



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: **0000087574** | Submit Date: **2019-10-29** | FRN: **0028566578**

Purpose: **Commercial Broadcast Stations Non-Biennial Ownership Report** | Status: **Received** | Status Date:
10/29/2019 | Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0028566578	SMG-Medford, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2448 E. 81st Street, Suite 5500	Tulsa	OK	74137	+1 (918) 492-2660	david.stephens@smgok.com

2. Contact Representative

Name	Organization
Joseph C. Chautin, III.	Hardy, Carey, Chautin, & Balkin, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1080 WEST CAUSEWAY APPROACH	Mandeville	LA	70471	+1 (985) 629-0777	jchautin@hardycarey.com

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
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	09/30/2019 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)
/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
SMG-Medford, LLC	0028566578

Fac. ID No.	Call Sign	City	State	Service
179	K296DA	GRANTS PASS	OR	FX
17570	K284AF	GRANTS PASS	OR	FX
17571	K241AG	GRANTS PASS	OR	FX
17572	K284AE	ASHLAND	OR	FX
17573	KAKT	PHOENIX	OR	FM
33678	KBOY-FM	MEDFORD	OR	FM
57434	KCMX-FM	ASHLAND	OR	FM
57733	KTMT	ASHLAND	OR	AM
60309	K258DB	PHOENIX	OR	FX
60310	K221CP	GRANTS PASS	OR	FX
60311	K227AA	ASHLAND, ETC.	OR	FX
60313	KTMT-FM	MEDFORD	OR	FM
60314	KCMX	PHOENIX	OR	AM
138438	K241CA	ASHLAND	OR	FX
138950	K236CI	MEDFORD	OR	FX

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.

Document Information	
Description of contract or instrument	Articles of Organization
Parties to contract or instrument	State of Oklahoma
Date of execution	05/2019
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity Formation

Document Information	
Description of contract or instrument	Operating Agreement
Parties to contract or instrument	Members
Date of execution	06/2019

Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Governing document

Document Information	
Description of contract or instrument	Term Loan Agreement
Parties to contract or instrument	Spirit Bank
Date of execution	09/2019
Date of expiration	09/2029
Agreement type (check all that apply)	Other Agreement Type: Loan agreement

Document Information	
Description of contract or instrument	Term Loan Security & Pledge Agreement
Parties to contract or instrument	Spirit Bank
Date of execution	09/2019
Date of expiration	09/2029
Agreement type (check all that apply)	Other Agreement Type: Loan related document

Document Information	
Description of contract or instrument	Term Loan Promissory Note
Parties to contract or instrument	Spirit Bank
Date of execution	09/2019
Date of expiration	09/2029
Agreement type (check all that apply)	Other Agreement Type: Loan related document

Document Information	
Description of contract or instrument	Revolving Loan Agreement
Parties to contract or instrument	Spirit Bank
Date of execution	09/2019
Date of expiration	09/2020
Agreement type (check all that apply)	Other Agreement Type: Loan Agreement

Document Information	
Description of contract or instrument	Revolving Loan Security & Pledge Agreement
Parties to contract or instrument	Spirit Bank
Date of execution	09/2019
Date of expiration	09/2020

Agreement type (check all that apply)	Other Agreement Type: Loan related document
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Document Information	
Description of contract or instrument	Revolving Loan Promissory Note
Parties to contract or instrument	Spirit Bank
Date of execution	09/2019
Date of expiration	09/2020
Agreement type (check all that apply)	Other Agreement Type: Loan related document

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	0028566578		
Entity Name	SMG-Medford, LLC		
Address	PO Box		
	Street 1	2448 E. 81st Street, Suite 5500	
	Street 2		
	City	Tulsa	
	State ("NA" if non-U.S. address)	OK	
	Zip/Postal Code	74137	
	Country (if non-U.S. address)	United States	
Listing Type	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 an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information			
FRN	0028567022		
Entity Name	SMG-Oregon, LLC		
Address	PO Box		
	Street 1	2448 E. 81st Street, Suite 5500	
	Street 2		
	City	Tulsa	
	State ("NA" if non-U.S. address)	OK	
	Zip/Postal Code	74137	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	99.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	99.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0019455039		
Entity Name	The Stephens Family Limited Partnership		
Address	PO Box		
	Street 1	2448 E. 81st Street, Suite 5500	
	Street 2		
	City	Tulsa	
	State ("NA" if non-U.S. address)	OK	
	Zip/Postal Code	74137	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	1.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	1.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information

FRN	0019435387		
Name	David P. Stephens		
Address	PO Box		
	Street 1	2448 E. 81st Street, Suite 5500	
	Street 2		
	City	Tulsa	
	State ("NA" if non-U.S. address)	OK	
	Zip/Postal Code	74137	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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?			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
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<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: **Manager**
Exact Legal Title or Name of Respondent:
SMG-Medford, LLC
Name: **David P Stephens**
Phone: **9184922660**

10/29/2019