



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000045099** | Submit Date: **2018-02-28** | FRN: **0023056880**

Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **02/28/2018**

Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0023056880	SummitMedia Member, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2700 CORPORATE DRIVE	BIRMINGHAM	AL	35042	+1 (205) 916-1102	DARRYL.GRONDINES@SUMMITMEDIA.COM

2. Contact Representative

Name	Organization
Francisco R. Montero	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N 17th Street 11th Floor	Arlington	VA	22209	+1 (703) 812-0400	montero@fhhlaw.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:	
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
SM-WQNU, LLC	0022877419

Fac. ID No.	Call Sign	City	State	Service
20332	WQNU	LYNDON	KY	FM

Licensee/Permittee Name	FRN
SM-KCCN, LLC	0022877369

Fac. ID No.	Call Sign	City	State	Service
34552	KCCN-FM	HONOLULU	HI	FM

Licensee/Permittee Name	FRN
SM-WAGG, LLC	0022877096

Fac. ID No.	Call Sign	City	State	Service
48717	WAGG	BIRMINGHAM	AL	AM

Licensee/Permittee Name	FRN
SM-WKLR, LLC	0022877443

Fac. ID No.	Call Sign	City	State	Service
71330	WKLR	FORT LEE	VA	FM

Licensee/Permittee Name	FRN
SM-WVEZ, LLC	0022877393

Fac. ID No.	Call Sign	City	State	Service
53595	WVEZ	ST. MATTHEWS	KY	FM

Licensee/Permittee Name	FRN
SM-KINE, LLC	0022877377

Fac. ID No.	Call Sign	City	State	Service
34553	KINE-FM	HONOLULU	HI	FM

Licensee/Permittee Name	FRN
SM-WZNN, LLC	0022877195

Fac. ID No.	Call Sign	City	State	Service
71417	WPYA	GARDENDALE	AL	FM

Licensee/Permittee Name	FRN
SM-WHTI, LLC	0022877435

Fac. ID No.	Call Sign	City	State	Service
27439	WJSR	LAKESIDE	VA	FM

Licensee/Permittee Name	FRN
SM-WRKA, LLC	0022877385

Fac. ID No.	Call Sign	City	State	Service
48290	WRKA	LOUISVILLE	KY	FM

Licensee/Permittee Name	FRN
SM-WJMZ, LLC	0022877278

Fac. ID No.	Call Sign	City	State	Service
1303	WJMZ-FM	ANDERSON	SC	FM

Licensee/Permittee Name	FRN
SM-KPHW, LLC	0022877351

Fac. ID No.	Call Sign	City	State	Service
27424	KPHW	KANEOHE	HI	FM

Licensee/Permittee Name	FRN
SM-KRTR-FM, LLC	0022877336

Fac. ID No.	Call Sign	City	State	Service
50118	KRTR-FM	KAILUA	HI	FM

Licensee/Permittee Name	FRN
SM-WBHJ, LLC	0022877211

Fac. ID No.	Call Sign	City	State	Service
730	WBHJ	MIDFIELD	AL	FM

Licensee/Permittee Name	FRN
SM-WBPT, LLC	0022877245

Fac. ID No.	Call Sign	City	State	Service
5355	WBPT	HOMEWOOD	AL	FM

Licensee/Permittee Name	FRN
SM-KRTR-AM, LLC	0022877294

Fac. ID No.	Call Sign	City	State	Service
13880	KPRP	HONOLULU	HI	AM

Licensee/Permittee Name	FRN
SM-WHZT, LLC	0022877286

Fac. ID No.	Call Sign	City	State	Service
5971	WHZT	WILLIAMSTON	SC	FM

Licensee/Permittee Name	FRN
SM-KKNE, LLC	0022877310

Fac. ID No.	Call Sign	City	State	Service
14937	KKNE	WAIPAHU	HI	AM

Licensee/Permittee Name	FRN
SM-WURV, LLC	0022877468

Fac. ID No.	Call Sign	City	State	Service
37230	WURV	RICHMOND	VA	FM

Licensee/Permittee Name	FRN
SM-WZZK, LLC	0022877203

Fac. ID No.	Call Sign	City	State	Service
48724	WZZK-FM	BIRMINGHAM	AL	FM

Licensee/Permittee Name	FRN
SM-WENN, LLC	0022877252

Fac. ID No.	Call Sign	City	State	Service
6411	WENN	BIRMINGHAM	AL	AM

Licensee/Permittee Name	FRN
SM-WKHK, LLC	0022877450

Fac. ID No.	Call Sign	City	State	Service
319	WKHK	COLONIAL HEIGHTS	VA	FM

Licensee/Permittee Name	FRN
SM-WBHK, LLC	0022877237

Fac. ID No.	Call Sign	City	State	Service
65227	WBHK	WARRIOR	AL	FM

Licensee/Permittee Name	FRN
SM-WSFR, LLC	0022877401

Fac. ID No.	Call Sign	City	State	Service
55499	WSFR	CORYDON	IN	FM

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.

Not Applicable.

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	0023056880	
Entity Name	SummitMedia Member, LLC	
Address	PO Box	
	Street 1	2700 CORPORATE DRIVE
	Street 2	
	City	BIRMINGHAM
	State ("NA" if non-U.S. address)	AL
	Zip/Postal Code	35042
	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 an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information

FRN	0022913453		
Entity Name	J.S. Kelly LLC		
Address	PO Box		
	Street 1	2020 W EL CAMINO AVE	
	Street 2	SUITE 120	
	City	SACRAMENTO	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95833	
	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 from 0.0 to 100.0)	Voting	79.0%	Jointly Held? No
	Equity	79.0%	
	Total assets (Equity Debt Plus)	79.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information

FRN	0022915649		
Name	Jon S. Kelly		
Address	PO Box		
	Street 1	2020 W EL CAMINO AVE	
	Street 2		
	City	SACRAMENTO	
	State ("NA" if non-U.S. address)	CA	

	Zip/Postal Code	95833	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%	Jointly Held? No
	Equity	9.0%	
	Total assets (Equity Debt Plus)	9.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No
(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

<p>(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?</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>	<p>No</p>
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<p>(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?</p> <p>If "Yes," provide the following information for each such the relationship.</p>	<p>No</p>
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<p>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</p> <p>If "Yes," 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.</p>	<p>No</p>
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Certification

Section	Question	Response
<p>Authorized Party to Sign</p>	<p>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 LICENSE --OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).</p>	

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: **BOARD MEMBER**
Exact Legal Title or Name of Respondent:
SUMMITMEDIA MEMBER, LLC
Name: **DARRYL GRONDINES**
Phone: **2053222987**

02/28/2018