

#### (REFERENCE COPY - Not for submission)

FRN

0024369167

Not Applicable

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

File Number: 0000091465 Submit Date: 2019-11-26 FRN: 0007575582 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/26/2019 Filing Status: Active

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

John C. Webb Revocable Trust

#### 1. Respondent

**Entity Name** 

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
c/o M. Malmborg - Duram Jones 1104 East Country Hills Dr. Suite 710	Ogden	UT	84403	+1 (801) 564- 1126	mattwebb@kbzn com

#### 2. Contact Representative

Name	Organization
David D. Oxenford	Wilkinson Barker Knauer, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW Suite 800N	washington	DC	20036	+1 (202) 783- 4141	doxenford@wbklaw. com

## 3. Application

**Filing Fee** 

#### 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	Other Trust		

(b) Provide the following information about this report:

Purpose Biennial
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"As of" date

#### 10/01/2019

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) and Station(s)

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

Licensee/Permittee Name				FRN		
Capital Broadcasting, Inc.			00077	0007705866		
Fac. ID No. Call Sign City				State	Service	
8690	KBZN	SALT LAKE CITY		UT	FM	
Licensee/Permittee Name				FRN		
KLO Broadcasting, Inc.			00075	0007575582		
Fac. ID No.	Call Sign	City	:	State	Service	
35069	KLO	OGDEN		UT	AM	
88483	KSQN	COALVILLE		UT	FM	

#### 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	0024369167			
Entity Name	John C. Webb Revocable Trust			
Address	PO Box			
	Street 1	c/o M. Malmborg - Duram Jones		
	Street 2	1104 East Country Hills Dr. Suite 710		
	City	Ogden		
	State ("NA" if non-U.S. address)	UT		
	Zip/Postal Code	84403		
	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?			

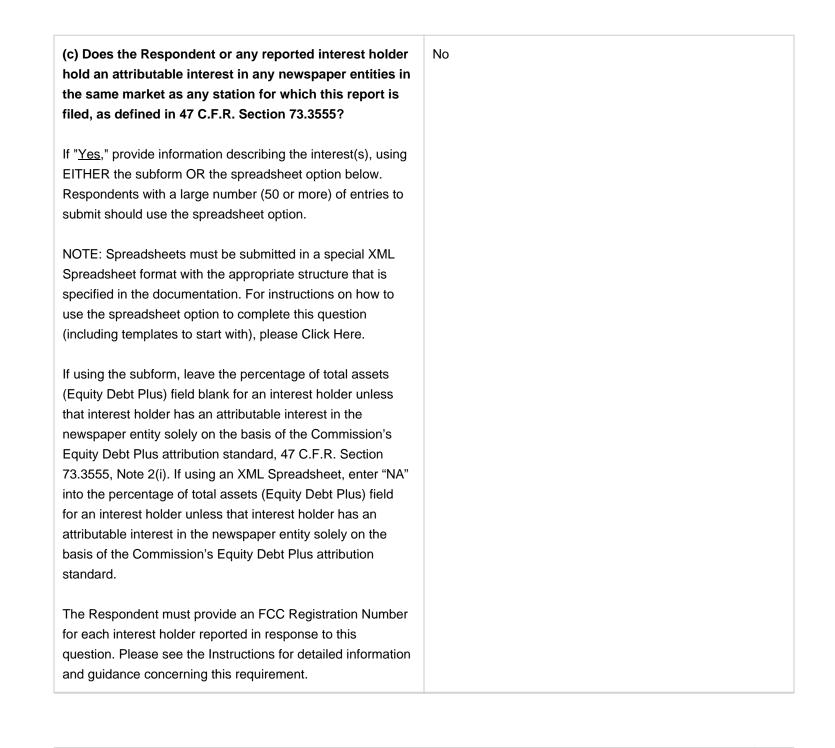
#### **Ownership Information**

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FRN	0023887730	0023887730		
Name	Matthew Webb			
Address	PO Box			
	Street 1	257 E. 200 South		
	Street 2	Suite 400		
	City	Salt Lake City		
	State ("NA" if non-U.S. address)	UT		
	Zip/Postal Code	84111		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Other - Trustee			
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	Voting	50.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	50.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast static that do not appear on this report?			Yes

Ownership Information				
FRN	0019982560			
Name	Sharon M. Webb	Sharon M. Webb		
Address	PO Box			
	Street 1	257 E. 200 South		
	Street 2	Suite 400		
	City	Salt Lake City		
	State ("NA" if non-U.S. address)	UT		
	Zip/Postal Code	84111		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Other - Trustee	Other - Trustee		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	50.0%		
	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	

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

Family Relationships					
FRN	0023887730	Name	Matthew Webb		
FRN	0019982560	Name	Sharon M Webb		
Relationship Parent/Child					

# (e) Is Respondent seeking an attribution exemption for any officer or director with<br/>duties wholly unrelated to the Licensee(s)?NoIf "Yes," complete the information in the required fields and submit an Exhibit fully describing<br/>that individual's duties and responsibilities, and explaining why that individual should not be<br/>attributed an interest.No

Certification

Section

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: <b>Trustee</b> Exact Legal Title or Name of Respondent: <b>John C. Webb Revocable Trust</b> Name: <b>Richard C Webb</b> Phone: <b>8015641126</b> 11/26/2019