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.

02/28/23

DATE RECEIVED

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

				instructions		
Α			·			
Accounting Period	July 1-December 31, 20					
B Owner	rate title of the subsidiary, not that of the par List any other name or names under wh If there were different owners during th a single statement of account and royalty fe	arrect information beside it. the cable system. If the owner is a sub- ent corporation. nich the owner conducts the business of <i>e accounting period, only the owner on</i> <i>the payment covering the entire accountil</i>	sidiary of another corporation, give the f the cable system. <i>the last day of the accounting period sh</i>	ull corpo-		
	LEGAL NAME OF OWNER/MAILING AD	DRESS OF CABLE SYSTEM				
	Vyve Broadband J, LLC					
				*02874620222 ³		
				028746 2022/2		
	Four International Drive, S Rye Brook, NY 10573	uite 330				
С	INSTRUCTIONS: In line 1, give any bu names already appear in space B. In lir					
System	IDENTIFICATION OF CABLE SYSTEM:					
	MAILING ADDRESS OF CABLE SYSTEM: 5804B FM 51 South 2 (Number, street, rural route, apartment, or suite nu Decatur TX 76234 (City, town, state, zip code)					
_	Instructions: List each separate comm	nunity served by the cable system.	A "community" is the same as a "co	ommunity unit" as defined		
D 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	Decatur Bridgeport	TX TX				
community	Chico	TX				
	Alvord	ТХ				
	Runaway Bay	TX				
	Lake Bridgeport	ТХ	-			
form in order to pro numbers. By provic search reports prep	E: Section 111 of title 17 of the United States Code cess your statement of account. PII is any personal ting PII, you are agreeing to the routine use of it to e bared for the public. The effects of not providing the of statements of account, and it may affect the legal	authorizes the Copyright Offce to collect the I information that can be used to identify or tr establish and maintain a public record, which PII requested is that it may delay processing	ace an individual, such as name, address an includes appearing in the Offce's public inde g of your statement of account and its placem	d telephone exes and in		

Form SA1-2c Rev 04/2011

PRIVATELY REPRODUCED NON-GOVERNMENT FORM (TBMJ123)

									SA3. PAGE 2
Name	LEGAL NAME OF OWNER OF C								TEM ID#
	Vyve Broadband J, LLC								020/40
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmissic about other services (including p last day of the accounting period Number of Subscribers: Bott down by categories of secondary each category by counting the m separately 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. Not 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 / 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	cover a and rad ace F, ecembe ce E ca service s in tha ndicate h categ 20/mth" for adva e form I ribers. (dividua nted as	all categories of the broadcasts to not here. All the er 31, as the case of the numbe . In general, you at category (the d—not the num ory of service. In . Summarize are ance payment. ists the categori Give the numbe or organization a subscriber in	secondary by your sys facts you se may be r of subsci u can comp number of ber of sets nclude bot ny standar res of secco r of subsci i s receivin each appli	stem to subscrib state must be th). ribers to the cab pute the numbe persons or org. s receiving servi th the amount or d rate variations ondary transmis- ribers and rate fing service that find icable category.	bers. Give i nose existin ole system, r of subscr anizations ce). f the charg s within a p sion servic for each list falls under Example:	nformation ng on the broken bers in charged e and the articular rate e that cable red category different a residential	
	first set" and would be counted o Block 2: If your cable system I printed in block 1 (for example, ti	nce again und has rate catego	er "Serv ories for	vice to additiona secondary tran	Il set(s)." Ismission :	service that are	different fr	om those	
	with the number of subscribers a sufficient.	nd rates, in the					on of the s	ervice is	
	BLOCK 1						BLOC	K 2 NO. OF	r
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RATE
	Residential:								
	Service to first set		185	25.00					
	Service to additional set(s)								
	• FM radio (if separate rate)		0 <i>E</i>	co oo					
	Motel, hotel Commercial		85	68.99					
	Converter								
	Residential								
	Non-residential								
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.								
	CATEGORY OF SERVICE	BLO RATE		GORY OF SER	/ICF	RATE	CATEG	BLOCK 2	RATE
	Continuing Services:			ation: Non-resi			220		
	• Pay cable	19.95	• Mo	itel, hotel		T&M			
	• Pay cable—add'l channel	15.95		mmercial		T&M			
	Fire protection	N/A		y cable		T&M			
	•Burglar protection Installation: Residential	N/A		y cable-add'l ch e protection	annei	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			
	, , ,	[·····	1						
	Converter		• Dis	sconnect					

News	LEGAL NAME OF OWNE	R OF CABLE SYSTE	EM:	SY	STEM ID#			
Name	Vyve Broadband	J, LLC			028746			
	PRIMARY TRANSMITTERS	: TELEVISION						
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 station's broadcasts are carried in its own community. This may be different from the channel on which the station's broadcasts are carried in its own community. This may be different from the channel on which your cab; system carried the station. Identify each multicast stream associated with a station according to its over-thje-air designation. For example, report multicast stream "WETA-2" as the same on the form. Column 3: Indicate in each case whether the station is a 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 (iv) of the general instructions. Column 4: 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							
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	6. LOCATION OF STATION				
	KAZD 55	55	I	DALLAS TX				
	KDAF 33 (CW)	33	I	DALLAS TX				
	KDFI 27 (My Net)	27	I	DALLAS TX				
	KDFW 4 (FOX)	4	I	DALLAS TX				
	KDTN 2 (Daystar)	2	I	DENTON TX				
	KERA 13 (PBS)	13	Е	DALLAS TX				
	KFWD-SonLife 52	52	I	DALLAS TX				
	KPXD 68 (ION)	68	I	DALLAS TX				
	KTVT 11 (CBS)	11	N	DALLAS TX				
	KTVT-Start TV 11.2	11.2	N-M	DALLAS TX				
	KTXA 21-IND	21	l	DALLAS TX				
	KTXD 47 (IND)	47	I	DALLAS TX				
	KPXD 68.2 Bounce	68.2	I-M	DALLAS TX				
		21.2	I-M	Fort Worth, TX				

ACCOUNTING PERIOD: 2022/2

ORM SA1-2. F EGAL NAME O /yve Broadl	F OWNER OF (YSTEM:					SYSTEM ID# 028746	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 receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, 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 (v) 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							H Primary Transmitters Radio		
ignal, indicate Column 4: G	this by placing Give the statior	g a check n's locatio	nal was electronically process c mark in the "S/D" column. on (the community to which the the community with which the	he	station is licens	ed by the FC0			
		0/0		1			0/0		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION		CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	·								
				1					

FORM SA1-2. PAGE 5.

Name	LEGAL NAME OF OWNER OF Vyve Broadband J, LL		TEM:					SYSTEM ID# 028746		
	SUBSTITUTE CARRIAGE	-	-			tion that your or		corriad on a		
Substitute	In General: In space I, identify <i>every nonnetwork television program</i> broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions.									
Carriage: Special Statement and Program Log	1. SPECIAL STATEMENT • During the accounting per broadcast by a distant stat	iod, did you			asis, any non			am XNo		
	Note: If your answer is "No log in block 2.	", leave the	rest of this pa	ge blank. If your answer	is "Yes," you	must complete	e the progra	am		
	 LOG OF SUBSTITUTE In General: List each subsiciliar. If you need more space 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 program Column 3: Give the call Column 4: Give the broat the case of Mexican or Cam Column 5: Give the mor first. Example: for May 7 giv Column 6: State the tim 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. 	titute progra ce, please of every no distant sta gulations, o ies like "mo Bulls." m was broa sign of the adcast stati hadian stati th and day ve "5/7." es when th Example: a er "R" if the and regulati ogramming	am on a separ attach addition ponnetwork tele- tion and that y pr authorization povies" or "bask dcast live, entr station broadc on's location (f ons, if any, the y when your sy e substitute pr a program carri- e listed program ions in effect d	hal pages. vision program (substitute our cable system substitu- ns. See page (v) of the ge etball." List specific progr er "Yes." Otherwise enter sasting the substitute program the community to which the community with which the stem carried the substitute ogram was carried by you ried by a system from 6:00 n was substituted for pro- uring the accounting peri	e program) th uted for the p eneral instruc- am titles, for "No." gram. he station is in the station is in the station is in the program. L ur cable syste 1:15 p.m. to gramming that od; enter the	hat, during the rogramming of tions for furthe example, "I Lo icensed by the dentified). Jse numerals, em. List the tim 6:28:30 p.m. s at your system letter "P" if the	accounting another st rinformationer st ve Lucy" of FCC or, ir with the me hould be was require listed pro	ration on. r n onth tely red		
	SI	JBSTITUT	E PROGRAM	l		EN SUBSTITI		7. REASON		
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIN FROM —	1ES TO	FOR DELETION		
					-					
								··		
					-					
								·		
					-					
					-					

FORM	SA1-2	PAGE 6	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
	Vyve Broadband J, LLC	028746	
	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmi (as identified in space E) during the accounting period. For a further explanation of how to compute this ar page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	ssion service	K Gross Receipts
	during the accounting period.	47,190.00	
	IMPORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receipts)	
• • •	mpute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 general instructions for more information.	63,800	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		
	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)		
	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)	1,319.00	
	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		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	\$ 52.00	
540	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 Available	
	See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for	or more information.	

		FORM SA1-2. PAGE 7				
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 028746				
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.					
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	14				
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	142				
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 914-234-8313					
	Address Four International Drive, Suite 330 (Number, street, rural route, apartment, or suite number) Rye Brook, NY 10573					
	(City, town, state, zip) Email (optional) Fax (optional)					
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regular 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	stem 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.					
	 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	SA1-2.	PAGE	8.
------	--------	------	----

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID	Nomo
Vyve Broadband J, LLC 02874	6 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? NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
xLine 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 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) request	ed 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.