

## Federal (REFERENCE COPY - Not for submission) Communications Operations

FRN

### Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000042859Submit Date:2018-02-21FRN:0014625362Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:02/21/2018Filing Status:Active

#### **Section I - General Information**

#### 1. Respondent

### Entity Name

0023207095 CNZ Communications,	LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
15200 Sunset Blvd Suite 202	Pacific Palisades	СА	90272	+1 (310) 573-1600	randynonberg@cnzcommunications. com

#### 2. Contact Representative

Name	Organization
Kathleen A. Kirby	Wiley Rein LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1776 K. Street N.W.	Washington DC	DC	20006	+1 (202) 719-3360	kkirby@wileyrein.com

## 3. Application Filing Fee

Not Applicable

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permitsEntity 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:

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
Caballero	Acquisition LLC	0014625362

Fac. ID No.	Call Sign	City	State	Service
17830	KGMM-CD	SAN ANTONIO	тх	DCA
18740	KZMM-CD	FRESNO	СА	DCA
38562	KGBS-CD	AUSTIN	ТХ	DCA
41124	KZDF-LP	SANTA BARBARA	СА	LPD
167838	KMMD-CD	SALINAS	СА	DCA
167844	KQMM-CD	SANTA MARIA	СА	DCA
181737	KXBF-LD	BAKERSFIELD	СА	LPD

Licensee/Permittee Name				FRN		
Milwaukee Media LLC		002396	62665			
			-			
Fac. ID No.	Call Sign	City		State	Service	
60571	WIWN	FOND DU LAC		WI	DTV	

#### Section II – Biennial Ownership Information

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.

Not Applicable.

2. Ownership Interests

1. 47 C.F.R.

and Other

**Documents** 

Section 73.3613

(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	0023207095			
Entity Name	CNZ Communications, LLC			
Address	PO Box	PO Box		
	Street 1	15200 Sunset Blvd		
	Street 2	Suite 202		
	City	Pacific Palisades		
	State ("NA" if non-U.S. address)	СА		
	Zip/Postal Code	90272		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
<b>Positional Interests</b> (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal I	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 No that do not appear on this report?			No	

Ownership Information			
FRN	0019517481		
Name	Terrence E. Crosby		
Address	PO Box		
	Street 1	15200 Sunset Blvd	
	Street 2	Suite 202	
	City	Pacific Palisades	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90272	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Other - Manager/Chairman		
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	50.0% Jointly Held? No		
	Equity	50.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	Yes			

#### **Ownership Information**

FRN	0019517515	0019517515	
Name	Randy E. Nonberg	Randy E. Nonberg	
Address	PO Box		
	Street 1	15200 Sunset Blvd	
	Street 2	Suite 202	
	City	Pacific Palisades	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90272	
	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 from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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	0025746124	
Entity Name	Nonberg Family Trust	
Address	PO Box	

	Street 1	15200 Sunset Blvd	
	Street 2	Suite 202	
	City	Pacific Palisades	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90272	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	25.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	25.0%	
	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?		Yes	
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.		Yes	



(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: Vice President         Name: David Nonberg Phone: 3105731600       David Nonberg         02/21/2018       David Nonberg			
	Certification	and that to the best of my knowledge and belief, all statements in this report are	Exact Legal Title or Name of Respondent: <b>CNZ</b> <b>Communications, LLC</b> Name: <b>David Nonberg</b> Phone: <b>3105731600</b>