

This form is effective beginning with the July 1 to December 30, 2025, accounting period (2025/2).  
If you are filing for a prior accounting period, contact the Licensing Section for the correct form.

SA1-2E  
Short Form

STATEMENT OF ACCOUNT  
for Secondary Transmissions by  
Cable Systems (Short Form)

General instructions are located  
in the first tab of this workbook.

| FOR COPYRIGHT OFFICE USE ONLY |                   |
|-------------------------------|-------------------|
| DATE RECEIVED                 | AMOUNT            |
| 2/28/2026                     | \$                |
|                               | ALLOCATION NUMBER |
|                               |                   |

Return completed workbook by  
email to

[coplicsoa@copyright.gov](mailto:coplicsoa@copyright.gov)

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contact the U.S. Copyright  
Office Licensing Section at  
(202) 707-8150.

|                   |                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A                 | ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                   | <div>2025/2</div> <div>Period 1 = January 1 - June 30      Period 2 = July 1 - December 31</div> <div></div> <div>Barcode Data Filing Period (optional - see instructions)</div> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Accounting Period |                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| B                 | Owner                                                                                                                                                                            | <b>Instructions:</b><br>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.<br><br>List any other name or names under which the owner conducts the business of the cable system.<br><br>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. |
|                   |                                                                                                                                                                                  | <div><input type="checkbox"/></div> Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Section.                                                                                                                                                                                                                                                                                                                                                                                                             |
|                   |                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                   |                                                                                                                                                                                  | <div>LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM</div> <div>Mega Broadband Investments Holdings LLC</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                   |                                                                                                                                                                                  | <div>BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)</div> <div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                   |                                                                                                                                                                                  | <div>MAILING ADDRESS OF OWNER OF CABLE SYSTEM</div> <div>4 International Drive</div> <div>(Number, street, rural route, apartment, or suite number)</div> <div>Rye Brook, NY 10573</div> <div>(City, town, state, zip)</div>                                                                                                                                                                                                                                                                                                                                             |
|                   |                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| C                 | System                                                                                                                                                                           | <b>INSTRUCTIONS:</b> 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.                                                                                                                                                                                                                                                                                              |
|                   |                                                                                                                                                                                  | <div>1</div> <div>IDENTIFICATION OF CABLE SYSTEM:</div> <div>Vyve Broadband</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                   |                                                                                                                                                                                  | <div>2</div> <div>MAILING ADDRESS OF CABLE SYSTEM:</div> <div>4 International Drive</div> <div>(Number, street, rural route, apartment, or suite number)</div> <div>Rye Brook, NY 10573</div> <div>(City, town, state, zip code)</div>                                                                                                                                                                                                                                                                                                                                   |

**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 effect 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 filing, a determination that would be made by a court of law.





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|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------|------------------------|
| Name                                                                                      | LEGAL NAME OF OWNER OF CABLE SYSTEM:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                    | SYSTEM ID#             |
|                                                                                           | Mega Broadband Investments Holdings LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                    | 029450                 |
| <div>G</div> <div>Primary Transmitters: Television</div> <div>Add Rows as Necessary</div> | PRIMARY TRANSMITTERS: TELEVISION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                    |                        |
|                                                                                           | <p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (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.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"><li>• Do <i>not</i> 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 <i>only</i> on a substitute basis.</li><li>• 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 stations, see page (v) of the general instructions.</li></ul> <p><b>Column 1:</b> List each station’s call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form.</p> <p><b>Column 2:</b> Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter “N” (for network), “N-M” (for 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 in the paper SA1-2 form.</p> <p><b>Column 4:</b> 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 Canadian stations, if any, give the name of the community with which the station is identified.</p> |                          |                    |                        |
|                                                                                           | 1. CALL SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2. B’CAST CHANNEL NUMBER | 3. TYPE OF STATION | 4. LOCATION OF STATION |
|                                                                                           | KSNT-Bounce .4 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 27.4                     | I-M                | TOPEKA KS              |
|                                                                                           | KSNT-NBC 27 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 27.1                     | N                  | TOPEKA KS              |
|                                                                                           | KTKA-ABC 49 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 49.1                     | N                  | TOPEKA KS              |
|                                                                                           | KTKA-CW 49.3 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 49.3                     | I-M                | TOPEKA KS              |
|                                                                                           | KTKA-DABL 49.2 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 49.2                     | I-M                | TOPEKA KS              |
|                                                                                           | KTMJ-FOX 43 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 43.1                     | I                  | TOPEKA KS              |
|                                                                                           | KTMJ-Grit TV 43.3 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 43.3                     | I-M                | TOPEKA KS              |
|                                                                                           | KTMJ-Ion Mystery 43.1 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 43.2                     | I-M                | TOPEKA KS              |
|                                                                                           | KTMJ-Laff 43.4 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 43.4                     | I-M                | TOPEKA KS              |
|                                                                                           | KTWU-Enhance 11.3 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 11.3                     | E-M                | TOPEKA KS              |
|                                                                                           | KTWU-PBS 11 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 11.1                     | E                  | TOPEKA KS              |
|                                                                                           | KTWU-PBS Kids 11.2 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 11.2                     | E-M                | TOPEKA KS              |
|                                                                                           | WIBW - D3 - Heroes & Villains 13.3 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 13.3                     | I-M                | TOPEKA KS              |
|                                                                                           | WIBW - D4 - Start 13.4 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 13.4                     | I-M                | TOPEKA KS              |
|                                                                                           | WIBW-D5 The 365 13.5 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 13.5                     | I-M                | TOPEKA KS              |
|                                                                                           | WIBW-CBS HD 13 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 13.1                     | N                  | TOPEKA KS              |
|                                                                                           | WIBW-MNT 13.2 Topeka                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 13.2                     | I-M                | TOPEKA KS              |
| KTKA-Antenna TV .4 Topeka                                                                 | 49.4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | I-M                      | TOPEKA KS          |                        |
|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                    |                        |
|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                    |                        |
|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                    |                        |
|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                    |                        |
|                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                    |                        |

SYSTEM ID#

029450

## H

**Primary Transmitters:  
Radio**

**Column 1:** Identify the call sign of each station carried.

**Column 2:** State whether the station is AM or FM.

**Column 4:** Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

[illegible]





|                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                      |                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------|
| Accounting Period: 2025/2                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | FORM SA1-2E. PAGE 7. |                                                   |
| Name                                                                                                                                                                                    | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>Mega Broadband Investments Holdings LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                      | SYSTEM ID#<br><b>029450</b>                       |
| <b>K</b><br>Gross Receipts                                                                                                                                                              | <b>GROSS RECEIPTS</b><br><b>Instructions:</b> The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions located in the paper SA1-2 form.<br>Gross receipts from subscribers for secondary transmission service(s)<br>during the accounting period. . . . .<br><b>IMPORTANT:</b> You must complete a statement in space P concerning gross receipts. |                      |                                                   |
|                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                      | <b>\$ 14,963.75</b><br>(Amount of gross receipts) |
| <b>L</b><br>Copyright<br>Royalty Fee                                                                                                                                                    | <b>COPYRIGHT ROYALTY FEE</b><br><b>Instructions:</b> To compute the royalty fee you owe:<br>• Complete block 1, block 2, or block 3.<br>• Use block 1 if the amount of gross receipts in space K is \$137,100 or less.<br>• 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.<br>• Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600.<br>See page (vi) of the general instructions located in the paper SA1-2 form for more information.                                                                                                                          |                      |                                                   |
|                                                                                                                                                                                         | 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-month accounting period is \$52.00.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                                                   |
|                                                                                                                                                                                         | Line 1. Royalty fee for accounting period . . . . . <b>\$ 52.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                      |                                                   |
|                                                                                                                                                                                         | Line 2. Interest charge. Enter the amount from line 4, space Q, page 8 . . . . . <b>0.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                                                   |
|                                                                                                                                                                                         | Line 3. <b>TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD.</b> Add lines 1 and 2 . . . . . <b>\$ 52.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                      |                                                   |
|                                                                                                                                                                                         | BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                      |                                                   |
|                                                                                                                                                                                         | 1. Base amount under statutory formula . . . . . <b>\$ 263,800.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                      |                                                   |
|                                                                                                                                                                                         | 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 . . . . . <b>0.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                      |                                                   |
|                                                                                                                                                                                         | 9. <b>TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD.</b> 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 . . . . . <b>\$ 263,800.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                      |                                                   |
|                                                                                                                                                                                         | 3. Subtract line 2 from line 1 . . . . .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                      |                                                   |
|                                                                                                                                                                                         | 4. Multiply line 3 by .01 . . . . .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                      |                                                   |
|                                                                                                                                                                                         | 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) . . . . . <b>\$ 1,319.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                      |                                                   |
|                                                                                                                                                                                         | 6. Interest charge. Enter the amount from line 4, space Q, page 8 . . . . . <b>0.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                      |                                                   |
|                                                                                                                                                                                         | 7. <b>TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD.</b> Add lines 4, 5, and 6 . . . . .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                      |                                                   |
| FILING FEE AND TOTAL REMITTANCE DUE                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                      |                                                   |
| Filing Fee and<br>Total Remittance<br>Due                                                                                                                                               | 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) . . . . . <b>\$ 52.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                      |                                                   |
|                                                                                                                                                                                         | 2. Filing Fee (See the instructions for more information on filing fee calculations) . . . . . <b>\$ 15.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                      |                                                   |
|                                                                                                                                                                                         | 3. <b>TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD.</b> Add lines 2 and 3 . . . . . <b>\$ 67.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                      |                                                   |
|                                                                                                                                                                                         | EFT Trace # or TRANSACTION ID #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                      |                                                   |
| <a href="#">Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights.</a><br><a href="#">See Circular 74 for more information.</a> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                      |                                                   |



|      |                                                                                        |                             |
|------|----------------------------------------------------------------------------------------|-----------------------------|
| Name | LEGAL NAME OF OWNER OF CABLE SYSTEM:<br><b>Mega Broadband Investments Holdings LLC</b> | SYSTEM ID#<br><b>029450</b> |
|------|----------------------------------------------------------------------------------------|-----------------------------|

MChannels

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.

1. Enter the total number of channels on which the cable system carried television broadcast stations . . . . .

18

2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services . . . . .

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NIndividual to Be Contacted for Further Information

INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual we can contact about this statement of account.)

Name

Marie Censoplano

Telephone

914-235-8313

Address

4 International Dr Suite 330

(Number, street, rural route, apartment, or suite number)

Rye Brook, NY 10573

(City, town, state, zip)

Email

marie.censoplano@vyvebb.com

Fax (optional)

OCertification

CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations)

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 identified 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 identified as owner 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 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)]

X

/s/ Daniel J White

Enter an electronic signature on the line above to certify this statement.

Enter signature using an "/s/ signature" (e.g., /s/ John Smith)

Typed or printed name:

Daniel J White

Title:

SVP Financial Planning

(Title of official position held in corporation or partnership)

Date:

2/25/26

**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 effect 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 filing, a determination that would be made by a court of law.

U.S. Copyright Office

Form SA1-2E Short Form (Rev. 05-17)



LEGAL NAME OF OWNER OF CABLE SYSTEM:  
**Mega Broadband Investments Holdings LLC**

SYSTEM ID#  
**029450**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| <div><b>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</b><br/>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:<br/>“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.”<br/><br/>For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.<br/><br/>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?<br/><br/><input type="checkbox"/> NO<br/><br/><input type="checkbox"/> YES. Enter the total here and list the satellite carrier(s) below. . . . . \$ <div></div></div> | <div><b>P</b><br/><br/><b>Special Statement<br/>Concerning Gross<br/>Receipts Exclusion</b></div> |
| <div><div><div>Name</div><div></div></div><div>Mailing Address</div><div></div></div> <div><div>Name</div><div></div></div> <div>Mailing Address</div> <div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                   |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| <div><b>INTEREST ASSESSMENT</b><br/>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 located in the paper SA1-2 form.<br/><br/>Line 1 Enter the amount of late payment or underpayment . . . . . <div></div><div>x <div></div></div><br/>Line 2 Multiply line 1 by the interest rate* and enter the sum here . . . . . -<div>x <div></div> days</div><br/>Line 3 Multiply line 2 by the number of days late and enter the sum here . . . . . -<div>x 0.00274</div><br/>Line 4 Multiply line 3 by 0.00274** and enter here<br/>in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6 . . . . . \$ -<div>(interest charge)</div><br/><div>* To view the interest rate chart click on <a href="http://www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a>. For further assistance please contact the Licensing Division at (202) 707-8150 or <a href="mailto:licensing@copyright.gov">licensing@copyright.gov</a>.<br/><br/>** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.</div><br/>NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.<br/><br/><div><div>Owner</div><div></div></div><div>Address</div><div></div><br/><div>ID number</div><div></div><div>First community served</div><div></div><div>Accounting period</div><div></div></div> | <div><b>Q</b><br/><br/><b>Interest Assessment</b></div> |
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