

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

 
 File Number:
 0000047770
 Submit Date:
 2018-03-02
 FRN:
 0019896786
Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 03/02/2018 Filing Status: Active

# **Section I - General Information**

### 1. Respondent

| FRN        | Entity Name                       |
|------------|-----------------------------------|
| 0019896786 | Sinclair Television Stations, LLC |

| Street<br>Address   | City (and Country if non U.<br>S. address) | State ("NA" if non-U.S.<br>address) | Zip<br>Code | Phone                | Email                                |
|---|--|-------------------------------------|-------------|----------------------|--------------------------------------|
| C/O Miles S.<br>Mason,<br>Pillsbury<br>Winthrop<br>Shaw<br>Pittman LLP<br>1200<br>Seventeenth<br>Street, NW | Washington                                 | DC                                  | 20036       | +1 (202)<br>663-8000 | miles.<br>mason@pillsburylaw.<br>com |

## 2. Contact Representative

| Name           | Organization                        |
|----------------|-------------------------------------|
| Miles S. Mason | Pillsbury Winthrop Shaw Pittman LLP |

| Street<br>Address                 | City (and Country if non U.S.<br>address) | State | Zip<br>Code | Phone                 | Email                            |
|-----------------------------------|---|-------|-------------|-----------------------|----------------------------------|
| 1200<br>Seventeenth<br>Street, NW | Washington                                | DC    | 20036       | +1 (202) 663-<br>8195 | miles.mason@pillsburylaw.<br>com |

3. Application Filing Fee

Not Applicable

#### 4. Nature of Respondent

| (a) Provide the following information about the Responder<br>Relationship to stations/permits | ht:<br>Entity required to file a Form 323 because it holds an<br>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 Nam | ie                   |      |          | FI | RN    |        |         |
|------------------------|----------------------|------|----------|----|-------|--------|---------|
| WJAR Licensee, LLC     |                      |      |          | 0  | 02389 | 93225  |         |
| Fac. ID No.            | Call Sign            | City |          |    |       | State  | Service |
| 50780                  | WJAR                 |      | VIDENCE  |    |       | RI     | DTV     |
|                        |                      |      |          |    |       |        |         |
| Licensee/Permittee Nam | 16                   |      |          |    | RN    | 70.470 |         |
| WSET Licensee, LLC     |                      |      |          | 0  | 0238  | 70470  |         |
| Fac. ID No.            | Call Sign            | Cit  | y        |    |       | State  | Service |
| 73988                  | WSET-TV              | LY   | NCHBURG  |    |       | VA     | DTV     |
| 73989                  | W05AA-D              | R    | DANOKE   |    |       | VA     | LPT     |
| Licensee/Permittee Nam | le                   |      |          | FI | RN    |        |         |
| KATV Licensee, LLC     |                      |      |          | 0  | 02387 | 70488  |         |
| Fac. ID No.            | Call Sign            | City |          |    |       | State  | Service |
| 33543                  | KATV                 |      | LE ROCK  |    |       | AR     | DTV     |
| Licensee/Permittee Nam |                      |      |          | FI | RN    |        |         |
| ACC Licensee, LLC      |                      |      |          |    |       | 22774  |         |
| Fac. ID No.            | Call Sign            | City |          |    |       | State  | Service |
| 1051                   | Call Sign<br>WJLA-TV | City | SHINGTON |    |       | DC     | DTV     |
|                        |                      |      |          |    |       |        |         |
| Licensee/Permittee Nam | le                   |      |          | FI | RN    |        |         |
| KTUL Licensee, LLC     |                      |      |          | 0  | 02387 | 70496  |         |
| Fac. ID No.            | Call Sign            |      | City     |    | State | 9      | Service |
| 35685                  | KTUL                 |      | TULSA    |    | ок    |        | DTV     |
| Licensee/Permittee Nam | le                   |      |          | FI | RN    |        |         |
| WCWF Licensee, LLC     |                      |      |          | 0  | 02389 | 93217  |         |
| Fac. ID No.            | Call Sign            |      | City     |    | Sta   | te     | Service |
| 73042                  | WCWF                 |      | SURING   |    | WI    |        | DTV     |
|                        |                      |      |          |    |       |        |         |

| Licensee/Permittee Name |           |            | FRN    |       |         |
|-------------------------|-----------|------------|--------|-------|---------|
| WLUK Licensee, LLC      |           |            | 002389 | 93233 |         |
| Fac. ID No.             | Call Sign | City       |        | State | Service |
| 4150                    | WLUK-TV   | GREEN BAY  |        | WI    | DTV     |
| 4151                    | W40AN-D   | ESCANABA   |        | МІ    | LPT     |
| Licensee/Permittee Name |           |            | FRN    |       |         |
| WBMA Licensee, LLC      |           |            | 002387 | 70462 |         |
| Fac. ID No.             | Call Sign | City       |        | State | Service |
| 60214                   | WBMA-LD   | BIRMINGHAM |        | AL    | LPD     |

# Section II – Biennial Ownership Information

| 1. 47 C.F.R.<br>Section 73.3613<br>and Other<br>Documents | contracts and other instruments<br>report. In addition, attributable L<br>disclosed by the licensee of the<br>attributable JSA, or a network af  | set forth in 47 C.F.R. Section 73<br>ocal Marketing Agreements (LM<br>brokering station on its ownershi<br>filiation agreement, check the ap<br>ee Respondents that only hold a  | full power television, AM, and/or FM stations should list all<br>8.3613(a) through (c) for the facility or facilities listed on this<br>As) and attributable Joint Sales Agreements (JSAs) must be<br>ip report. If the agreement is an attributable LMA, an<br>opropriate box. Otherwise, select "Other." Non-Licensee<br>uthorizations for Class A television and/or low power television<br>ion. |
|---|--|--|---|
| 2. Ownership<br>Interests                                 | generating a series of subforms.<br>itself. If the Respondent is not a<br>non-insulated members, and any<br>standards set forth in 47 C.F.R.<br>or entities.) List each interest ho<br>Leave the percentage of total as<br>attributable interest in the Respo<br>Section 73.3555, Note 2(i).<br>In the case of vertical or indirect<br>attributable interest in the Licens<br>Entities that are part of an organ<br>separate ownership reports. In s<br>an attributable interest in the Lice<br>Please see the Instructions for for<br>The Respondent must provide a | Answer each question on each<br>natural person, also list each of<br>y other persons or entities with a<br>Section 73.3555. (A "direct" inter<br>lder with a direct attributable inter<br>sets (Equity Debt Plus) field blar<br>ondent solely on the basis of the<br>ownership structures, list only th<br>see(s) for which the report is bein<br>such a structure do not report, or<br>ensee(s) for which the report is b | holding companies or other forms of indirect ownership must file<br>file a separate report for, any interest holder that does not have<br>being submitted.<br>It that must be reported in response to this question.<br>each interest holder reported in response to this question.   |
|   | Ownership Information  |  |   |
|   | FRN  | 0019896786   |   |
|   | Entity Name  | Sinclair Television Stations, LL   | c   |
|   | Address  | PO Box   |   |
|   |  | Street 1   | C/O Miles S. Mason, Pillsbury Winthrop Shaw Pittman LLP   |
|   |  | Street 2   | 1200 Seventeenth Street, NW   |

City

Washington

|  | State ("NA" if non-U.S. address)   | DC                        |                     |
|--|------------------------------------|---------------------------|---------------------|
|  | Zip/Postal Code                    | 20036                     |                     |
|  | Country (if non-U.S.<br>address)   | United States             |                     |
| Listing Type                                       | Respondent                         |                           |                     |
| <b>Positional Interests</b> (check all that apply) | Respondent                         |                           |                     |
| Tribal Nation or Tribal<br>Entity                  | Interest holder is not a Tribal    | nation or Tribal entity   |                     |
| Interest Percentages<br>(enter percentage values   | Voting                             | 0.0%                      | Jointly Held?<br>No |
| from 0.0 to 100.0)                                 | Equity                             | 0.0%                      | ,                   |
|  | Total assets (Equity Debt<br>Plus) | 0.0%                      |                     |
| Does interest holder have                          | an attributable interest in one c  | r more broadcast stations | No                  |

that do not appear on this report?

## **Ownership Information**

| FRN  | 0019896299                                |                               |                           |
|--|---|-------------------------------|---------------------------|
| Entity Name  | Perpetual Corporation                     |                               |                           |
| Address  | PO Box                                    |                               |                           |
|  | Street 1                                  | C/O Miles S. Mason, Pillsbury | Winthrop Shaw Pittman LLP |
|  | Street 2                                  | 1200 Seventeenth Street, NW   | 1                         |
|  | City                                      | Washington                    |                           |
|  | State ("NA" if non-U.S.<br>address)       | DC                            |                           |
|  | Zip/Postal Code                           | 20036                         |                           |
|  | Country (if non-U.S.<br>address)          | United States                 |                           |
| Listing Type   | Other Interest Holder                     |                               |                           |
| Positional Interests<br>(check all that apply)       | Stockholder                               |                               |                           |
| Tribal Nation or Tribal<br>Entity                    | Interest holder is not a Tribal           | nation or Tribal entity       |                           |
| Interest Percentages<br>(enter percentage values     | Voting                                    | 100.0%                        | Jointly Held?<br>No       |
| from 0.0 to 100.0)                                   | Equity                                    | 100.0%                        |                           |
|  | Total assets (Equity Debt<br>Plus)        |                               |                           |
| Does interest holder have that do not appear on this | an attributable interest in one o report? | r more broadcast stations     | No                        |

| (c) Does the Respondent or any reported interest holder<br>hold an attributable interest in any newspaper entities in | No |
|---|----|
| the same market as any station for which this report is   |    |
| filed, as defined in 47 C.F.R. Section 73.3555?   |    |
|   |    |
| 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.   |    |
| (including templates to start with), please oner 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 ECC Registration Number  |    |
| The Respondent must provide an FCC Registration Number<br>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 " $\underline{Yes}$ ," provide the following information for each such the relationship.

| (e) Is Respondent seeking an attribution duties wholly unrelated to the Licensee(s | exemption for any officer or director with<br>;)?   | No |
|--|---|----|
|  | uired fields and submit an Exhibit fully describing |    |
| attributed an interest.  | and explaining why that individual should not be    |    |

Section

Question

| Authorized Party to Sign | WILLFUL FALSE STATEMENTS ON<br>THIS FORM ARE PUNISHABLE BY<br>FINE AND/OR IMPRISONMENT (U.S.<br>CODE, TITLE 18, SECTION 1001), AND<br>/OR REVOCATION OF ANY STATION<br>LICENSEOR CONSTRUCTION<br>PERMIT (U.S. CODE, TITLE 47,<br>SECTION 312(a)(1)), AND/OR<br>FORFEITURE (U.S. CODE, TITLE 47,<br>SECTION 503). |   |
|--------------------------|--|---|
| Certification            | I certify that I have examined this report<br>and that to the best of my knowledge and<br>belief, all statements in this report are<br>true, correct and complete.   | Official Title: <b>Secretary</b><br>Exact Legal Title or Name of Respondent:<br><b>Sinclair Television Group, Inc.</b><br>Name: <b>David B. Amy</b><br>Phone: <b>4105681500</b><br>03/02/2018 |