THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 **Short Form**

-	ENT OF ACCOUNT ry Transmissions by	FOR COPYRIGH	Return to: Library of Congress Copyright Office Licensing Division		
Cable Systems (Short Form) General instructions are at the end of this form [pages (i)-(vii)].		02/27/2019	\$ 101 Independer Washington, DC 6400 (202) 707 ALLOCATION NUMBER For courier deliving see page ii of the instructions		
A Accounting Period	ACCOUNTING PERIOD COVEREI July 1-December 31, 20				
B Owner	rate title of the subsidiary, not that of the pa List any other name or names under w If there were different owners during the a single statement of account and royalty fe	prrect information beside it. If the cable system. If the owner is a rent corporation. hich the owner conducts the busine <i>the accounting period, only the owne</i> <i>the payment covering the entire account</i> t filing. If not, enter the system's ID	a subsidiary of another corporation, give the system. It is so the cable system.	should submit	

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33410	2018/2

Four International Drive, Suite 330 Rye Brook, NY 10573 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these С names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM: System 1 MAILING ADDRESS OF CABLE SYSTEM: 1501 West Mississippi 2 or suite number (Number, street, rural route, apartm Durant, OK 74701 City, town, state, zip code Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined D in FCC rules: "a separate and distinct community or municipal entitiy (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Area Note: Entities and properties such as hotels, apartments, condiminiums, or mobile home parks should be reported in paratheses below Served the identified city. CITY OR TOWN STATE CITY OR TOWN STATE First Achille OK Community Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

Form SA1-2c Rev 04/2011

N	LEGAL NAME OF OWNER OF C	ABLE SYSTEM:									SYS	TEM ID
Name	Vyve Broadband J, LLC											3341
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmissic about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the nu separately for the particular servi Rate: Give the standard rate c unit in which it is generally billed. category, but do not include disc BIOCK 1: In the lett-nand block systems most commonly provide that applies to your system. Note	SERVICE: SU pace E should in of television ay cable) in sp (June 30 or Du blocks in space transmission umber of billing ce at the rate i harged for eact (Example: "\$2 ounts allowed in space E, the to their subscr e: Where an in	cover a and rac ace F, ecember ce E ca service ys in that ndicate h categ 20/mth" for adva e torm i ribers. (dividua	all categories of dio broadcasts not here. All the er 31, as the ca ll for the number at category (the ed—not the num ory of service.). Summarize a ance payment. ists the catego Give the number I or organizatio	of se by le fa ase ler c Du c e nu mbe Inc any ories er o on is	condary your sys acts you may be) of subscr an comp mber of er of sets lude bot standard s of secco of subscr s receivir	stem to subscril state must be t). ribers to the cal pute the numbe persons or org s receiving serv h the amount o d rate variation ondary transmis ibers and rate ng service that	be tho ble gar yic s t s s for ta	rs. Give in pse existin e system, of subscri- nizations of e). the charge within a pa- on service r each list lls under of	nformation ng on the broken bers in charged e and the articular rate e that cable ed category different		
	categories, that person or entity subscriber who pays extra for ca first set" and would be counted o Block 2: If your cable system if printed in block 1 (for example, ti with the number of subscribers a	ble service to a nce again unde nas rate catego ers of services	addition er "Serv pries tor that in	al sets would b vice to addition r secondary tra clude one or m	be ir nal s ansr nore	ncluded set(s)." mission s	in the count un service that are ary transmissio	nde e d	er "Service itterent fro s), list the	e to the om those m, together		
	sufficient.	·										
	BLC	DCK 1 NO. OF							BLOCK	2 NO. 0	c	
	CATEGORY OF SERVICE	SUBSCRIB		RATE		CATE	EGORY OF SE	R١	VICE	SUBSCRIE		RATE
	Residential: • Service to first set • Service to additional set(s)		27	25.00								
	• FM radio (if separate rate)											
	Motel, hotel				1							
	Commercial											
	Converter											
	Residential											
	Non-residential											
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SECO In General: Space F calls for rat not covered in space E, that is, th service for a single fee. There ar furnished at cost or (2) services of amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which a s brief (two- or three-word) descrip	e (not subscrib nose services t e two exception or facilities furm it in which it is rate column. e charged by th your cable sys separate charg	ber) info that are ns: you iished t usually he cabl stem tui e was r	ormation with re- e not offered in do not need to o nonsubscribe billed. If any ra e system for ea mished or offer made or establi	espe con o giv ers. ates ach red	nbination ve rate in Rate inf s are cha of the a during ti	n with any secon offormation con- formation shoul arged on a varia pplicable servio ne accounting p	ono ce ld ab ce pe	dary trans rning (1) s include bo le per-pro s listed. riod that v	mission services oth the ogram basis, vere not		
		BLO								BLOC		
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SEF ation: Non-res			RATE		CATEGO	DRY OF SEF	RVICE	RATE
	Pay cable	19.95		otel, hotel	Siuc	Fillai	T&M					
	• Pay cable—add'l channel	15.95		mmercial			T&M					
	Fire protection	N/A	•Pa	y cable			T&M					
	 Burglar protection 	N/A	•Pa	y cable-add'l c	han	nel	T&M					
	Installation: Residential			e protection			N/A					
	First set	59.99		rglar protectior	n		N/A					
	Additional set(s)	19.99		services:								
	• FM radio (if separate rate)	N/A		connect			29.99					
	Converter			sconnect Itlet relocation			20 00					
				ove to new add	Ires	s	29.99 29.99					
						-		ŀŀ				

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				FORM S	A1-2. PAGE					
Name	LEGAL NAME OF OWNE	R OF CABLE SYSTEM	И:	SI	STEM ID					
Nume	Vyve Broadband J	I, LLC			3341					
	PRIMARY TRANSMITTERS	TELEVISION								
G Primary Transmitters: Television	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.									
	 Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. 									
	Column 2: Give the nu	mber of the channel	on which the static	n program services such as HBO, ESPN, etc. n's broadcasts are carried in its own community.						
	associated with a station a the same on the form.	ccording to its over-	hje-air designation	m carried the station. Identify each multicast stream . For example, report multicast stream "WETA-2" as						
	educational station, by ent (for independent multicast) For the meaning of these t Column 4: Give the loc	Column 3: 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. Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed.								
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	6. LOCATION OF STATION						
	KXII 12 (CBS)	12	N	SHERMAN OK						
	KETA 13 (PBS)	13	E	OKLAHOMA CITY OK						
	KWTV-News 9 Now	9	 I	OKLAHOMA CITY OK						
	<u> </u>	10	N							
	KTEN 10 (NBC)									
	KXII 12.3 (Fox)	12.3	I-M	SHERMAN OK						
	KTEN (CW)	10.2	I-M	SHERMAN OK						
	KTEN (ABC)	10.3	N-M	SHERMAN OK						
	KXII (MyNet)	12.2	I-M	SHERMAN OK						
	KETA 13.2 OKLA	13.2	E-M	OKLAHOMA CITY OK						
	KETA 13.3 Create	13.3	E-M	OKLAHOMA CITY OK						
	KETA 13.4 Kids	13.4	E-M	OKLAHOMA CITY OK						
	KWTV-News 9 Now	9.2	I-M	Oklahoma City, OK						

FORM SA1-2. PAGE 3.

ACCOUNTING PERIOD: 2018/2

FORM SA1-2. F	PAGE 4.						Accountin	NG PERIOD: 2018/2
LEGAL NAME OF			YSTEM:				SYSTEM ID#	Name
Vyve Broad	band J, LL	C					33410	
PRIMARY TRA		-						н
			rried on a separate and discr nerally receivable" by your ca					п
	-	-			-			D i su s
			-Band FM Carriage: Under (tem whenever it is received a					Primary Transmitters:
			ved at the headend, with the					Radio
			Copyright Office regulations	on this point, see	page (v) of the	e genera	l instructions.	
			each station carried. n is AM or FM.					
			nal was electronically process	ed by the cable s	ystem as a se	parate a	nd discrete	
signal, indicate	this by placing	g a check	mark in the "S/D" column.	-				
			on (the community to which the			C or, in t	he case of	
Mexican or Can	adian stations	s, il any, i	the community with which the	station is identifie	eu).			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

							I SA1-2. PAGE 5.				
Name	LEGAL NAME OF OWNER OF Vyve Broadband J, LL						8YSTEM ID# 33410				
J Substitute	SUBSTITUTE CARRIAG In General: In space I, ident substitute basis during the a explanation of the programm	ify <i>every noi</i>	nnetwork televis riod, under spe	sion program broadcast by a cific present and former FC	a distant static C rules, regula	ations, or authorizations. F					
Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE										
Special Statement and	• During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program										
Program Log	broadcast by a distant station?										
	Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program										
	log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.										
						BSTITUTE CARRIAGE					
	5	1	E PROGRAM	1		7. REASON FOR DELETION					
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	TORDELETION				
						-					
						<mark></mark>					
						_					
						_					
						_					
						_					
						_					
						_					
		1	<u> </u>	<mark></mark>			<u> </u>				

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Vyve Broadband J, LLC	33410	
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. If all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute the page (vii) of the general instructions.	smission service	K Gross Receipts
Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	4,774.25	
IMPORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receipts)	
 COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions for more information. 	\$263,800	L Copyright Royalty Fee
BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	r this six-mont	
Line 1. Royalty fee for accounting period	\$ 52.00	
Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	\$ 52.00	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,	100)	
1. Base amount under statutory formula \$ 263,800.00		
2. Enter amount of gross receipts from space K		
3. Subtract line 2 from line 1		
4. Enter the amount of gross receipts from space K		
5. Enter the amount from line 3		
6. Subtract line 5 from line 4		
7. Multiply line 6 by .005 (enter figure here)		
8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527	7,600)	
1. Enter the amount of gross receipts from space K		
2. Base amount under statutory formula		
3. Subtract line 2 from line 1		
4. Multiply line 3 by .01		
5. Royalty due on the first \$263,800 of gross recepits (under statutory formula)	1,319.00	
6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
IMPORTANT : Your remittance must be in the form of an <i>electronic payment</i> payable to <i>Register of Copyrights</i> . See general instructions for more information.	page I of the	

FORM SA1-2. PAGE 6.

	·	FORM SA1-2. PAGE 7						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 33410						
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.							
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	12						
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	240						
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED : (Identify an individual to whom we can write or call about this statement of account.)							
Be Contacted for Further Information	Name Marie Censoplano Telephone S	014-234-8313						
	Address Four International Drive, Suite 330 (Number, street, rural route, apartment, or suite number) Rye Brook, NY 10573 (City, town, state, zip)							
	Email (optional) Fax (optional)							
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulars explained in the general instructions.) I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of spa 							
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cal in line 1 of space B and that the owner is not a corporation or partnership; or	ble system as identifiec						
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as in line 1 of space B.	owner of the cable system						
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact conta 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)] 	ined herein						
	Handwritten signature: Is/ Daniel J White							
	Typed or printed name: Daniel J. White							
	Title: SVP - Financial Planning (Title of official position held in corporation or partnership)							
	Date:							

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

ACCOUNTING PERIOD: 2018/2

FORM SA1-2. PAGE 8.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	
Vyve Broadband J, LLC 33410	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub- scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement
 For more information on when to exclude these amounts, see the note on page (vii) of the general instructions. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) \$	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner	
Address	
ID number First community served Accounting period	

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