklahoma City, OK
KOCB-2	34.2	I-M	No		Oklahoma City, OK
KOCO-2	5.2	I-M	No		Oklahoma City, OK
KOKH-2	25.2	I-M	No		Oklahoma City, OK
KOKH-3	25.3	I-M	No		Oklahoma City, OK
КОРХ-3	62.3	I-M	No		Oklahoma City, OK
KTBO-4	14.4	I-M	No		Oklahoma City, OK
КТВО-3	14.3	I-M	No		Oklahoma City, OK
КТВО	14	ı	No		Oklahoma City, OK
KTBO-5	14.5	I-M	No		Oklahoma City, OK
KTBO-2	14.2	I-M	No		Oklahoma City, OK
KWTV-2	9.2	N-M	No		Oklahoma City, OK
косо	5	N	No		Oklahoma City, OK
KOTV	6	N	No		Tulsa, OK

G

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Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

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		CHANN	EL LINE-UP	AD	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KTEN	10	N	No		Ada, OK
KTUZ	29	I	No		Oklahoma City, OK
КОСВ	34	I	No		Oklahoma City, OK
KFOR	4	N	No		Oklahoma City, OK
кокн	25	I	No		Oklahoma City, OK
KWTV	9	N	No		Oklahoma City, OK
КОРХ	62	I	No		Oklahoma City, OK
KETA	13	E	No		Oklahoma City, OK
KOCM	46	I	No		Norman, OK
KSBI	52	I	No		Oklahoma City, OK
KOPX-2	62.2	I-M	No		Oklahoma City, OK
KSBI-2	52.2	I-M	No		Oklahoma City, OK
KSBI-3	52.3	I-M	No		Oklahoma City, OK
KAUT	43	I	No		Oklahoma City, OK
KAUT-2	43.2	I-M	No		Oklahoma City, OK
KAUT-3	43.3	I-M	No		Oklahoma City, OK

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KDOR-4	17.4	I-M	Yes	0	Bartlesville, OK
KDOR-3	17.3	I-M	Yes	0	Bartlesville, OK
KDOR	17	ı	Yes	0	Bartlesville, OK
KDOR-5	17.5	I-M	Yes	0	Bartlesville, OK
KDOR-2	17.2	I-M	Yes	0	Bartlesville, OK
KJRH-2	2.2	I-M	No		Tulsa, OK
KJRH-3	2.3	I-M	No		Tulsa, OK
KMYT-2	41.2	I-M	Yes	0	Tulsa, OK
KMYT-3	41.3	I-M	Yes	0	Tulsa, OK
KMYT-4	41.4	I-M	Yes	0	Tulsa, OK
KOED-3	11.3	E-M	No		Tulsa, OK
KOED-4	11.4	E-M	No		Tulsa, OK
KOED-2	11.2	E-M	No		Tulsa, OK
KOKI-3	23.3	I-M	No		Tulsa, OK
KOKI-2	23.2	I-M	No		Tulsa, OK
KOTV-3	6.3	I-M	No		Tulsa, OK
KTPX-3	44.3	I-M	Yes	0	Okmulgee, OK
KTPX-2	44.2	I-M	Yes	0	Okmulgee, OK

G

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1. CALL SIGN 2. B'CAST CHANNEL NUMBER STATION KTUL-3 8.3 I-M NO Tulsa, OK Tulsa, OK KUL-2 8.2 I-M NO Tulsa, OK Tulsa, OK KUL-3 KOED 11 E NO Tulsa, OK KMYT 41 I Yes O Tulsa, OK Tulsa, OK Tulsa, OK KULL Tulsa, OK KOTV 6 N NO Tulsa, OK KULL 8 N NO Tulsa, OK KULL Tulsa, OK KULL Tulsa, OK KULL Tulsa, OK KULL Tulsa, OK Tulsa, OK KULL Tulsa, OK KULL Tulsa, OK KULL Tulsa, OK KULL Tulsa, OK Tulsa, OK KULL Tulsa, OK Tulsa, OK			CHANN	EL LINE-UP	AE	
KTUL-2 8.2 I-M No Tulsa, OK KJRH 2 N No Tulsa, OK KOED 11 E No Tulsa, OK KMYT 41 I Yes O Tulsa, OK KOTV 6 N No Tulsa, OK KTUL 8 N No Tulsa, OK KQCW 19 I Yes O Muskogee, OK KOKI 23 I No Tulsa, OK KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Claremore, OK KRSU 35 E Yes O Claremore, OK		CHANNEL	OF	_	CARRIAGE	6. LOCATION OF STATION
KJRH 2 N No Tulsa, OK KOED 11 E No Tulsa, OK KMYT 41 I Yes O Tulsa, OK KOTV 6 N No Tulsa, OK KTUL 8 N No Tulsa, OK KQCW 19 I Yes O Muskogee, OK KOKI 23 I No Tulsa, OK KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Claremore, OK KRSU 35 E Yes O Claremore, OK	KTUL-3	8.3	I-M	No		Tulsa, OK
KOED 11 E No Tulsa, OK KMYT 41 I Yes O Tulsa, OK KOTV 6 N No Tulsa, OK KTUL 8 N No Tulsa, OK KQCW 19 I Yes O Muskogee, OK KOKI 23 I No Tulsa, OK KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Claremore, OK KRSU 35 E Yes O Claremore, OK	KTUL-2	8.2	I-M	No		Tulsa, OK
KMYT 41 I Yes O Tulsa, OK KOTV 6 N No Tulsa, OK KTUL 8 N No Tulsa, OK KQCW 19 I Yes O Muskogee, OK KOKI 23 I No Tulsa, OK KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Tulsa, OK KRSU 35 E Yes O Claremore, OK	KJRH	2	N	No		Tulsa, OK
KOTV 6 N No Tulsa, OK KTUL 8 N No Tulsa, OK KQCW 19 I Yes O Muskogee, OK KOKI 23 I No Tulsa, OK KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Tulsa, OK KRSU 35 E Yes O Claremore, OK	KOED	11	E	No		Tulsa, OK
KTUL 8 N No Tulsa, OK KQCW 19 I Yes O Muskogee, OK KOKI 23 I No Tulsa, OK KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Tulsa, OK KRSU 35 E Yes O Claremore, OK	KMYT	41	ı	Yes	0	Tulsa, OK
KQCW 19 I Yes O Muskogee, OK KOKI 23 I No Tulsa, OK KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Tulsa, OK KRSU 35 E Yes O Claremore, OK	KOTV	6	N	No		Tulsa, OK
KOKI 23 I No Tulsa, OK KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Tulsa, OK KRSU 35 E Yes O Claremore, OK	KTUL	8	N	No		Tulsa, OK
KWHB 47 I Yes O Tulsa, OK KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Tulsa, OK KRSU 35 E Yes O Claremore, OK	KQCW	19	I	Yes	0	Muskogee, OK
KTPX 44 I Yes O Okmulgee, OK KGEB 53 I Yes O Tulsa, OK KRSU 35 E Yes O Claremore, OK	KOKI	23	ı	No		Tulsa, OK
KGEB 53 I Yes O Tulsa, OK KRSU 35 E Yes O Claremore, OK	KWHB	47	ı	Yes	0	Tulsa, OK
KRSU 35 E Yes O Claremore, OK	KTPX	44	ı	Yes	0	Okmulgee, OK
	KGEB	53	ı	Yes	0	Tulsa, OK
KTUL-4 8.4 I-M No Tulsa OK	KRSU	35	E	Yes	0	Claremore, OK
11.02 1 1.11 1.10 1.10 1.10	KTUL-4	8.4	I-M	No		Tulsa, OK

G

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 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AF	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KAUT-3	43.3	I-M	No		Oklahoma City, OK
KAUT	43	I	No		Oklahoma City, OK
KAUT-2	43.2	I-M	No		Oklahoma City, OK
KETA-3	13.3	E-M	No		Oklahoma City, OK
KETA-4	13.4	E-M	No		Oklahoma City, OK
KETA-2	13.2	E-M	No		Oklahoma City, OK
KETA	13	E	No		Oklahoma City, OK
KFOR-2	4.2	I-M	No		Oklahoma City, OK
KFOR	4	N	No		Oklahoma City, OK
KOCB-3	34.3	I-M	No		Oklahoma City, OK
KOCB	34	I	No		Oklahoma City, OK
KOCB-2	34.2	I-M	No		Oklahoma City, OK
KOCM	46	I	No		Norman, OK
косо	5	N	No		Oklahoma City, OK
KOCO-2	5.2	I-M	No		Oklahoma City, OK
кокн	25	I	No		Oklahoma City, OK
KOKH-2	25.2	I-M	No		Oklahoma City, OK
КОКН-3	25.3	I-M	No		Oklahoma City, OK

G

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 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 specific 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AF	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
КОРХ	62	I	No		Oklahoma City, OK
КОРХ-3	62.3	I-M	No		Oklahoma City, OK
KOPX-2	62.2	I-M	No		Oklahoma City, OK
KOTV	6	N	No		Tulsa, OK
KSBI	52	I	No		Oklahoma City, OK
КТВО-4	14.4	I-M	No		Oklahoma City, OK
KTBO-3	14.3	I-M	No		Oklahoma City, OK
КТВО	14	I	No		Oklahoma City, OK
КТВО-5	14.5	I-M	No		Oklahoma City, OK
KTBO-2	14.2	I-M	No		Oklahoma City, OK
KTUZ	29	I	No		Oklahoma City, OK
KWTV	9	N	No		Oklahoma City, OK
KWTV-2	9.2	N-M	No		Oklahoma City, OK
KSBI-2	52.2	I-M	No		Oklahoma City, OK
KSBI-3	52.3	I-M	No		Oklahoma City, OK

G

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 006824 Vyve Broadband A, 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 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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Column 6: 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. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AG	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KDOR-4	17.4	I-M	No		Bartlesville, OK
KDOR-3	17.3	I-M	No		Bartlesville, OK
KDOR	17	I	No		Bartlesville, OK
KDOR-5	17.5	I-M	No		Bartlesville, OK
KDOR-2	17.2	I-M	No		Bartlesville, OK
KJRH-2	2.2	I-M	No		Tulsa, OK
KJRH-3	2.3	I-M	No		Tulsa, OK
KMYT-2	41.2	I-M	No		Tulsa, OK
KMYT-3	41.3	I-M	No		Tulsa, OK
KMYT-4	41.4	I-M	No		Tulsa, OK
KOED-3	11.3	E-M	No		Tulsa, OK
KOED-4	11.4	E-M	No		Tulsa, OK
KOED-2	11.2	E-M	No		Tulsa, OK
KOKI-3	23.3	I-M	No		Tulsa, OK
KOKI-2	23.2	I-M	No		Tulsa, OK
KOTV-3	6.3	I-M	No		Tulsa, OK
KTPX-3	44.3	I-M	No		Okmulgee, OK
KTPX-2	44.2	I-M	No		Okmulgee, OK

G

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 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.

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- 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

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Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AG	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KTUL-3	8.3	I-M	No		Tulsa, OK
KTUL-2	8.2	I-M	No		Tulsa, OK
KWTV-2	9.2	N-M	Yes	0	Oklahoma City, OK
KJRH	2	N	No		Tulsa, OK
KOED	11	E	No		Tulsa, OK
KMYT	41	ı	No		Tulsa, OK
KOTV	6	N	No		Tulsa, OK
KTUL	8	N	No		Tulsa, OK
KQCW	19	I	No		Muskogee, OK
KTEN	10	N	No		Ada, OK
KOKI	23	I	No		Tulsa, OK
KWHB	47	I	No		Tulsa, OK
КТРХ	44	I	No		Okmulgee, OK
KGEB	53	I	No		Tulsa, OK
KRSU	35	E	Yes	0	Claremore, OK
KTUL-4	8.4	I-M	No		Tulsa, OK

G

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 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.

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- 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KDOR-4	17.4	I-M	Yes	0	Bartlesville, OK
KDOR-3	17.3	I-M	Yes	0	Bartlesville, OK
KDOR	17	I	Yes	0	Bartlesville, OK
KDOR-5	17.5	I-M	Yes	0	Bartlesville, OK
KDOR-2	17.2	I-M	Yes	0	Bartlesville, OK
KJRH-2	2.2	I-M	No		Tulsa, OK
KJRH-3	2.3	I-M	No		Tulsa, OK
KMYT-2	41.2	I-M	Yes	0	Tulsa, OK
KMYT-3	41.3	I-M	Yes	0	Tulsa, OK
KMYT-4	41.4	I-M	Yes	0	Tulsa, OK
KOED-3	11.3	E-M	Yes	0	Tulsa, OK
KOED-4	11.4	E-M	Yes	0	Tulsa, OK
KOED-2	11.2	E-M	Yes	0	Tulsa, OK
KOKI-3	23.3	I-M	No		Tulsa, OK
KOKI-2	23.2	I-M	No		Tulsa, OK
KOTV-3	6.3	I-M	No		Tulsa, OK
KTPX-3	44.3	I-M	Yes	0	Okmulgee, OK
KTPX-2	44.2	I-M	Yes	0	Okmulgee, OK

G

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 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.

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Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

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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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

		CHANN	EL LINE-UP	AH	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION
KTUL-3	8.3	I-M	No		Tulsa, OK
KTUL-2	8.2	I-M	No		Tulsa, OK
KJRH	2	N	No		Tulsa, OK
KOED	11	E	Yes	0	Tulsa, OK
KMYT	41	I	Yes	0	Tulsa, OK
KOTV	6	N	No		Tulsa, OK
KTUL	8	N	No		Tulsa, OK
KQCW	19	ı	Yes	0	Muskogee, OK
KTEN	10	N	No		Ada, OK
кокі	23	ı	No		Tulsa, OK
KWHB	47	I	Yes	0	Tulsa, OK
KTPX	44	I	Yes	0	Okmulgee, OK
KGEB	53	I	Yes	0	Tulsa, OK
KRSU	35	Е	Yes	0	Claremore, OK
	8.4	I-M	No		Tulsa, OK

G

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Vyve Broadband A, LLC

PRIMARY TRANSMITTERS: TELEVISION

Name

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 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. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

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 (v) of the general instructions.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions.

Column 6: 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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

1. CALL SIGN 2. B'CAST CHANNEL NUMBER 3. TYPE OF STATION 4. DISTANT? (Yes or No) STATION 5. BASIS OF CARRIAGE (If Distant) 6. LOCATION OF STATION KAUZ 6 N NO Wichita Falls, TX KAUZ-2 6.2 I-M NO Wichita Falls, TX KETA-3 13.3 E-M Yes E Oklahoma City, OK KETA-4 13.4 E-M Yes E Oklahoma City, OK KFDX 3 N NO Wichita Falls, TX KFDX-2 3.2 I-M NO Wichita Falls, TX KJTL 18 I NO Wichita Falls, TX KSWO 7 N NO Lawton, OK KSWO-2 7.2 I-M NO Lawton, OK KSWO-3 7.3 I-M NO Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK			CHANN	EL LINE-UP	Al	
KAUZ-2 6.2 I-M No Wichita Falls, TX KETA-3 13.3 E-M Yes E Oklahoma City, OK KETA-4 13.4 E-M Yes E Oklahoma City, OK KFDX 3 N No Wichita Falls, TX KFDX-2 3.2 I-M No Wichita Falls, TX KJTL 18 I No Wichita Falls, TX KSWO 7 N No Lawton, OK KSWO-2 7.2 I-M No Lawton, OK KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK		CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION
KETA-3 13.3 E-M Yes E Oklahoma City, OK KETA-4 13.4 E-M Yes E Oklahoma City, OK KFDX 3 N No Wichita Falls, TX KFDX-2 3.2 I-M No Wichita Falls, TX KJTL 18 I No Wichita Falls, TX KSWO 7 N No Lawton, OK KSWO-2 7.2 I-M No Lawton, OK KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KAUZ	6	N	No		Wichita Falls, TX
KETA-4 13.4 E-M Yes E Oklahoma City, OK KFDX 3 N No Wichita Falls, TX KFDX-2 3.2 I-M No Wichita Falls, TX KJTL 18 I No Wichita Falls, TX KSWO 7 N No Lawton, OK KSWO-2 7.2 I-M No Lawton, OK KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KAUZ-2	6.2	I-M	No		Wichita Falls, TX
KFDX 3 N No Wichita Falls, TX KFDX-2 3.2 I-M No Wichita Falls, TX KJTL 18 I No Wichita Falls, TX KSWO 7 N No Lawton, OK KSWO-2 7.2 I-M No Lawton, OK KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KETA-3	13.3	E-M	Yes	E	Oklahoma City, OK
KFDX-2 3.2 I-M No Wichita Falls, TX KJTL 18 I No Wichita Falls, TX KSWO 7 N No Lawton, OK KSWO-2 7.2 I-M No Lawton, OK KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KETA-4	13.4	E-M	Yes	E	Oklahoma City, OK
KJTL 18 I No Wichita Falls, TX KSWO 7 N No Lawton, OK KSWO-2 7.2 I-M No Lawton, OK KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KFDX	3	N	No		Wichita Falls, TX
KSWO 7 N No Lawton, OK KSWO-2 7.2 I-M No Lawton, OK KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KFDX-2	3.2	I-M	No		Wichita Falls, TX
KSWO-2 7.2 I-M No Lawton, OK KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KJTL	18	ı	No		Wichita Falls, TX
KSWO-3 7.3 I-M No Lawton, OK KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KSWO	7	N	No		Lawton, OK
KETA 13 E Yes O Oklahoma City, OK KETA-2 13.2 E-M Yes E Oklahoma City, OK	KSWO-2	7.2	I-M	No		Lawton, OK
KETA-2 13.2 E-M Yes E Oklahoma City, OK	KSWO-3	7.3	I-M	No		Lawton, OK
	KETA	13	E	Yes	0	Oklahoma City, OK
KWTV 9 N Yes O Oklahoma City, OK	KETA-2	13.2	E-M	Yes	Е	Oklahoma City, OK
	KWTV	9	N	Yes	0	Oklahoma City, OK

G

ACCOUNTING PERIOD: 2020/2 FORM SA3. PAGE 4. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 006824 Vyve Broadband A, LLC PRIMARY TRANSMITTERS: RADIO Н 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. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally 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, Radio 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 (vi) 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). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

FORM SA3. PAGE 5. LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#	6 PERIOD: 2020/
Vyve Broadband A, LL						006824	Name
SUBSTITUTE CARRIAGE In General: In space I, identi substitute basis during the ac explanation of the programm 1. SPECIAL STATEMENT	fy every nor ccounting pe ing that mus	nnetwork televis riod, under spec at be included in	ion program broadcast by a cific present and former FC this log, see page (v) of the	a distant station C rules, regula	tions, or authorizations.		Substitute
 During the accounting per broadcast by a distant sta Note: If your answer is "No" 	iod, did you tion?	r cable system	carry, on a substitute bas		☐ Yes	XNo	Special Statement and Program Log
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 mor first. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	ce, please a of every nor distant stati gulations, o ies like "mo Bulls." In was broad sign of the sadcast static add and add add add add add add add add	am on a separa attach additional network televiton and that your authorizations vies" or "basked cast live, enterstation broadca on's location (the one, if any, the ownen your system substitute program carried listed program ons in effect du	al pages. sion program (substitute pur cable system substitute s. See page (vi) of the gertball." List specific program "Yes." Otherwise enter "Notherwise enter "Notherwise enter "Notherwise which the community with which the gram was carried by your end by a system from 6:01: was substituted for programing the accounting period	orogram) that, d for the program eral instruction titles, for example. It is a station is licenter that is identer the condition of the condi	during the accounting ramming of another states and for further information ample, "I Love Lucy" or unsed by the FCC or, in tified). The numerals, with the more accurate 8:30 p.m. should be our system was require ter "P" if the listed pro	tion n. nth	
effect on October 19, 1976.		E PROGRAM		WHE	EN SUBSTITUTE	7. REASON FOR	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO —	DELETION	

ACCOUNTING PERIOD: 2020/2 FORM SA3. PAGE 6.

Name		LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC SYST 0									
J Part-Time Carriage Log	time carriage du hours your syste Column 1 (Column 5 of spa Column 2 (Dourred during the Give the mont "4/10." • State the start television statio "app." Example • You may grou	s space ties in value to lack of action carried that stall sign): Give stall sign): Give states and hours the accounting perhand day when sing and ending n's broadcast date: "12:30 a.m.— 3	the carriage occ times of carriage ay, you may give	apacity, you are red more space, per distant station or each station, librarred. Use nume to the nearest quan approximate	equire lease n who st the rals, v arter ending	ed to complete the attach additional ose basis of carried dates and hours with the month fire hour. In any case g hour, followed by	is log giving the I pages. age you identific when part-time est. Example: for e where carriage by the abbrevia	e total dates and ed by "LAC" in e carriage oc- r April 10 give e ran to the end of tion	of the		
	12:00 p.m."		DAT	ES AND HOURS	OF F	PART-TIME CAR	RIAGE				
		\A/I IFA						N CARRIAGE OG	201101		
	CALL SIGN	VVHEN	N CARRIAGE OC HO	URS	1	CALL SIGN	VVHE	N CARRIAGE OC HC	DURS		
		DATE	FROM	ТО			DATE	FROM		ТО	
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FORM	SA3. PAGE 7.				_
	AL NAME OF OWNER OF CABLE SYSTEM: Ve Broadband A, LLC			SYSTEM ID# 006824	Mama
Ins all a (as pag	COSS RECEIPTS tructions: The figure you give in this space determines the form you fle and the amount you amounts (gross receipts) paid to your cable system by subscribers for the system's second identifed in space E) during the accounting period. For a further explanation of how to come (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	lary trar	nsmission is amour	n service	K Gross Receipts
• Cor • Cor • If you fee • If you	YRIGHT ROYALTY FEE Juctions: Use the blocks in this space L to determine the royalty fee you owe: Implete block 1, showing your minimum fee. Implete block 2, showing whether your system carried any distant television stations. It is pour system did not carry any distant television stations, leave block 3 blank. Enter the amount from block 1 on line 1 of block 4, and calculate the total royalty fee. It is pour system did carry any distant television stations, you must complete the applicable parts of the some parts of the schedule to your statement of account.				L Copyright Royalty Fee
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be e $\operatorname{ck} 3$ below.	entered	on line 1	of	
3b ▶ If p	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be ente elow. art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should				
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more at least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K				
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.				
	This is your minimum fee.	\$		14,480.25	
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. No—Leave block 3 below blank and continue the property of the proper	4, you r ?	must che	ck	
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	2,835.97	
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero			1,058.44	
	Line 3. Add lines 1 and 2 and enter here	\$		3,894.42	
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.		\$	14,480.25	Cable systems submitting additional deposits under
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)			0.00	Section 111(d)(7) should contact the Licensing Division for the
	TOTAL ROYALTY FEE. Add Lines 1, 2 and 3 of block 4 and enter total here	\$		14,480.25	appropriate form for submitting the
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions for more information.)	e page	(i) of the		additional fees.

ACCOUNTING PERIOD: 2020/2 FORM SA3. PAGE 8.

Nome	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Vyve Broadband A, LLC	006824
	CHANNELS	
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast	st stations
	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	32
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations and nonbroadcast services	244
	and nonstreadded controls	···[]
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom	
14	we can write or call about this statement of account.)	
Individual to		
Be Contacted for Further	Name Marie Censoplano Telepho	ne 914-234-8313
Information	Name Mane Censopiano	714-234-0313
	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) 914-23	4-8363
	Lindi (optional) Trace (optional) o 11 Zeo	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office reg	ulations
0	as explained in the general instructions.)	alationo,
Certifcation	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 spa	ace B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the ca in line 1 of space B and that the owner is not a corporation or partnership; or	ble system as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as	owner of the cable system
	in line 1 of space B.	owner of the cable system
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact containing the statement of account and hereby declare under penalty of law that all statements of fact containing the statement of account and hereby declare under penalty of law that all statements of fact containing the statement of account and hereby declare under penalty of law that all statements of fact containing the statement of account and hereby declare under penalty of law that all statements of fact containing the statement of account and hereby declare under penalty of law that all statements of fact containing the statement of account and hereby declare under penalty of law that all statements of fact containing the statement of account and hereby declare under penalty of law that all statements of fact containing the statement of the	ained herein
	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 Whit	e
	Typed or printed name: Daniel J White	
	Title: SVP Financial Planning	
	(Title of official position held in corporation or partnership)	
	Date: 2/26/21	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Vyve Broadband A, LLC	006824	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 ad lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system fo service of providing secondary transmissions of primary broadcast transmitters, the system shall n scribers and amounts collected from subscribers receiving secondary transmissions pursuant to see For more information on when to exclude these amounts, see the note on page (vii) of the general instruction of the secondary transmissions period did the cable system exclude any amounts of gross receipts for secondary transmissions.	r the basic ot include sub- ection 119."	Special Statement 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 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 u For an explanation of interest assessment, see page (viii) of the general instructions.	nderpayment.	Q
Line 4. Enterally a consent of late an expert of the second of the secon		Interest
Line 1 Enter the amount of late payment or underpayment		Assessment
x		
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		
	0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,		
space L, (page 7) \$	_	
	est charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assi contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	stance please	
** 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 please list below the owner, address, frst community served, accounting period, and ID number as given ifiling.		
Owner		
Address		
First community served Accounting period		
ID number		

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.

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical value given by the Copyright Act to each distant television station carried by a cable system during an accounting period. Your system's total number of DSEs determines the royalty you owe. For the full definition, see page (v) of the General Instructions.

FORMULAS FOR COMPUTING A STATION'S DSE

There are two different formulas for computing DSEs: (1) a basic formula for all distant stations listed in space G (page 3), and (2) a special formula for those stations carried on a substitute basis and listed in space I (page 5). (Note that if a particular station is listed in both space G and space I, a DSE must be computed twice for that station: once under the basic formula and again under the special formula. However, a station's total DSE is not to exceed its full type-value. If this happens, contact the Licensing Division.)

BASIC FORMULA: FOR ALL DISTANT STATIONS LISTED IN SPACE G OF SA3 (LONG FORM)

Step 1: Determine the station's type-value. For purposes of computing DSEs, the Copyright Act gives different values to distant stations depending upon their type. If, as shown in space G of your statement of account (page 3), a distant station is:

• Independent: its type-value is	1.00
Network: its type-value is	0.25
Noncommercial educational: its type-value is	0.25
Note that local stations are not counted at all in computing DSEs.	

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives you the particular station's DSE for the accounting period. (Note that for stations other than those carried on a part-time basis due to lack of activated channel capacity, actual multiplication is not necessary since the DSE will always be the same as the type value.)

SPECIAL FORMULA FOR STATIONS LISTED IN SPACE I OF SA3 (LONG FORM)

Step 1: For each station, calculate the number of programs that, during the accounting period, were broadcast live by the station and were substituted for programs deleted at the option of the cable system.

(These are programs for which you have entered "Yes" in column 2 and "P" in column 7 of space I.)

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the particular station's DSE for the accounting period.

TOTAL OF DSEs

In part 5 of this schedule you are asked to add up the DSEs for all of the distant television stations your cable system carried during the accounting period. This is the total sum of all DSEs computed by the basic formula and by the special formula.

THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee and the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment.

The 3.75 Fee. If a cable system located in whole or in part within a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

The Minimum Fee/Base Rate Fee/3.75 Percent Fee. All cable systems fling SA3 (Long Form) must pay at least the minimum fee, which is 1.064 percent of gross receipts. The cable system pays either the minimum fee or the sum of the base rate fee and the 3.75 percent fee, whichever is larger, and a Syndicated Exclusivity Surcharge, as applicable.

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
- A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station that it was authorized to carry or was lawfully carrying prior to March 31, 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate, but is subject to the Base Rate, and where applicable, the Syndicated Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

COMPUTING THE 3.75 PERCENT RATE—PART 6 OF THE DSE SCHEDULE

- Determine which distant stations were carried by the system pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or
 part-time basis only and complete the log to determine the portion of
 the DSE exempt from the 3.75 percent rate.
- Subtract the number of DSEs resulting from this carriage from the number of DSEs reported in part 5 of the DSE Schedule. This is the total number of DSEs subject to the 3.75 percent rate. Multiply these DSEs by gross receipts by .0375. This is the 3.75 fee.

COMPUTING THE SYNDICATED EXCLUSIVITY SURCHARGE—PART 7 OF THE DSE SCHEDULE

- Determine if any portion of the cable system is located within a top 100
 major television market as defined by the FCC rules and regulations in
 effect on June 24, 1981. If no portion of the cable system is located in
 a major television market, part 7 does not have to be completed.
- Determine which station(s) reported in block B, part 6 are commercial VHF stations and place a grade B contour, in whole, or in part, over the cable system. If none of these stations are carried, part 7 does not have to be completed.
- Determine which of those stations reported in block b, part 7 of the DSE Schedule were carried before March 31,1972. These stations are exempt from the FCC's syndicated exclusivity rules in effect on June 24, 1981. If you qualify to calculate the royalty fee based upon the carriage of partially-distant stations, and you elect to do so, you must compute the surcharge in part 9 of this schedule.
- Subtract the exempt DSEs from the number of DSEs determined in block B of part 7. This is the total number of DSEs subject to the Syndicated Exclusivity Surcharge.
- Compute the Syndicated Exclusivity Surcharge based upon these DSEs and the appropriate formula for the system's market position.

SYSTEM ID#

17.00

DSE SCHEDULE, PAGE 11.

COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE SCHEDULE

Determine whether any of the stations you carried were partially distant—that is, whether you retransmitted the signal of one or more stations to subscribers located within the station's local service area and, at the same time, to other subscribers located outside that area.

 If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable.
 First DSE

Each of the second, third, and fourth DSEs 0.701% of gross receipts
The fifth and each additional DSE 0.330% of gross receipts

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
- 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

If your system is located wholly outside all major and smaller television markets, give each station's DSEs as you gave them in parts 2, 3, and 4 of the schedule: or

If any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule.

4. Determine the portion of the total gross receipts you reported in space K (page 7) that is attributable to each subscriber group.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Enter the sum here and in line 1 of part 5 of this schedule.

- 5. Calculate a separate base rate fee for each subscriber group, using (1) the rates given above; (2) the total number of DSEs for that group's complement of stations; and (3) the amount of gross receipts attributable to that group.
- 6. Add together the base rate fees for each subscriber group to determine the system's total base rate fee.
- 7. If any portion of the cable system is located in whole or in part within a major television market, you may also need to complete part 9, block B of the Schedule to determine the Syndicated Exclusivity Surcharge.

What to Do If You Need More Space on the DSE Schedule. There are no printed continuation sheets for the schedule. In most cases, the blanks provided should be large enough for the necessary information. If you need more space in a particular part, make a photocopy of the page in question (identifying it as a continuation sheet), enter the additional information on that copy, and attach it to the DSE schedule.

Rounding Off DSEs. In computing DSEs on the DSE schedule, you may round off to no less than the third decimal point. If you round off a DSE in any case, you must round off DSEs throughout the schedule as follows:

- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

The example below is intended to supplement the instructions for calculating only the base rate fee for partially distant stations. The cable system would also be subject to the Syndicated Exclusivity Surcharge for partially distant stations, if any portion is located within a major television market.

EXAMPLE:

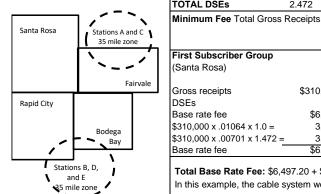
COMPUTATION OF COPYRIGHT ROYALTY FEE FOR CABLE SYSTEM CARRYING PARTIALLY DISTANT STATIONS

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.

Distant Stations Carrie	d	Identification	of Subscriber Groups	
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
E (network)	0.25	Fairvale	Stations B, D, and E	120,000.00
TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00

\$600,000.00

x .01064



		\$6,384.00			
First Subscriber Group		Second Subscriber Group		Third Subscriber Group	
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)	
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00
DSEs	2.472	DSEs	1.083	DSEs	1.389
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03

Total Base Rate Fee: \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94 In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

1 Vyve Broadband A, LLC 006824 Instructions: 2 In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). Computation In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncomof DSEs for mercial educational station, give the DSE as ".25." Category "O" CATEGORY "O" STATIONS: DSEs Stations **CALL SIGN CALL SIGN CALL SIGN** DSF DSF DSF KTPX-2 1.00 KDOR-2 1.00 KMYT-3 1.00 KTPX-3 1.00 KDOR-3 1.00 KMYT-4 1.00 KRSU 0.25 KDOR-4 1.00 KWTV-2 0.25 KMYT-2 1.00 KDOR-5 1.00 **KOED** 0.25 SUM OF DSEs OF CATEGORY "O" STATIONS: Add the DSEs of each station.

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-										
2											
Computation	In the column headed "DSE	": for each independ	ent station, give the DS	E as "1.0"; for ea	ch network or noncom-						
of DSEs for	mercial educational station, gi	ve the DSE as ".25."									
Category "O"			ATEGORY "O" STATIC								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
	KETA	0.25									
	KTPX	1.00				<mark></mark>					
	KXNW	1.00									
	KDOR	1.00									
	KMYT	1.00		<u> </u>							
	KQCW	1.00		<u> </u>							
	KWHB	1.00									
	KGEB	1.00				<mark></mark>					
		<u> </u>				<mark></mark>					
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		T									
				11							

Name		F OWNER OF CABLE SYS dband A, LLC	TEM:					S	006824		
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 1: Column figure shoul Column Column be carried o Column give the type Column	s: CAPACITY List the call sign of all 12: For each station, d correspond with the 13: For each station, 14: Divide the figure i 15: For each indepen 15: For each indepen 16: Multiply the figure 18 point. This is the sta	give the numl information of give the total n column 2 by decimal poin dent station, so in column 4 l	per of hours your cat given in space J. Cal number of hours tha y the figure in column t. This is the "basis of give the "type-value"	ole system carrieculate only one I t the station broan a, and give the f carriage value as "1.0." For ea	ed the station durin DSE for each static adcast over the air result in decimals "for the station. ch network or non-	g the acco on. during the in column commercia 6. Round t	e accounting peric 4. This figure mu al educational stat to no less than the	od. ist tion,		
Capacity			CATEGOR	RY LAC STATIO	NS: COMPU	TATION OF D	SEs				
	1. CALL SIGN	IGN OF HOURS CARRIAGE VALUE CARRIED BY STATION VALUE SYSTEM ON AIR									
			÷		=	x x					
			÷		=	x		=			
			÷		=	x x		=			
			÷		=	x		=			
			÷		=	x x		= =			
	Add the DSE	Es OF CATEGORY L s of each station. sum here and in line 2					0.00				
Computation of DSEs for Substitute-Basis Stations	Was carritions in each Broadcast space I). Column 2 at your option Column 3 Column 4	: Sive the call sign of ear ed by your system in ffect on October 19, 1 t one or more live, nor E: For each station given. This figure should of E: Divide the figure in t. This is the station's	substitution for 1976 (as shown network progrethe number correspond with fays in the coolumn 2 by the substitution of the subs	or a program that you or by the letter "P" in grams during that opti or of live, nonnetwork tith the information in calendar year: 365, e the figure in column 3	r system was per column 7 of spa onal carriage (as programs carrie space I. xcept in a leap y 3, and give the re	ermitted to delete use I); and shown by the word d in substitution fo year.	inder FCC "Yes" in co r programs Round to n	rules and regular plumn 2 of s that were delete	d		
		S	UBSTITUT	E-BASIS STAT	IONS: COMF	PUTATION OF	DSEs				
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUME OF DA IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRA		3. NUMBER OF DAYS IN YEAR	4. DSE		
		+					÷		=		
		+	+	=			÷		=		
		+		_			÷		=		
		-		=			÷		=		
	Add the DSE	Es OF SUBSTITUTEs of each station. sum here and in line 3					0.00				
5		BER OF DSEs: Give to SEs applicable to your		rom the boxes in parts	s 2, 3, and 4 of th	nis schedule and ac	d them to p	provide the total			
Total Number	1. Numb	er of DSEs from part 2	2			-	1	17.00			
of DSEs		er of DSEs from part 3	3			<u> </u>		0.00			
	3. Numb	er of DSEs from part 4	·			-		0.00			
	TOTAL NUME	BER OF DSEs							17.00		

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2020/2

									-
LEGAL NAME OF O Vyve Broadbar		SYSTEM:					S'	YSTEM ID# 006824	Name
Instructions: Bloc	ek Δ must be comn	leted							
In block A:									6
schedule.	Yes," leave the rer	mainder of pa	art 6 and part /	of the DSE schedu	lie blank and d	complete part	8, (page 16) of the		O
If your answer if "	'No," complete bloo	cks B and C			1 DI (ETO				Computation of
la tha aabla ayataa		بدام ما ما		TELEVISION MA		: 70 F -4 FO	C mulas and manufacture	tions in	Computation of 3.75 Fee
effect on June 24,	1981?			er markets as defin			C rules and regula	ions in	
	•		O NOT COMPI	LETE THE REMAIN	NDER OF PAI	RT 6 AND 7.			
X No—Comp	olete blocks B and (C below.							
		BLO	CK B: CARR	RIAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	egulations prid ne DSE Sched	or to June 25, 1 dule. (Note: The	part 2, 3, and 4 of th 1981. For further ex e letter M below ref Act of 2010.)	planation of p	ermitted statio	ns, see the	-	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)]	lles and reguled pursuant to	lations cited be o the FCC mar	sis on which you car low pertain to those ket quota rules [76.	e in effect on J .57, 76.59(b),	lune 24, 1981. 76.61(b)(c), 76	5.63(a) referring to		
	C Noncommerica	al educationa d station (76.6 or DSE sched	al station [76.59 65) (see paragr ule).	6.59(d)(1), 76.61(e) 9(c), 76.61(d), 76.63 aph regarding subs	B(a) referring t	o 76.61(d)]			
	*F A station prev	viously carrie JHF station w	ed on a part-time rithin grade-B ce	e or substitute basis ontour, [76.59(d)(5)	•		ring to 76.61(e)(5)]		
Column 3:		e stations ide	ntified by the le	parts 2, 3, and 4 of atter "F" in column 2			rksheet on page 14	· of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
KTPX-2	M	1.00	KDOR-5	M	1.00	KETA	С	0.25	
KTPX-3	M	1.00	KMYT-2	M	1.00				
KRSU	С	0.25	KMYT-3	M	1.00			ļ	
KDOR-2	M	1.00	KMYT-4	M	1.00			ļ	
KDOR-3 KDOR-4	M M	1.00 1.00	KWTV-2 KOED	M C	0.25 0.25				
KDOK-4	141	1.00	KOLD		0.23				
								10.00	
				OMPUTATION OF	- 2 75 EEE		-	•	
			SLOCK C. CC	MIFOTATION OF	3.731 LL				
Line 1: Enter the	total number of	DSEs from	part 5 of this s	schedule					
Line 2: Enter the	sum of permitted	d DSEs fron	n block B abo	ve					
				of DSEs subject 7 of this schedule		ate.			
Line 4: Enter gro	ss receipts from	space K (pa	age 7)						Do any of the DSEs represent
							x 0.03	15	partially permited/
Line 5: Multiply li	ne 4 by 0.0375 a	and enter su	m here				x		permited/ partially nonpermitted carriage?
Line 6: Enter tota	al number of DSE	Es from line	3						If yes, see part 9 instructions.
Line 7: Multiply li	ne 6 by line 5 an	d enter here	e and on line	2, block 3, space	L (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC SYSTEM ID# 006824								Name	
		BLOCK	A: TELEVI	SION MARKETS	S (CONTIN	UED)			_
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
									3.73100
		ļ							
		<u> </u>							
		<u> </u>			<u></u>				
		<u> </u>							

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC 006824									
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B, part 6 (i.e., those stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S—Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station.									
			DSE FOR STA	TIONS CARRIE		A PART-TIME AND		1		
	1. CALL SIGN	2. PRIOR DSE		COUNTING	•	4. BASIS OF CARRIAGE		RESENT DSE	6. PERMITTED DSE	
	SIGN	DSE	PI	RIOD		CARRIAGE	L	JSE	DSE	
7 Computation of the	,	"Yes," complete blo	ocks B and C, b		art 8 o	f the DSE schedule				
Syndicated			BLOC	(A: MAJOR	ΓELE	VISION MARKE	T			
Exclusivity Surcharge	• Is any portion of the ca	•	a top 100 major t	elevision market	as de	fned by section 76.5 No—Proceed to		s in effect June 24	1, 1981?	
		arriage of VHF/Gra			1		•	tation of Exempt		
	Is any station listed in commercial VHF station or in part, over the call	on that places a gra			nity	is any station listed in served by the cable ormer FCC rule 76.	e system pi			
		ation below with its a		tted DSE		Yes—List each sta No—Enter zero an			permitted DSE	
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIGN	DSE	
			TOTAL DSEA	0.00				TOTAL DOC	0.00	
			TOTAL DSEs	0.00				TOTAL DSE	J 0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: Vyve Broadband A, LLC	SYSTEM ID# 006824	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section	Enter the amount of gross receipts from space K (page 7)	1,360,925.54	7
Section	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8.	0.00	Surcharge
• Is any	// portion of the cable system within a top 50 television market as defined by the FCC? X Yes—Complete section 3 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	E	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	Yes—Complete part 9 of this schedule.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DS is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

	LEGAL NAN	IE OF OWNER OF CABLE SYSTEM: SYSTEM ID#
Name		/yve Broadband A, LLC 006824
Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.
8 Computation of Base Rate Fee	6 was 6 In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS our cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. DNO—Complete the following sections. BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE
	Section 1 Section 2	Enter the amount of gross receipts from space K (page 7)
	Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1). B. Enter 0.00701 of gross receipts (the amount in section 1). C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. D. Multiply line B by line C and enter here. E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee. 0.000

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2020/2

LEGAL N	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Mana
Vyve	Broadband A, LLC	006824	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4			8
	A. Enter 0.01064 of gross receipts		0
	(the amount in section 1) ▶\$	_	
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) \$		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here ▶\$	_	2400 11410 1 00
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here > \$		
	G. Add lines A, C, and F. This is your base rate fee.		
	Enter here and in block 3, line 1, space L (page 7)	0.00	
	Base Rate Fee	0.00	
IMPOR	TANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca	st signals shall	
	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel		9
In Gen	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee		Computation
	s from subscribers located within the station's local service area, from your system's total gross receipts. To take a clusion, you must:	dvantage of	of
			Base Rate Fee and
	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine		Syndicated
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for		Exclusivity Surcharge
Finally	: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.		for
must a	If any portion of your cable system is located within the top 100 television market and the station is not exempt in pso compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and er, if your cable system is wholly located outside all major television markets, complete block A only.		Partially Distant Stations, and
How to	Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
•	For each community served, determine the local service area of each wholly distant and each partially distant state to that community.	tion you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were lo the station's local service area. A subscriber located outside the local service area of a station is distant to that state the token, the station is distant to the subscriber.)		
	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant.	Each	
subscri	ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note th will have only one subscriber group when the distant stations it carried have local service areas that coincide.		
	iting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your syst ber groups.	em's	
	section:		
• Identi	fy the communities/areas represented by each subscriber group.		
	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to al bers in the group.	l of the	
• If:			
, -	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it i of this schedule; or,	n parts 2, 3,	
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	olock B,	
• Add tl	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calcu	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general i	nstructions.	
	ute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the		
DSEs f	In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (the or that group's complement of stations and total gross receipts from the subscribers in that group). You do not nee calculations on the form.	·	

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 006824 Vyve Broadband A, LLC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

Vyve Broadband A		E SYSTEM:					006824	Name
Е		COMPUTATION O		TE FEES FOR EAC	CH SUBSCRIE	BER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND SUBSCRIBER GROUP			
COMMUNITY/ AREA	Shawn	ee		COMMUNITY/ ARE	A Gore			9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				KTPX-2	1.00			Base Rate Fee
				КТРХ-3	1.00			and
								Syndicated Exclusivity
	 							Surcharge
								for
								Partially
			<u></u>					Distant
								Stations
							2.00	
Total DSEs 0.00				Total DSEs				
Gross Receipts First Gr	oup	\$ 771	,747.01	Gross Receipts Sec	ond Group	\$	3,416.24	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	60.30	
		SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Webbe	r Falls		COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark></mark>	KRSU	0.25			
Total DSEs			0.00	Total DSEs	- 1	•	0.25	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	167,147.79	
	1	-						
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	444.61	
Base Rate Fee: Add th			riber group a	s shown in the boxes	above.		2 925 27	
Enter here and in block	o, iirie 1, s	pace L (page /)				a	2,835.97	

Vyve Broadband		SYSTEM:					SYSTEM ID# 006824	Name	
	BLOCK A:	COMPUTATION (OF BASE RA	ATE FEES FOR EA	CH SUBSCRIE	BER GROUP			
	FIFTH	SUBSCRIBER GRO	OUP)UP	9			
COMMUNITY/ AREA	Afton			COMMUNITY/ ARE	COMMUNITY/ AREA Fairland				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DSE				
KQCW	1.00	07.22 0.0.1	302	KRSU	0.25	07.22 0.0.1	362	of Base Rate Fee	
KTPX	1.00			КТРХ-3	1.00			and	
KGEB	1.00			КТРХ-2	1.00			Syndicated	
KRSU	0.25			KDOR-2	1.00			Exclusivity	
				KDOR-3	1.00			Surcharge	
				KDOR-4	1.00			for	
				KDOR-5	1.00			Partially	
				KMYT-2	1.00			Distant	
				KMYT-3	1.00			Stations	
				KMYT-4	1.00				
Total DSEs			3.25	Total DSEs			9.25		
Gross Receipts First G	roup	\$	7,804.31	Gross Receipts Se	cond Group	\$	1,951.08		
			1						
Base Rate Fee First G	roup	\$	206.13	Base Rate Fee Se	cond Group	\$	95.59		
	SEVENTH	SUBSCRIBER GRO	OUP		EIGHTH	SUBSCRIBER GRO)UP		
COMMUNITY/ AREA	McAles	ter		COMMUNITY/ ARE	EA Arpelar				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
KWTV-2	0.25			KOED	0.25				
KRSU	0.25			KRSU	0.25				
				KOED-2	0.25				
				KOED-3	0.25				
				KOED-4	0.25				
					0.20				
	···								
							·····		
					·····				
Total DSEs			0.50	Total DSEs			1.25		
Gross Receipts Third (Froun	s 35	4,050.77	Gross Receipts Fo	urth Group	\$	0.00		
C.000 Receipts Tillu C	J. 5up	, Jo	.,,000.11	Oroso Receipts 10	arar Group	•			
Base Rate Fee Third (Group	\$	1,883.55	Base Rate Fee Fo	urth Group	\$	0.00		
_ see issue i de i i ii d			.,000.00			<u> </u>	0.00		
Base Rate Fee: Add th			criber group a	as shown in the boxes	s above.				
Enter here and in block	ა კ, iine 1, sp	pace ∟ (page 7)				\$			

Vyve Broadband A		SYSTEM:				5	006824	Name
E	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRIE	BER GROUP		
	NINTH	SUBSCRIBER GRO	UP	TENTH SUBSCRIBER GROUP				•
COMMUNITY/ AREA Stuart			COMMUNITY/ AREA Cache			9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	of			
KOED	0.25			KETA	0.25	CALL SIGN	DSE	Base Rate Fee
KRSU KDOR-2 KDOR-3 KDOR-4 KDOR-5 KMYT-2 KMYT-3 KMYT-4 KTPX-2 KTPX-3	0.25 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.0			REIA	0.25			and Syndicated Exclusivity Surcharge for Partially Distant Stations
KIFA-3	1.00							
Total DSEs			9.50	Total DSEs			0.25	
Gross Receipts First G	roup	<u>\$</u>	0.00	Gross Receipts Second Group \$ 52,409.62				
Base Rate Fee First Group \$ 0.00			<u>_</u>	Base Rate Fee Seco		\$	139.41	
		SUBSCRIBER GRO	UP			SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Snyder			COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KETA	0.25							
Total DSEs			0.25	Total DSEs			0.00	
Gross Receipts Third G	Group	\$ 2	2,398.73	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	6.38	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	s shown in the boxes a	above.	\$		

Vyve Broadband A		E SYSTEM:				•	006824	Name
Е				ATE FEES FOR EA				
COMMUNITY/ AREA	Shawne	SUBSCRIBER GRO	OUP	SECOND SUBSCRIBER GROUP COMMUNITY/ AREA Gore			9	
CALL SIGN	DSE	T CALL CICAL DOE		CALL SIGN	DSE	CALL SIGN	DOE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	KTPX	1.00	CALL SIGN	DSE	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
	<u> </u>						······	Distant Stations
	<u>-</u>		····					Stations
	<u> </u>		····					
Total DSEs			0.00	Total DSEs			1.00	
Gross Receipts First Gr	oup	\$ 77	1,747.01	Gross Receipts Sec	cond Group	\$	3,416.24	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	cond Group	\$	128.11	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Webber	· Falls		COMMUNITY/ ARE	A Braggs			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
KXNW	1.00							
								
								
	······································		····					
								
	 							
								
	<u>-</u>							
Total DSEs			1.00	Total DSEs	<u> </u>		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	ırth Group	\$	167,147.79	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	ırth Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes	above.	\$	1,058.44	

Vyve Broadband		E SYSTEM:				:	006824	Name
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EA	CH SUBSCRIE	BER GROUP		
	FIFTH	SUBSCRIBER GRO	UP		SIXTH	SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA	Afton			COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL CICIT	202	OTILL CICIT	702	KQCW	1.00	CALL CICIT	202	Base Rate Fe
	···		···	KTPX	1.00			and
	···		····	KGEB	1.00			Syndicated
	···		···	KWHB	1.00			Exclusivity
				KDOR	1.00			Surcharge
				KMYT	1.00			for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs	1		6.00	
Gross Receipts First Group \$ 7,804.31		Gross Receipts Se	cond Group	\$	1,951.08			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Se	cond Group	\$	438.99	
	SEVENTH	SUBSCRIBER GRO	UP		EIGHTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	McAles			COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Total DSEs								
Gross Receipts Third G	Group	\$ 35	4,050.77	Gross Receipts Fo	urth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee For	urth Group	\$	0.00	
	\$ 354,050.77 Solution Gross Receipts Fourth Group Base Rate Fee Fourth Group Gross Receipts Fourth Group Base Rate Fee Fourth Group Gross Receipts Fourth Group Base Rate Fee Fourth Group Gross Receipts Fourth Group Base Rate Fee Fourth Group Gross Receipts Fourth Group Gross Fourth Group	0.00 Gross Receipts Fourth Group Base Rate Fee Fourth Group	Gross Receipts Fourth Group Base Rate Fee Fourth Group	urth Group			0.00	

							,	Vyve Broadband A
		ER GROUP	SUBSCRIB	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E
^	JP	SUBSCRIBER GROU	TENTH S		JP	SUBSCRIBER GRO	NINTH	
9 Computation		COMMUNITY/ AREA Cache				OMMUNITY/ AREA Stuart		COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe			0.25	KWTV			1.00	KDOR
and							1.00	KMYT
Syndicated							1.00	KTPX
Exclusivity							1.00	KQCW
Surcharge							1.00	KWHB
for							1.00	KGEB
Partially								
Distant								
Stations								
	0.25			Total DSEs	6.00			Total DSEs
	52,409.62	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
	491.34	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	TWELVTH S		JP	SUBSCRIBER GRO	LEVENTH	E
	0			COMMUNITY/ AREA			Snyder	COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
				-				
								
					<mark></mark>			
			-				<u> </u>	
			-					
			-					
			-		<mark></mark>		·	
					··			
								
			 				 	
			<u> </u>		<u>-</u>		 	
			†		··		<u> </u>	
	0.00		<u> </u>	Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Gross Receipts Fourth	2,398.73	\$ 2	roup	Gross Receipts Third G

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3. PAGE 20. SYSTEM ID#
Name	Vyve Broadband A, LLC	006824
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUS	SIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television market system of the section 76.5 of FCC rules in effect on June 24, 1981:	
Computation of	☐ First 50 major television market	Second 50 major television market
Base Rate Fee	INSTRUCTIONS:	
and Syndicated	Step 1: In line 1, give the total DSEs by subscriber group for comme this schedule.	
Exclusivity Surcharge	Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none ente	
for	Step 3: In line 3, subtract line 2 from line 1. This is the total number of	of DSEs used to compute the surcharge.
Partially Distant Stations	Step 4: Compute the surcharge for each subscriber group using the schedule. In making this computation, use gross receipts figu your actual calculations on this form.	formula outlined in block D, section 3 or 4 of part 7 of this ures applicable to the particular group. You do not need to show
	FIRST SUBSCRIBER GROUP	SECOND SUBSCRIBER GROUP
	THO TOO SOUNDER OR ON	SECOND GODGONIDEN GNOCI
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	·	
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group	this subscriber group
	subject to the surcharge computation	subject to the surcharge computation
	· ———	
	SYNDICATED EXCLUSIVITY SURCHARGE	SYNDICATED EXCLUSIVITY SURCHARGE
	First Group	Second Group
	THIRD SUBSCRIBER GROUP	FOURTH SUBSCRIBER GROUP
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs
	Line 2: Enter the Exempt DSEs	Line 2: Enter the Exempt DSEs
	Line 3: Subtract line 2 from line 1 and enter here. This is the	Line 3: Subtract line 2 from line 1 and enter here. This is the
	total number of DSEs for	total number of DSEs for
	this subscriber group subject to the surcharge	this subscriber group subject to the surcharge
	computation	computation
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY
	SURCHARGE	SURCHARGE
	Third Group	Fourth Group
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ein the boxes above. Enter here and in block 4, line 2 of space L (page	