

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000046346Submit Date:2018-03-01FRN:0002855179Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status: Date:03/01/2018Filing Status:ActiveStatus:ActiveStatus:Status:

Section I - General Information

1. Respondent

FRN	Entity Name
0017686353	Channel 49, L.L.C.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
26 North Halsted Street	Chicago	IL	60661	+1 (312) 705- 2600	nshapiro@wciu. com

2. Contact Representative

Name	Organization
Mace Rosenstein, Esq.	Covington & Burling LLP

			Zip		
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email
One CityCenter 850 Tenth Street, N.W.	Washington	DC	20001	+1 (202) 662-5460	mrosenstein@cov.com

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees			
Nature of Respondent	Limited liability company			

(b) Provide the following information about this report:

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Purpose	Biennial
"As of" date	10/01/2017
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name			FRN		
TV-49, Inc.			0019682483		
Fac. ID No.	Call Sign	City	State	Service	
68545	WMLW-TV	RACINE	WI	DTV	

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.				
 A pplicable. (a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partner non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening comparior entities.) List each interest holder with a direct attributable interest in the Respondent separately. Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C Section 73.3555, Note 2(i). In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted. Entities that are part of an organizational structure don to report, or file a separate report for, any interest holder that does no an attributable interest in the Licensee(s) for which the report is being submitted. Please see the Instructions for further detail concerning interests that must be reported in response to this question. The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement. 					
	Ownership Information				
	FRN	0017686353			
	Entity Name	Channel 49, L.L.C.			
	Address	PO Box			
		Street 1	26 North Halsted Street		
		Street 2			
		City	Chicago		
	State ("NA" if non-U.S. IL address)				
		Zip/Postal Code	60661		
		Country (if non-U.S. address)	United States		

Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
Total assets (Equity Debt0.0%Plus)			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information				
FRN	0020055653	0020055653		
Name	Fred Bishop			
Address	PO Box			
	Street 1	26 North Halsted Street		
	Street 2			
	City	Chicago		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	60661		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Manager			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%	·	
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?				

Ownership Information

FRN	0020055612
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Name	Norman Shapiro	Norman Shapiro		
Address	PO Box			
	Street 1	26 North Halsted Street		
	Street 2			
	City	Chicago		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	60661		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - Manager			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes	

Ownership Information

FRN	0027096577	
Name	Evan Fieldman	
Address	PO Box	
	Street 1	26 North Halsted Street
	Street 2	
	City	Chicago
	State ("NA" if non-U.S. address)	IL
	Zip/Postal Code	60661
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Citizenship, Gender,	Citizenship US	

Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information FRN 0002855179 **Entity Name** WEIGEL BROADCASTING CO. Address PO Box Street 1 26 North Halsted Street Street 2 Chicago City IL State ("NA" if non-U.S. address) 60661 **Zip/Postal Code** Country (if non-U.S. **United States** address) Listing Type Other Interest Holder **Positional Interests** Owner (check all that apply) **Tribal Nation or Tribal** Interest holder is not a Tribal nation or Tribal entity Entity **Interest Percentages** 100.0% **Jointly Held?** Voting (enter percentage values No from 0.0 to 100.0) 100.0% Equity Total assets (Equity Debt Plus) Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report? (b) Respondent certifies that any interests, including equity, financial, or voting Yes interests, not reported in this filing are non-attributable.

If "No," submit as an exhibit an explanation.



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with No duties wholly unrelated to the Licensee(s)?

If "<u>Yes</u>," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.

Certif	ication

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	

Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: President Exact Legal Title or Name of Respondent: Channel 49 LLC Name: Norman Shapiro Phone: 3127052600 03/01/2018