Response

No



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

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

File Number:0000093939Submit Date:2019-12-23FRN:0026867119Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:12/23/2019Filing Status:Active

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

### 1. Respondent

FRN	Entity Name
0026867119	Universal Stations LLC

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
726 EXCHANGE STREET	BUFFALO	NY	14210	+1 (716) 332-9575	miles. mason@pillsburylaw. com

### 2. Contact Representative

Name	Organization	
Miles S. Mason	Pillsbury Winthrop Shaw Pittman LLP	

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

### 3. Application Filing Fee

# Question

Is this application being submitted without a filing fee?

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	1	95	\$70.00
			•	·	Total	\$70.00

# 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	Biennial
"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	
Universal Stations LLC			0026867119	
Fac. ID No.	Call Sign	City	State	Service
37805	WBWD	ISLIP	NY	AM

## 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.

Document Information			
Description of contract or instrument	LIMITED LIABILITY AGREEMENT		
Parties to contract or instrument	MEMBERS		
Date of execution	09/2017		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: LIMITED LIABILITY AGREEMENT		

**Document Information** 

Description of contract or instrument	CERTIFICATE OF FORMATION
Parties to contract or instrument	STATE OF DELAWARE
Date of execution	05/2017
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: CERTIFICATE OF FORMATION

### 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	0026867119			
Entity Name	Universal Stations LLC			
Address	PO Box			
	Street 1	726 EXCHANGE STREET		
	Street 2			
	City	BUFFALO		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	14210		
	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	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		

Ownership Information

	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an	No		

that do not appea	ar on this r	report?
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Ownership Information			
FRN	0017012808		
Name	Sandra Miller	Sandra Miller	
Address	PO Box		
	Street 1	726 EXCHANGE STREET	
	Street 2	SUITE 410	
	City	BUFFALO	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14210	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Other - Manager		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Race White	
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	1
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			

### **Ownership Information**

FRN	9990021074	
Name	Charles W. Banta	
Address	PO Box	
	Street 1	726 EXCHANGE STREET
	Street 2	SUITE 410
	City	BUFFALO
	State ("NA" if non-U.S. address)	NY

	Zip/Postal Code	14210	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Manager		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have	an attributable interest in one o	or more broadcast stations	Yes

that do not appear on this report?

Ownership Information			
FRN	0027277300		
Entity Name	Mercury New York Fund LP		
Address	PO Box	PO Box	
	Street 1	726 EXCHANGE STREET	
	Street 2		
	City	BUFFALO	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	ip/Postal Code 14210	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (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	Voting	100.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	100.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			

Ownership Information			
FRN	9990021082		
Name	William Saurer, Jr.		
Address	PO Box		
	Street 1	726 EXCHANGE STREET	
	Street 2	SUITE 410	
	City	BUFFALO	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14210	
	Country (if non-U.S.     United States       address)     United States		
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.If "No," submit as an exhibit an explanation.			

(c) Does the Respondent or any reported interest holder 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?	
med, as defined in 47 C.F.K. 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 No 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)?	No
If " <u>Yes</u> ," 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.	

3. Organizational Chart (Licensees Only) Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

File Name	Uploaded By	Attachment Type	Description
Biennial Ownership Report Universal Stations LLC Ownership Structure.	Applicant	Ownership	Ownership
pdf		Chart	Chart

### **Section III - Certification**

### 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).	
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>Manager</b> Exact Legal Title or Name of Respondent: <b>Universal Stations LLC</b> Name: <b>Sandra A. Miller</b> Phone: <b>7163329575</b> 12/23/2019