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

8/28/23

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: January 1-June 30, 2023 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 single statement of account and royalty fee payment covering the entire accounting period. 014771 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 01477120231 014771 2023/1 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, apart nent. or suite number) Westlake, LA 70669 (City, town, state, zip code) 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 CITY OR TOWN STATE STATE LA Dequincy Westlake LA First Community Bearuegard Parish LA LA Calcasieu Parish Moss Bluff LA LA Old Town Vinton 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)

Name	LEGAL NAME OF OWNER OF C		SYS	O1477						
Name	Vyve Broadband J, LLC									
Е	SECONDARY TRANSMISSION									
C	In General: The information in space E should cover all categories of secondary transmission service of the cable									
Secondary	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									
Secondary Transmission	last day of the accounting period (June 30 or December 31, as the case may be).									
Service: Sub-	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken									
scribers 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 category, but do not include disc	· · ·	,		ny standa	ard rate variation	s within a	particular rate		
	Block 1: In the left-hand block				ies of sec	condarv transmis	sion servi	ce that cable		
	systems most commonly provide	•		•		•				
	that applies to your system. Not	e: Where an ir	ndividual	or organization	n is receiv	ing service that	falls unde	r different		
	categories, that person or entity									
	subscriber who pays extra for ca					d in the count ur	nder "Servi	ce to the		
	first set" and would be counted of Block 2: If your cable system	0			· · ·	service that are	different	from those		
	printed in block 1 (for example, t	-		•						
	with the number of subscribers a									
	sufficient.	,	5							
	BLC	DCK 1	_				BLOCH			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT	
	Residential:	CODOCIND	LIKO	TUTE	0/th		WICE	COBCONDENC	1011	
	Service to first set		786	25.00						
	Service to additional set(s)			_0.00						
	• FM radio (if separate rate)									
	Motel, hotel		42	65.99						
	Commercial		42	65.99						
	Converter									
	Desidential									
	Residential									
	Residential Non-residential									
	Non-residential	ONDARY TRA		SIONS: RATE	s					
						all your cable sys	stem's serv	vices that were		
F	Non-residential SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t	te (not subscri hose services	ber) infoi that are	rmation with re not offered in c	spect to a combination	on with any sec	ondary trar	nsmission		
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Name	LEGAL NAME OF OWNE	R OF CABLE SYSTE	M:	SI				
Humo	Vyve Broadband J	, LLC			01477			
	PRIMARY TRANSMITTERS:	TELEVISION						
G	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							
Ŭ	FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections							
Primary	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.							
Transmitters: Television	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 							
	 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. 							
	-			ried both on a substitute basis and also on some other tions, see page (v) of the general instructions.				
	Column 1: List each st	ation's call sign. Do	not report origina	tion program services such as HBO, ESPN, etc.				
				tion's broadcasts are carried in its own community. tem carried the station. Identify each multicast stream				
	associated with a station a			on. For example, report multicast stream "WETA-2" as				
	the same on the form. Column 3: Indicate in e	each case whether	the station is a ne	twork station, an independent station, or a noncommercial				
				/l" (for network multicast), "I" (for independent), "I-M"), or "E-M" (for noncommercial educational multicast).				
	For the meaning of these t	erms, see page (iv)) of the general ins	structions.				
				ns, list the community to which the station is licensed by th of the community with which the station is identifed.	е			
			y, give the name t					
	1. CALL	2. B'CAST	3. TYPE	6. LOCATION OF STATION				
	SIGN	CHANNEL	OF					
		NUMBER	STATION					
	KLTL 18 (PBS) HD	18	E	Lake Charles, LA				
	KLTL 18.2 PBS Kids	18.2	E-M	Lake Charles, LA				
	KLTL 18.3 PBS Create	18.3	E-M	Lake Charles, LA				
	KPLC - D5 - Dabl	7.5	I-M	Lake Charles, LA				
	KPLC 7 (NBC) Lake Cha	7	N	Lake Charles, LA				
	KPLC 7.2 Bounce Lake	7.3	I-M	Lake Charles, LA				
	KPLC 7.2 CW Lake Charles	7.2	I-M	Lake Charles, LA				
	KPLC 7.4 GritTV Lake Char	7.4	I-M	Lake Charles, LA				
	KSWL (CBS)	17	N	Lake Charles, LA				
	KVHP 18 (FOX) Lake Charl	29	I	Lake Charles, LA				
	KVHP 18.2 (ABC) Lake Cha	29.2	N-M	Lake Charles, LA				
	KVHP 29.3 Circle Lake Cha	29.3	N-M	Lake Charles, LA				
	KWWE-MyNetwork	19	I	Lake Charles, LA				
			•••••					

ACCOUNTING PERIOD: 2023/1

FORM SA1-2. F LEGAL NAME OF Vyve Broadk	OWNER OF		/STEM:				SYSTEM ID# 014771	Name
-								
	t every radio s	tation ca	rried on a separate and discre nerally receivable" by your cal					н
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.							Primary Transmitters: Radio	
Column 1: Id Column 2: S	lentify the call tate whether t	sign of e he statio	each station carried. n is AM or FM.		,	-		
signal, indicate t	this by placing	g a check	al was electronically processe mark in the "S/D" column. on (the community to which the					
Mexican or Can	adian stations	s, if any, t	the community with which the	station is identifie	d).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	·							
	·							
	·							
	·							

FORM SA1-2. PAGE 5.

Name	LEGAL NAME OF OWNER OF Vyve Broadband J, LL		TEM:				2	6YSTEM ID# 014771
								014//1
Substitute	SUBSTITUTE CARRIAGI In General: In space I, identi substitute basis during the ac explanation of the programm	ify every no	nnetwork televi eriod, under spe	<i>sion program</i> broadcast by ecific present and former FC	a distant stati C rules, regu	lations, or autho		
Carriage:		nation of the programming that must be included in this log, see page (v) of the general instructions. PECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE						
Special	• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program							
Statement and Program Log	broadcast by a distant sta	tion?				[Yes	XNo
	Note: If your answer is "No	", leave the	e rest of this pa	age blank. If your answer is	s "Yes," you	must complete	the progr	am
	period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the prograt Column 3: Give the call Column 4: Give the broat the case of Mexican or Car Column 5: Give the more first. Example: for May 7 git 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 pro-	titute progr ace, please of every no distant sta gulations, ' ries like "mo Bulls." m was broa sign of the adcast stat hadian stati nath and day ve "5/7." es when th Example: regulat rogramming	am on a separ attach additio onnetwork tele tion and that y or authorizatio ovies" or "bask adcast live, ent station broadd ion's location (ons, if any, the y when your sy e substitute pr a program car e listed program ions in effect of	nal pages. vision program (substitute our cable system substitut ns. See page (v) of the ge tetball." List specific progra er "Yes." Otherwise enter casting the substitute progra the community to which the ecommunity with which the stem carried the substitute rogram was carried by you ried by a system from 6:01 m was substituted for prog luring the accounting period	program) the ted for the pr neral instruct am titles, for "No." ram. le station is li e station is li e program. U r cable syste 1:15 p.m. to 6 ramming tha od; enter the	at, during the a ogramming of tions for furthe example, "I Lov censed by the lentified). se numerals, v m. List the tim 3:28:30 p.m. sh t your system v letter "P" if the	accounting another st r informative Lucy" of FCC or, in with the me es accurate nould be was require listed pro	ation on. r onth æly ed
	effect on October 19, 1976			·				
						EN SUBSTITU	ITE	
	S	UBSTITUT	E PROGRAM	1				7. REASON
	SI 1. TITLE OF PROGRAM	UBSTITUT 2. LIVE? Yes or No	E PROGRAM 3. STATION'S CALL SIGN	4. STATION'S LOCATION		IAGE OCCUF 6. TIM FROM —	RRED	7. REASON FOR DELETION
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	
		2. LIVE?	3. STATION'S		CARR 5. MONTH	IAGE OCCUF 6. TIM	RRED ES	

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 014771	Name
	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 an 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.	ssion service	K Gross Receipts
	ROYALTY FEE		1
• • •	o 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 \$2 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 the 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	his six-mon	
	Line 1. Royalty fee for accounting period		
	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		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	·	
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K \$ 152,667.00		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K 1	52,667.00	
	5. Enter the amount from line 3	11,133.00	
	6. Subtract line 5 from line 4	41,534.00	
	7. Multiply line 6 by .005 (enter figure here)	\$ 207.67	
	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	\$ 207.67	
	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 \$ 263,800.00		
	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	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	\$ 207.67	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	.\$ 20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$ 227.67	
	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 f	or more information.	

FORM SA1-2. PAGE 6.

	FORM SA1-	
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS Vyve Broadband J, LLC	6TEM ID# 014771
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 13 system carried television broadcast stations 13	
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	
N Individual to Be Contacted		
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)	
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulations, as explained in the general instructions.) 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 owner of the cable system in line 1 of space B.	m
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	Handwritten signature: /s/ Daniel J. White	
	Typed or printed name: Daniel J. White	
	Title: SVP - Financial Planning (Title of official position held in corporation or partnership)	
	Date: 8/25/23	

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYST	EM ID#
Vyve Broadband J, LLC 0	14771 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.	P Special Statement 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? X NO YES. Enter the total here and list the satellite carrier(s) below. \$	Exclusion
Name 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	-
	ays
xd 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)	<u> </u>
* 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 (PI	I) requested 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 Offce's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.