

(REFERENCE COPY - Not for submission)

Amendment to a Commercial Broadcast Stations Non-Biennial Ownership Report

File Number: 0000066906 Submit Date: 2019-01-15 FRN: 0022406706

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Amendment Status: Received Status Date:

01/15/2019 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0022406706	SummitMedia, 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 Suite 115	Birmingham	AL	35242	+1 (205) 322-2987	darryl. grondines@summitmediacorp. com

2. Contact Representative

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

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 North 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	Transfer of control or assignment of license/permit	
"As of" date	11/01/2018	
	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.	
Reason for Amendment	Correct Respondent's Name on Certification Page	

5. Licensee(s) /Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee Name		FRN	
	SM-KQCH, LLC	0027762020	

Fac. ID No.	Call Sign	City	State	Service
50314	KQCH	ОМАНА	NE	FM

Licensee/Permittee Name	FRN
SM-WCYQ, LLC	0027762152

Fac. ID No.	Call Sign	City	State	Service	
49923	WCYQ	OAK RIDGE	TN	FM	

Licensee/Permittee Name		FRN	
	SM-KSGF-AM, LLC	0027761907	

Fac. ID No.	Call Sign	City	State	Service
62024	KSGF	SPRINGFIELD	MO	AM

Licensee/Permittee Name	FRN	
SM-KYQQ, LLC	0027761766	

Fac. ID No.	Call Sign	City	State	Service
37121	KYQQ	ARKANSAS CITY	KS	FM

Licensee/Permittee Name	FRN
SM-KFDI, LLC	0027761824

Fac. ID No.	Call Sign	City	State	Service
72357	KFDI-FM	WICHITA	KS	FM

Licensee/Permittee Name	FRN
SM-KSGF-FM, LLC	0027761881

Fac. ID No.	Call Sign	City	State	Service
2924	KSGF-FM	ASH GROVE	MO	FM

Licensee/Permittee Name	FRN
SM-WKHT, LLC	0027762145

Fac. ID No.	Call Sign	City	State	Service
40854	WKHT	KNOXVILLE	TN	FM

Licensee/Permittee Nar	ne		FRN			
SM-WNOX, LLC			0027762137			
Fac. ID No.	Call Sign	City	State	Service		
29741	WNOX	KARNS	TN	FM		
Licensee/Permittee Nar	me	'	FRN			
SM-KICT, LLC			0027761774			
Fac. ID No.	Call Sign	City	State	Service		
63548	KICT-FM	WICHITA	KS	FM		
Licensee/Permittee Nar	me		FRN			
SM-KKCD, LLC			0027762079			
Fac. ID No.	Call Sign	City	State	Service		
74103	KKCD	OMAHA	NE	FM		
Licensee/Permittee Nar	ne		FRN			
SM-KSRZ-FM, LLC			0027762012			
Fac. ID No.	Call Sign	City	State	Service		
50308	KSRZ	ОМАНА	NE	FM		
Licensee/Permittee Nar	ne		FRN	FRN		
SM-KFTI, LLC			0027761808			
Fac. ID No.	Call Sign	City	State	Service		
72356	KFTI	WICHITA	KS	AM		
Licensee/Permittee Nar	me		FRN			
SM-KSPW, LLC			0027761873			
Fac. ID No.	Call Sign	City	State	Service		
10119	KSPW	SPARTA	MO	FM		
Licensee/Permittee Nar	ne		FRN	·		
SM-WWST, LLC			0027762103			
Fac. ID No.	Call Sign	City	State	Service		
i ac. iD No.	Gail Gigil	City	State	Jei vice		

Licensee/Permittee Name	FRN
SM-KXSP, LLC	0027761956

SEVIERVILLE

FM

TN

WWST

29727

Fac. ID No.	Call Sign	City	State	Service
50313	KXSP	ОМАНА	NE	AM

Licensee/Permittee Name	FRN
SM-KTTS, LLC	0027761857

Fac. ID No.	Call Sign	City	State	Service	
62023	KTTS-FM	SPRINGFIELD	МО	FM	

Licensee/Permittee Name	FRN
SM-KEZO-FM, LLC	0027762087

Fac. ID No.	Call Sign	City	State	Service	
74105	KEZO-FM	ОМАНА	NE	FM	

Licensee/Permittee Name	FRN
SM-KFXJ, LLC	0027761782

Fac. ID No.	Call Sign	City	State	Service
37133	KFXJ	AUGUSTA	KS	FM

Licensee/Permittee Name	FRN
SM-KRVI, LLC	0027761923

Fac. ID No.	Call Sign	City	State	Service
55165	KRVI	MOUNT VERNON	МО	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents Licensee/Permittee Respondents 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/Permittee Respondents 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) or Permittee(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) or Permittee(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	0022406706	0022406706	
Entity Name	SummitMedia, LLC	SummitMedia, LLC	
Address	РО Вох		
	Street 1	2700 Corporate Drive	
	Street 2	Suite 115	
	City	Birmingham	
	State ("NA" if non-U.S. address)	AL	
	Zip/Postal Code	35242 United States	
	Country (if non-U.S. address)		
Listing Type	Respondent	Respondent	
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations	Yes

Ownership Information		
FRN	0023056880	
Entity Name	SummitMedia Member, LLC	
Address	PO Box	
	Street 1	2700 Corporate Drive
	Street 2 Suite 115	
	City	Birmingham
	State ("NA" if non-U.S. address)	AL
	Zip/Postal Code	35242
	Country (if non-U.S. United States address)	
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Other - Sole Member of LLC	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	100.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes	

FRN	0019404011		
Name	H. Carl Parmer		
Address	PO Box		
	Street 1	2700 Corporate Drive	
	Street 2	Suite 115	
	City	Birmingham	
	State ("NA" if non-U.S. address)	AL	
	Zip/Postal Code	35242	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Manager		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes
	at any interests, including equinis filing are non-attributable.	ty, financial, or voting	Yes

(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?

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 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)?

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.

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).	

No

No

No

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: Manager Exact Legal Title or Name of Respondent: SummitMedia, LLC Name: H Carl Parmer Phone: 2053222987 01/15/2019
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