### THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

# SA1-2 Short Form

## STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are at the end of this form [pages (i)-(vii)].

FOR COPYRIGHT OFFICE USE ONLY					
DATE RECEIVED	AMOUNT				
3/30/22	\$ ALLOCATION NUMBER				

Return to:
Library of Congress
Copyright Office
Licensing Division
101 Independence Ave. SE
Washington, DC 20557-6400
(202) 707-8150

For courier deliveries, see page ii of the general instructions

Α	AC	COUNTING PERIOD COVERE	D BY THIS STATEMENT:							
Accounting Period		January 1-June 30, 202	1							
Bowner	rate	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.  The check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	LE	EGAL NAME OF OWNER/MAILING ADD Vyve Broadband A, LLC	DRESS OF CABLE SYSTEM							
					2021/1					
		4 International Dr Suite 330 Rye Brook, NY 10573								
С				ntify the business and operation of the systeme system, if different from the address given						
System	1	IDENTIFICATION OF CABLE SYSTEM:								
		MAILING ADDRESS OF CABLE SYSTEM	:							
	2	(Number, street, rural route, apartment, or suite no	umber)							
		(City, town, state, zip code)								
Area Served	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entitiy (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.  Note: Entities and properties such as hotels, apartments, condiminiums, or mobile home parks should be reported in paratheses below the identified city.									
		CITY OR TOWN	STATE	CITY OR TOWN	STATE					
First Community	EU	Idora	AR							

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

Form SA1-2c Rev 04/2011

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Vyve Broadband A, LLC

# 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.

BLOCK 1				BLOCK	( 2	
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE		CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:						
<ul> <li>Service to first set</li> </ul>	129	18.90				
<ul> <li>Service to additional set(s)</li> </ul>						
<ul> <li>FM radio (if separate rate)</li> </ul>						
Motel, hotel						
Commercial		18.90				
Converter						
<ul> <li>Residential</li> </ul>			1			
Non-residential			1   "			
		•	4   100			

# 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 1					
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RA		
Continuing Services:		Installation: Non-residential				
• Pay cable	19.95	Motel, hotel				
• Pay cable—add'l channel		Commercial				
<ul> <li>Fire protection</li> </ul>		• Pay cable				
•Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>				
Installation: Residential		Fire protection				
• First set	64.95	Burglar protection				
<ul> <li>Additional set(s)</li> </ul>		Other services:				
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect	39.95			
Converter		Disconnect				
		Outlet relocation	20.00			
		Move to new address	39.95			

Nome	LEGAL N	IAME OF OWNER OF	CABLE SYSTEM:	SYSTEM ID	#			
Name	Vyve E	Broadband A, Ll	_C					
	PRIMARY TRANSMITTERS: TELEVISION				=			
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.							
	1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	6. LOCATION OF STATION				
	KASN-CW Pine Bluff	NUMBER 8	STATION	Pine Bluff, AR	_			
	KTVE-NBC Monroe, LA	10	N N	Monroe, LA				
	KTHV-CBS Little Rock	11	N	Little Rock, AR				
	KARD-FOX Monroe, LA	16		Monroe, LA				
	KATV - ABC	7	N	Little Rock, AR				
			1.7					

LEGAL NAME OF	FOWNER OF (	CABLE SY	YSTFM·					SYSTEM ID#	Name
Vyve Broadk			. • . =					OTOTEW ID#	Name
Tyve Broads	Jana A, EE								
PRIMARY TRA									
	•		rried on a separate and discr						Н
all-band basis w	vhose signals	were "ge	enerally receivable" by your ca	ab	ole system during	g the accounti	ng perio	d.	
Special Instruc	ctions Conce	rnina All	-Band FM Carriage: Under (	Cd	opyright Office re	egulations an	FM sign	al is generally	Primary
-		_	tem whenever it is received a			-	_	-	Transmitters:
` '	•	-	ved at the headend, with the		•	•	•	•	Radio
	•		Copyright Office regulations	-	•				
			each station carried.	٠.	роли, осо	page (r) or an	90		
	•	•	n is AM or FM.						
			nal was electronically process	se	d by the cable s	vstem as a se	parate a	ind discrete	
		_	mark in the "S/D" column.			,	•		
-			on (the community to which the	he	station is licens	ed by the FC0	C or, in t	he case of	
			the community with which the			-	,		
			•			,			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
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Name	LEGAL NAME OF OWNER OF		ТЕМ:					SYSTEM ID#
Name	Vyve Broadband A, LL	С						
Substitute Carriage: Special Statement and Program Log	SUBSTITUTE CARRIAGE In General: In space I, identi substitute basis during the ac explanation of the programm  1. SPECIAL STATEMENT • During the accounting peri broadcast by a distant stat	ify every not ecounting pe ing that must CONCER iod, did you tion?	nnetwork televis eriod, under spe st be included in NING SUBST r cable system	ion program broadcast by cific present and former FC this log, see page (v) of the ITUTE CARRIAGE carry, on a substitute bas	a distant station of rules, regules and instance general instance is, any nonne	lations, or aut tructions. twork televisi	norizations. For program	or a further
	Note: If your answer is "No" log in block 2.  2. LOG OF SUBSTITUTE In General: List each subst	PROGRA	MS	·				
	clear. If you need more space Column 1: Give the title of period, was broadcast by a sunder certain FCC rules, reg Do not use general categori "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the call of Column 4: Give the broad the case of Mexican or Canac Column 5: Give the mon first. Example: for May 7 give Column 6: State the time to the nearest five minutes.	ce, please a of every nor distant static gulations, of es like "more Bulls." In was broad sign of the static adian static adian static atth and day be "5/7."	attach additional nnetwork televition and that your authorizations vies" or "basked deast live, enter station broadcaton's location (thous, if any, the county when your system substitute programmers.	al pages. sion program (substitute pur cable system substitute s. See page (v) of the gen sball." List specific program "Yes." Otherwise enter "I sting the substitute progra e community to which the community with which the em carried the substitute gram was carried by your	program) that, and for the program titles, for extending the station is licented station is ider program. Use cable system	during the a gramming of a ns for further ample, "I Lowensed by the ntified).  I have numerals, we numerals, we have the time	ccounting another static information. The Lucy or FCC or, in with the montes accurately	h
	stated as "6:00–6:30 p.m."  Column 7: Enter the lette to delete under FCC rules a gram was substituted for proeffect on October 19, 1976.	nd regulation	ons in effect du	ring the accounting period	l; enter the let	ter "P" if the	listed pro	
	S	UBSTITUT	E PROGRAM			JBSTITUTE OCCURRE		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. T FROM –	IMES - TO	FOR DELETION
		 			-			
					-	_	== <mark></mark>	
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LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Vyve Broadband A, LLC		Name
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the to all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission so (as identifed in space E) during the accounting period. For a further explanation of how to compute this amount, page (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s)	ervice see	<b>K</b> Gross Receipts
during the accounting period	22,870.18 t of gross receipts)	
COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe:  • Complete block 1, block 2, or block 3.  • Use block 1 if the amount of gross receipts in space K is \$137,100 or less  • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800  • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600  See page (vi) of the general instructions for more information.		Copyright Royalty Fee
BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-maccounting period is \$52.00	onth	
Line 1. Royalty fee for accounting period	52.00	
Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	52.00	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)		
1. Base amount under statutory formula		
2. Enter amount of gross receipts from space K		
3. Subtract line 2 from line 1		
4. Enter the amount of gross receipts from space K		
5. Enter the amount from line 3		
6. Subtract line 5 from line 4		
7. Multiply line 6 by .005 (enter figure here)		
8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)		
Enter the amount of gross receipts from space K		
2. Base amount under statutory formula		
3. Subtract line 2 from line 1		
4. Multiply line 3 by .01		
5. Royalty due on the first \$263,800 of gross recepits (under statutory formula)	00_	
6. Interest charge. Enter the amount from line 4, space Q, page 8	00_	
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
<b>IMPORTANT</b> : Your remittance must be in the form of an <i>electronic payment</i> payable to <i>Register of Copyrights</i> . See page I of the general instructions for more information.		

ACCOUNTING PERIOD: 2021/1
FORM SA1-2. PAGE 7.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Vyve Broadband A, LLC	
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast sto its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	stations
Channels	Enter the total number of channels on which the cable     system carried television broadcast stations	5
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	88
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom we can write or call about this statement of account.)	
for Further Information	Name Marie Censoplano Telephone	914-235-8313
	Address 4 International Dr Suite 330	
	(Number, street, rural route, apartment, or suite number)  Rye Brook, NY 10573	
	(City, town, state, zip)	
	Email (optional) marie.censoplano@vyvebb.com Fax (optional) 914-234-8363	3
•	<b>CERTIFICATION</b> (This statement of account must be certifed and signed in accordance with Copyright Offce regul as explained in the general instructions.)	ations,
O 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 identifed in line 1 of space	e B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or	e 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 of in line 1 of space B.	wner of the cable system
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contain 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)]	ned herein
	Handwritten signature: /s/ Daniel J White	
	Typed or printed name: <b>Daniel J White</b>	
	Title: SVP Financial Planning  (Title of official position held in corporation or partnership)	
	Date: 8/27/2021	

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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
Vyve Broadband A, LLC	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions.	Concerning Gross Receipts
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?	Exclusion
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.  For an explanation of interest assessment, see page (viii) of the general instructions.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,	
space L, (page 7)	
(interest charge)  * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner	
Address	
ID number	
ID number First community served	
Accounting period	

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