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.

DATE RECEIVED

02/28/23

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

\$

AMOUNT

ALLOCATION NUMBER

SA1-2 Short Form

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 ACCOUNTING PERIOD COVERED BY THIS STATEMENT: July 1-December 31, 2022 Accounting Period Instructions: Your file has been established under the information given below. If there are any changes, draw a line through the В incorrect information and print or type the correct information beside it. Owner 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. 002428 Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Vyve Broadband J, LLC *00242820222* 002428 2022/2 Four International Drive, Suite 330 Rye Brook, NY 10573 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these С names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: System 1 MAILING ADDRESS OF CABLE SYSTEM: 2504 Westwood Rd 2 (Number, street, rural route, apartment, or suite number) Westlake, LA 70669 Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entitiy (including unincorporated commuinites within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Area Served Note: Entities and properties such as hotels, apartments, condiminiums, or mobile home parks should be reported in paratheses below the identified city. CITY OR TOWN STATE CITY OR TOWN STATE Kinder LA First Community Allen Parish LA LA Elton Oberlin LA Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

Form SA1-2c Rev 04/2011

PRIVATELY REPRODUCED NON-GOVERNMENT FORM (TBMJ123)

									SA3. PAGE 2
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:						SYS	STEM ID#
	Vyve Broadband J, LLC								002428
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the misseparately for the particular serv Rate: Give the standard rate c unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block systems most commonly provide that applies to your system. Note categories, that person or entity subscriber who pays extra for ca	pace E should on of television ay cable) in sp (June 30 or Do blocks in space y transmission umber of billing ice at the rate i harged for eacl (Example: "\$2 ounts allowed in space E, the to their subsci e: Where an in- should be cour- ble service to a	cover a and rad ace F, ecember ce E ca service s in tha ndicate h categ 20/mth" for adva e form I ribers. (dividua nted as addition	all categories of dio broadcasts b not here. All the er 31, as the cas Il for the numbe . In general, you at category (the ed—not the num ory of service. I). Summarize an ance payment. ists the categor Give the numbe I or organizatior a subscriber in nal sets would be	secondary by your system facts you se may be ar of subsc u can com number of aber of sets nclude bot ny standar ies of seco r of subsc n is receivin each appli e included	stem to subscrit state must be t). ribers to the cat pute the numbe persons or org s receiving serv th the amount o d rate variations ondary transmis ribers and rate t ng service that icable category.	bers. Giv hose ex ole syste r of sub anizatio ice). f the cha s within sion ser for each falls unc Examp	ve information isting on the em, broken scribers in ns charged arge and the a particular rate vice that cable listed category ler different vie: a residential	
	first set" and would be counted o Block 2: If your cable system I					service that are	differer	nt from those	
	printed in block 1 (for example, ti with the number of subscribers a sufficient.	iers of services	that in	clude one or mo	ore second	lary transmissio	ns), list	them, together	
		OCK 1					BLC	OCK 2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATI	EGORY OF SE		NO. OF SUBSCRIBERS	RATE
	Residential:	SUBSCRIDI	EKS	RAIE	CAT	EGURT OF SE	RVICE	SUBSCRIBERS	RATE
	Service to first set		150	25.00					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel Commercial		22	65.00					
	Converter		33	65.99					
	Residential								
	Non-residential								
F Services Other Than Secondary Transmissions: Rates	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.								
		BLO				DATE	CAT	BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE	-	GORY OF SER ation: Non-res	-	RATE	CAT	EGORY OF SERVICE	RATE
	• Pay cable	19.95	• Mo	otel, hotel		T&M			
	• Pay cable—add'l channel	15.95		ommercial		T&M			
	Fire protection	N/A		y cable		T&M			
	•Burglar protection Installation: Residential	N/A		y cable-add'l ch e protection	lannel	T&M N/A			
	First set	59.99		rglar protection		N/A N/A			
	Additional set(s)	19.99		services:					
	• FM radio (if separate rate)	N/A		connect		29.99			
	• Converter		• Dis	sconnect					

LEGAL NAME OF OWNE	R OF CABLE SYSTE	M:	SY	STEM ID#
Vyve Broadband J	I, LLC			002428
PRIMARY TRANSMITTERS:	TELEVISION			
carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Statis basis under specifc FCC ru • Do not list the station here, station was carried only • List the station here, and basis. For further inform Column 1: List each stat Column 2: Give the nut This may be different from associated with a station a the same on the form. Column 3: Indicate in e educational station, by entu (for independent multicast) For the meaning of these to Column 4: Give the loce	ern during the accou in effect on June 24 (e)(2) and (4), or 76. as explained in the r ons: With respect to ules, regulations, or e in space G—but of on a substitute bas also in space I, if th nation concerning su ation's call sign. Do mber of the channel the channel on whic ccording to its over- each case whether the ering the letter "N" (for , "E" (for noncomme erms, see page (iv) ation of each station	nting period, exce 1, 1981, permitting 63 (referring to 76, next paragraph. 5 any distant station authorizations: 10 list it in space I (is. e station was carri- ubstitute basis station on which the station on which the station ich your cab; e syste- thje-air designation he station is a network for network), "N-M" ercial educational), of the general inst- n. For U.S. stations	ot (1) stations carried only on a part-time basis under the carriage of certain network programs [sections 61(e)(2) and (4))]; and (2) certain stations carried on a ns carried by your cable system on a substitute program the Special Statement and Program Log)—if the ed both on a substitute basis and also on some other ons, see page (v) of the general instructions. on program services such as HBO, ESPN, etc. on's broadcasts are carried in its own community. em carried the station. Identify each multicast stream n. For example, report multicast stream "WETA-2" as work station, an independent station, or a noncommercial ' (for network multicast), "I" (for independent), "I-M" or "E-M" (for noncommercial educational multicast). ructions. s, list the community to which the station is licensed by the	3
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	6. LOCATION OF STATION	
KLTL-HD 18 (PBS) Lake	18	Е	Lake Charles	
KLTL-PBS Create	18.3	E-M	Lake Charles	
KLTL-PBS Kids	18.4	E-M	Lake Charles	
KPLC 7 HD (NBC) Lake Cha	7	N	Lake Charles	
KPLC-Bounce 7.3 Lake Cha	7.3	I-M	Lake Charles	
KPLC-CW 7.2 Lake Charles	7.2	I-M	Lake Charles	
KPLC-GritTV 7.4 Lake Cha	7.4	I-M	Lake Charles	
KSWL-CBS 17 Lake Charle	17	N	Lake Charles	
KVHP (FOX) Lake Charles	29	I-M	Lake Charles	
KVHP (ABC) Lake Charles	29.2	N-M	Lake Charles	
KWWE-MyNetwork	19	I-M	Lake Charles	
	PRIMARY TRANSMITTERS: In General: In space G, id carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stati basis under specifc FCC rules • Do not list the station here, and basis. For further inform Column 1: List each station at the same on the form. Column 2: Give the nu This may be different from associated with a station at the same on the form. Column 3: Indicate in e educational station, by ent (for independent multicast) For the meaning of these t Column 4: Give the loc FCC. For Mexican or Cana 1. CALL SIGN KLTL-PBS Create KLTL-PBS Kids KPLC 7 HD (NBC) Lake Charles KPLC-GritTV 7.4 Lake Charles KVHP (FOX) Lake Charles KVHP (ABC) Lake Charles	carried by your cable system during the accour FCC rules and regulations in effect on June 24 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76. substitute program basis, as explained in the r Substitute Basis Stations: With respect to basis under specifc FCC rules, regulations, or • Do not list the station here in space G—but of station was carried only on a substitute base • List the station here, and also in space I, if th basis. For further information concerning st Column 1: List each station's call sign. Do Column 2: Give the number of the channel This may be different from the channel on whit associated with a station according to its over- the same on the form. Column 3: Indicate in each case whether the ducational station, by entering the letter "N" (if (for independent multicast), "E" (for noncomme For the meaning of these terms, see page (iv) Column 4: Give the location of each station FCC. For Mexican or Canadian stations, if any 1. CALL 2. B'CAST CHANNEL NUMBER KLTL-HD 18 (PBS) Lake 18.3 KLTL-PBS Kids 18.4 KPLC 7 HD (NBC) Lake Cha 7 KPLC-Bounce 7.3 Lake Cha 7 KPLC-Bounce 7.3 Lake Cha 7 KPLC-GritTV 7.4 Lake Cha 7 KPLC-GritTV 7.4 Lake Cha 7 KVHP (FOX) Lake Charles 29 KVHP (ABC) Lake Charles 29 KVHP (ABC) Lake Charles 29.2	PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including carried by your cable system during the accounting period, exception of the system during the system during the accounting period, exception of the system during the system during the account of the system system system system system system associated with a station here in space G—but do list it in space I (station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried only on a substitute basis station column 1: List each station's call sign. Do not report origination of the station according to its over-thie-air designation the same on the form. • Column 2: Give the number of the channel on which your cable system associated with a station according to its over-thie-air designation the same on the form. • Column 3: Indicate in each case whether the station is a network of the same on the form. • Column 4: Give the location of each station. For U.S. stations FCC. For Mexican or Canadian stations, if any, give the name of the station. 1. CALL 2. B'CAST 3. TYPE SIGN 1. CALL 2. B'CAST 0. F SIGN <t< td=""><td>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 carcinge of certain network programs [sections] 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))]: and (2) certain stations carried on a 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 in space G—but do list it in space I (the Special Statement and Program Log). Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Column 2: Give the number of the channel on which your cable system carried the station. Identify each multicast stream associated with a station according to its over-thje-air designation. For example, report multicast, Taream "WETA-2" as the same on the form. Column 3: Indicate in each case whether the station is a network station, an independent station is licensed by the FC rearest messes each or of cho chance material instructions. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FC retwork multicast). T⁻¹ (for independent). ⁻¹-M" (for independent mu</td></t<>	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 carcinge of certain network programs [sections] 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))]: and (2) certain stations carried on a 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 in space G—but do list it in space I (the Special Statement and Program Log). 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ACCOUNTING PERIOD: 2022/2

EGAL NAME OI Y yve Broadl	PAGE 4. FOWNER OF (band J, LL(YSTEM:					SYSTEM ID# 002428	Name
PRIMARY TRANSMITTERS: RADIO 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. Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally							H Primary Transmitters:		
n the basis of or detailed info Column 1: lo Column 2: S Column 3: lf gnal, indicate Column 4: G	monitoring, to prmation abou dentify the call tate whether t the radio stati this by placing Sive the statior	be receivent the the the sign of e he station ion's sign a check n's location	tem whenever it is received a ved at the headend, with the Copyright Office regulations each station carried. In is AM or FM. hal was electronically process mark in the "S/D" column. on (the community to which the the community with which the	sy or se	ystem's FM anter in this point, see p ind by the cable sy a station is licens	nna, during ce page (v) of the ystem as a se ed by the FCC	ertain sta e genera parate a	ted intervals. I instructions. nd discrete	Radio
0.411 01-11				1		A			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	╞	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	·								
				1					
				1					
]					
				1					

FORM SA1-2. PAGE 5.

Name	LEGAL NAME OF OWNER OF Vyve Broadband J, LL		TEM:						SYSTEM ID# 002428			
l	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify <i>every nonnetwork television program</i> broadcast by a distant station that your cable system c substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For explanation of the programming that must be included in this log, see page (v) of the general instructions.											
Substitute Carriage: Special Statement and Program Log	 SPECIAL STATEMENT During the accounting per broadcast by a distant stat Note: If your answer is "No log in block 2. LOG OF SUBSTITUTE In General: List each substitute 	CONCEF iod, did you tion? ", leave the PROGRA	RNING SUBS ur cable syster e rest of this pa AMS am on a separ	TITUTE CARRIAGE n carry, on a substitute l ge blank. If your answer ate line. Use abbreviatic	bas r is	is, any non "Yes," you	network tele must comple	Yes ete the progr	⊠No am			
	Column 1: Give the title period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the prograr Column 3: Give the call Column 4: Give the broad	 clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in 										
	the case of Mexican or Can Column 5: Give the mor first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the lett to delete under FCC rules a gram was substituted for pr effect on October 19, 1976.	oth and day /e "5/7." es when th Example: a er "R" if the and regulations ogramming	when your sy e substitute pr a program carr e listed program ions in effect d	stem carried the substitu ogram was carried by yo ried by a system from 6: n was substituted for pro uring the accounting pe	ute our 01: ogra	program. U cable syste 15 p.m. to 6 amming tha t; enter the	se numerals m. List the t 5:28:30 p.m. t your system letter "P" if th	mes accura should be n was requir ne listed pro	tely red			
	SI		E PROGRAM	1			EN SUBSTI IAGE OCCI 6. T		7. REASON FOR DELETION			
		Yes or No	CALL SIGN			AND DAY	FROM					

FORM SA1-2. F	AGE 6.		
	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 002428	Name
	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the tota all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission serv (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	/ice	K Gross Receipts
Instructions:	ROYALTY FEE 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 \$137,100 but less than or equal to \$263,800 Is block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 f the general instructions for more information.		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 this six-mo accounting period is \$52.00	ni	
	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		
	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		
	5. Royalty due on the first \$263,800 of gross recepits (under statutory formula) \$ 1,319.0	00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8 0.0	00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	67.00	
	EFT Trace # or TRANSACTION ID # Not Av	vailable	
	See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more in	formation.	

		FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 002428
М	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast st to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	ations
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	11
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	148
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		14-234-8313
	Address Four International Drive, Suite 330 (Number, street, rural route, apartment, or suite number) Rye Brook, NY 10573 (One there are not	
	(City, town, state, zip) Email (optional) Fax (optional)	
ο	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regula as explained in the general instructions.)	tions,
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 sy in line 1 of space B and that the owner is not a corporation or partnership; or	ystem as identified
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as own in line 1 of space B.	er of the cable system
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained 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)] 	herein
	Handwritten signature: /s/ Daniel J. White	
	Typed or printed name: Daniel J. White	
	Title: SVP - Financial Planning (Title of official position held in corporation or partnership)	
	Date:2/28/2023	

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

FORM	I SA1-2.	PAGE	8.
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LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM II	Namo
Vyve Broadband J, LLC 00242	8 Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
xdays	
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	
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) reque	sted on th

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.