

(REFERENCE COPY - Not for submission)

FRN

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000045658Submit Date:2018-03-01FRN:0003007283Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:03/01/2018Filing Status:Active

Section I - General Information

1. Respondent

Entity Name

0003015807	VideoIndiana, Inc.
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Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1000 North Meridian Street	Indianapolis	IN	46204	+1 (614) 460- 3888	mfiorile@tdpcompany. com

2. Contact Representative

Name	Organization
Michael P. Beder, 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) 662-5138	mbeder@cov.com

3. Application Filing Fee

Question	Response	
Is this application being submitted without a filing fee?	No	

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAT	1	95	\$70.00
			<u>, , , , , , , , , , , , , , , , , , , </u>	·	Total	\$70.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	For-profit corporation	

(b) Provide the following information about this report:

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.

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name			FRN	FRN		
VideoIndiana, Inc.			00030	15807		
Fac. ID No.	Call Sign	City		State	Service	
70162	WTHR	INDIANAPOLIS		IN	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.

Document Information	
Description of contract or instrument	Station Affiliation Binding Term Sheet (VideoIndiana, Inc.)
Parties to contract or instrument	VideoIndiana, Inc. & MeTV National Limited Partnership (MeTV)
Date of execution	12/2015
Date of expiration	12/2017
Agreement type (check all that apply)	Other Agreement Type: Station Affiliation Binding Term Sheet

Document Information				
Description of contract or instrument	Amended and Restated By-Laws (VideoIndiana, Inc.)			
Parties to contract or instrument	VideoIndiana, Inc.			
Date of execution	05/1996			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Amended and Restated By-Laws			

Document Information

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Description of contract or instrument	Articles of Incorporation (VideoIndiana, Inc.)
Parties to contract or instrument	VideoIndiana, Inc. & State of Delaware
Date of execution	06/1975
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation

Document Information

Description of contract or instrument	Network Affiliation Agreement- Amended (VideoIndiana, Inc.)
Parties to contract or instrument	VideoIndiana, Inc. & NBC Television Network
Date of execution	11/2004
Date of expiration	01/2018
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Affiliation Agreement Binding Term Sheet (VideoIndiana, Inc.)
Parties to contract or instrument	VideoIndiana, Inc. & NBC-Owned Television Stations, a Division of NBCUniversal Media, LLc (Cozi TV)
Date of execution	06/2017
Date of expiration	12/2019
Agreement type (check all that apply)	Other Agreement Type: Affiliation Agreement Binding Term Sheet

Document Information

Description of contract or instrument	Amended Articles of Incorporation (The Dispatch Printing Company)
Parties to contract or instrument	The Dispatch Printing Company & State of Ohio
Date of execution	01/2017
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Amended Articles of Incorporation

Document Information		
Description of contract or instrument	Amended and Restated Code of Regulations (The Dispatch Printing Company)	
Parties to contract or instrument	The Dispatch Printing Company	
Date of execution	01/2017	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Amended and Restated Code of Regulations	

2. Ownership Interests

(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 itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or 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.F.R. 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 that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have 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	0003015807	
Entity Name	VideoIndiana, Inc.	
Address	PO Box	
	Street 1	1000 North Meridian Street
	Street 2CityIndianapolisState ("NA" if non-U.S. address)INZip/Postal Code46204	
	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 from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this r	an attributable interest in one o report?	r more broadcast stations	No

Ownershi	o Info	rmation
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FRN	0019333988			
Name	Michael J. Fiorile			
Address	PO Box			
	Street 1	34 South Third Street		
	Street 2			
	City	Columbus		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	43215		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Citizenship, Gender,				
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 a that do not appear on this	an attributable interest in one c report?	or more broadcast stations	Yes	

Ownership Information			
FRN	0019331347		
Name	Susan C. Bobb		
Address	PO Box		
	Street 1	34 South Third Street	
	Street 2		

	City	Columbus	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43215	
	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	Gender	Female	
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?	or more broadcast stations	Yes

Ownership Information			
FRN	0019334432		
Name	Katherine I. Wolfe	Katherine I. Wolfe	
Address	PO Box		
	Street 1	34 South Third Street	
	Street 2		
	City	Columbus	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43215	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	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 ar that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	Yes

FRN	0019914811			
Name	Lawrence Delia	Lawrence Delia		
Address	ldress PO Box			
	Street 1	1000 North Meridian Street		
	Street 2			
	City	Indianapolis		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	46204		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
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	0003007283		
Entity Name	The Dispatch Printing Company		
Address	PO Box		
	Street 1	34 South Third Street	
	Street 2		

	City	Columbus	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43215	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Owner		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	nation or Tribal entity	
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	100.0%	
	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

FRN	0019334317		
Name	David L. Van Stone		
Address PO Box			
	Street 1	605 South Front Street	
	Street 2	Suite 300	
	City	Columbus	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43215	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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 ar that do not appear on this re	attributable interest in one or port?	more broadcast stations	Yes

Ownership Information			
FRN	0019334127	0019334127	
Name	Sherry L. Lewis	Sherry L. Lewis	
Address	PO Box		
	Street 1	34 South Third Street	
	Street 2		
	City	Columbus	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43215	
	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	Gender	Female	
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%	1
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	or more broadcast stations	Yes

FRN	0021234455	
Name	John J. Cardenas	
Address	PO Box	
	Street 1	770 Twin Rivers Drive
	Street 2	
	City	Columbus
	State ("NA" if non-U.S. address)	ОН

	Zip/Postal Code	43215	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	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

FRN	0019333996			
Name	Joseph Y. Gallo			
Address	Idress PO Box			
	Street 1	34 South Third Street		
	Street 2			
	City	Columbus		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	43215		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male	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 ar that do not appear on this re	attributable interest in one or port?	more broadcast stations	Yes

Ownership Information			
FRN	0019331362	0019331362	
Name	Bradley L. Campbell		
Address	PO Box		
	Street 1	34 South Third Street	
	Street 2		
	City	Columbus	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43215	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Director	Officer, Director	
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 a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes

(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.	

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?	No
If "Yes," provide information describing the interest(s), using	
EITHER the subform OR the spreadsheet option below.	
Respondents with a large number (50 or more) of entries to	
submit should use the spreadsheet option.	
NOTE: Spreadsheets must be submitted in a special XML	
Spreadsheet format with the appropriate structure that is	
specified in the documentation. For instructions on how to	
use the spreadsheet option to complete this question	
(including templates to start with), please Click Here.	
If using the subform, 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	
newspaper entity solely on the basis of the Commission's	
Equity Debt Plus attribution standard, 47 C.F.R. Section	
73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA"	
into the percentage of total assets (Equity Debt Plus) field	
for an interest holder unless that interest holder has an	
attributable interest in the newspaper entity solely on the	
basis of the Commission's Equity Debt Plus attribution standard.	
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.	

(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 duties wholly unrelated to the Licensee(s)?	No
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.	

3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

File Name	Uploaded By	Attachment Type	Description
Dispatch Ownership Chart (Finalized) 2017.pdf	Applicant	Ownership Chart	Ownership Chart

Certification

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: Chairman & CEO Exact Legal Title or Name of Respondent: VideoIndiana, Inc. Name: Michael J Fiorile Phone: 6144603888 03/01/2018