## 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				
02/28/22	\$ ALLOCATION NUMBER				

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	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT:					
Accounting	July 1-December 31, 2021						
Period							
Bowner	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.  X Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.						
	LEGAL NAME OF OWNER/MAILING ADD	RESS OF CABLE SYSTEM					
	Vyve Broadband A, LLC						
	,						
				2021/2			
	4 International Dr Suite 330						
	Rye Brook, NY 10573						
С	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.						
System	7	e z, give the maining address of the	system, ii different from the address given in	зрасе Б.			
System	1 DENTIFICATION OF CABLE SYSTEM:						
	MAILING ADDRESS OF CABLE SYSTEM:						
	2 (Number, street, rural route, apartment, or suite nur	mber					
		,					
	(City, town, state, zip code)						
D	•		A "community" is the same as a "community u				
D	·		ling unincorporated communities within uninc	=			
Area	3 3 1	• •	5(dd). The first community that list will serve se it as the first community on all future filings				
Served	•	•	mobile home parks should be reported in par				
	the identified city.						
	CITY OR TOWN	STATE	CITY OR TOWN	STATE			
First Community	Eudora	AR					
Johnnanty							

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 suffciency of the fling, a determination that would be made by a court of law.

Form SA1-2c Rev 04/2011

FORM SA3. PAGE 1b.

	LEGAL NAME OF OWNER OF CABLE SYSTEM:						
Name	Vyve Broadband A, LLC						
	CITY OR TOWN	STATE	CITY OR TOWN	STATE			
<b>D</b>							
<b>D</b>							
(continued)							
Area Served							
33.752							

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Vyve Broadband A, LLC SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES Ε In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information Secondary about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the Transmission last day of the accounting period (June 30 or December 31, as the case may be). Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken Service: Subscribers and down by categories of secondary transmission service. In general, you can compute the number of subscribers in Rates each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)." Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE **SUBSCRIBERS RATE** CATEGORY OF SERVICE **SUBSCRIBERS RATE** Residential: 115 · Service to first set 25.00 · Service to additional set(s) · FM radio (if separate rate) Motel, hotel Commercial 45.80 Converter Residential Non-residential SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were F not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services Services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the Other Than amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Secondary Transmissions: Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Rates Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE Continuing Services: Installation: Non-residential Pay cable 19.95 · Motel, hotel • Pay cable—add'l channel Commercial Pay cable · Fire protection Burglar protection · Pay cable-add'l channel Installation: Residential · Fire protection 64.95 First set · Burglar protection · Additional set(s) Other services: • FM radio (if separate rate) Reconnect 39.95 Converter Disconnect Outlet relocation 20.00

Move to new address

39.95

	LEGAL N	IAME OF OWNER O	F CABLE SYSTEM:	SYSTE	M ID#
Name	Vyve E	Broadband A, L	LC		
	PRIMARY TRANSMITTERS: TELEVISION	-			
G Primary Transmitters: Television	basis under specifc FCC rules, regulations • Do not list the station here in space G—b station v • List the station here, and also in space I, basis. F Column Column This may be different from the channel on associated with a station according to its o the same on the form.  Column educational station, by entering the letter " (for independent multicast), "E" (for noncol For the meaning of these terms, see page	arried only on a part-time basis under certain network programs [sections b])]; and (2) certain stations carried on a any distant stations carried by your cable system on a substitute patement and Program Log)—if the abstitute basis and also on some other stitute basis stations, see page (v) of the general instructions, or treport origination program services such as HBO, ESPN, etc. on which the station's broadcasts are carried in its own community station. Identify each multicast stream expert multicast stream "WETA-2" as a station is a network station, an independent station, or a noncommulticast), "I" (for independent), "I-M" inconcommercial educational multicast).	r. nmercial		
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	6. LOCATION OF STATION	
	KTVE-NBC	10	N	Monroe, LA	
	KARD-FOX	16	I	Monroe, LA	
	WMAO-PBS	2	Е	Grenwood, MS	
	KATV - ABC	7	N	Little Rock AR	
	KTHV-CBS	11	N	Little Rock AR	

FORM SA1-2. F									
LEGAL NAME OF			YSTEM:					SYSTEM ID#	Name
Vyve Broadl	band A, LL0	C							
PRIMARY TRA	NSMITTERS:	RADIO							
			rried on a separate and discr						Н
all-band basis w	vhose signals	were "ge	nerally receivable" by your ca	ab	le system during	g the accountir	ng perio	d.	
Special Instruc	ctions Conce	rning All	-Band FM Carriage: Under (	Co	opyright Office re	egulations, an	FM sign	al is generally	Primary
			tem whenever it is received a						Transmitters:
on the basis of	monitoring, to	be recei	ved at the headend, with the	sy	ystem's FM ante	nna, during ce	ertain sta	ated intervals.	Radio
For detailed info	ormation abou	t the the	Copyright Office regulations	or	n this point, see	page (v) of the	e genera	I instructions.	
			each station carried.						
			n is AM or FM.				4		
			nal was electronically process a mark in the "S/D" column.	se	d by the cable sy	ystem as a sep	parate a	na discrete	
			on (the community to which the	ne	station is licens	ed by the FCC	or in t	he case of	
			the community with which the				) OI, III I	10 0000 01	
			•			,			
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	Vyve Broadband A, LL		EM:					SYSTEM ID:
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	IT AND PROGRAM LOG	i			
Substitute	In General: In space I, identif substitute basis during the ac explanation of the programmi	counting pe	riod, under spe	cific present and former FCC	C rules, regula	itions, or a		
Carriage:	1. SPECIAL STATEMENT							
Special Statement and Program Log	<ul> <li>During the accounting peri broadcast by a distant stat</li> </ul>	ion?	-	•	-		Yes	XNo
	Note: If your answer is "No"	, leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	ıst comple	te the program	
	log in block 2.  2. LOG OF SUBSTITUTE	PROGRA	MS					
	In General: List each substiclear. If you need more space Column 1: Give the title operiod, was broadcast by a cunder certain FCC rules, reg Do not use general categori "NBA Basketball: 76ers vs. I Column 2: If the program Column 3: Give the call secolumn 4: Give the broad the case of Mexican or Canac Column 5: Give the monifirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00—6:30 p.m."	itute progra ce, please a of every nor distant stati gulations, o es like "mor Bulls."  I was broad sign of the s dcast statio adian statio th and day e "5/7." s when the Example: a er "R" if the nd regulatio	m on a separa attach additional network televion and that your authorizations vies" or "baske deast live, enter attach broadca on's location (thins, if any, the owhen your system substitute program carried listed program ons in effect du	al pages. sion program (substitute paur cable system substitute paur cable system substitute paur cable system substitute paur cable. See page (v) of the genetall." List specific program "Yes." Otherwise enter "Nating the substitute program are community to which the sommunity with which the seem carried the substitute pagram was carried by your carried by a system from 6:01:1 was substituted for programing the accounting period;	rogram) that, a for the program instruction it titles, for exitor.  o."  m. station is lice station is iden brogram. Use table system. 5 p.m. to 6:2  mming that y enter the let	during the ramming ons for furth ample, "I L nsed by th tiffied). numerals List the till 8:30 p.m. our system ter "P" if the	e accounting of another stationer information. Love Lucy" or the FCC or, in with the month mes accurately should be un was required the listed pro	n
					WHI	EN SUBS	TITUTE	
	S	UBSTITUT	E PROGRAM				GE OCCURRED 7. F	
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM	. TIMES — TO	FOR DELETION
		162 01 140	CALL SIGN	4. STATION'S LOCATION	AND DAT	TROW	_ 10	
	·							
							_	
							_	
							_	
							_	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
Vyve Broadband A, LLC	<u> </u>	Name
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this spage (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  IMPORTANT: You must complete a statement in space P concerning gross receipts.	nission service	K Gross Receipts
COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe:  • Complete block 1, block 2, or block 3.  • Use block 1 if the amount of gross receipts in space K is \$137,100 or less  • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$  • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions for more information.	263,800	L Copyright Royalty Fee
BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t accounting period is \$52.00	nis six-month	
Line 1. Royalty fee for accounting period	\$ 52.00	
Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	. \$ 52.00	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	•
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)	
1. Enter the amount of gross receipts from space K		
2. Base amount under statutory formula		
3. Subtract line 2 from line 1		
4. Multiply line 3 by .01	4.040.00	
5. Royalty due on the first \$263,800 of gross recepits (under statutory formula)	1,319.00	
6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
IMPORTANT: Your remittance must be in the form of an <i>electronic payment</i> payable to <i>Register of Copyrights</i> . See page general instructions for more information.	ge I of the	

<b>.</b>	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Vyve Broadband A, LLC	
	OUANIELO.	
R.A	CHANNELS	
M	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast s	tations
Channels	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	3
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	87
	and nonbroadcast services	OI .
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 Telephone	914-235-8313
Information		
	Address 4 International Dr Suite 330	
	(Number, street, rural route, apartment, or suite number)	
	Rye Brook, NY 10573	
	(City, town, state, zip)	
	Fuel/antimeth annual and Consider annual and Consider and	
	Email (optional) marie.censoplano@vyvebb.com Fax (optional) 914-234-8363	3
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regula	tions,
0	as explained in the general instructions.)	
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	B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable	system as identified
	in line 1 of space B and that the owner is not a corporation or partnership; or	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as ow	ner of the cable system
	in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contains	ed 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/ $oldsymbol{\mathcal{D}aniel}$ $oldsymbol{\mathcal{J}}$ $oldsymbol{White}$	
	Typed or printed name: <b>Daniel J White</b>	
	Title: SVP Financial Planning	
	(Title of official position held in corporation or partnership)	
	Date: 02/26/2022	

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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 Concerning
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?  X	Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Name 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	
x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L, (page 7)	
(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number First community served Accounting period	

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