



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000102969** | Submit Date: **2020-01-30** | FRN: **0020140109**

Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **01/30/2020**

Filing Status: **Active**

Section I - General Information

1. Respondent

FRN		Entity Name			
0020140109		37th Avenue Group LLC			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
121 Powder Cap Ct.	Cle Elum	WA	98922-3144	+1 (206) 790-5405	gsmith0605@msn.com

2. Contact Representative

Name		Organization			
Gregg P. Skall, Esq.		Womble Bond Dickinson (US) LLP			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1200 19th Street, N.W. Suite 500	Washington	DC	20036	+1 (202) 857-4441	gregg.skall@wbd-us.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	10/01/2019 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
Sunnylands Broadcasting, LLC	0020104782

Fac. ID No.	Call Sign	City	State	Service
14056	KGAY	THOUSAND PALMS	CA	AM
140747	K237FR	TUMWATER	WA	FX
140751	K291CD	CENTRALIA	WA	FX
140886	K226BT	INDIO	CA	FX
142725	K253CG	REDMOND	WA	FX
157713	K293CL	THOUSAND PALMS	CA	FX
191492	KHCV	MECCA	CA	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	0020140109	
Entity Name	37th Avenue Group LLC	
Address	PO Box	
	Street 1	121 Powder Cap Ct.
	Street 2	

	<div>City</div> <div>Cle Elum</div>		
	<div>State ("NA" if non-U.S. address)</div> <div>WA</div>		
	<div>Zip/Postal Code</div> <div>98922-3144</div>		
	<div>Country (if non-U.S. address)</div> <div>United States</div>		
<div>Listing Type</div>	<div>Respondent</div>		
<div>Positional Interests</div> <div>(check all that apply)</div>	<div>Respondent</div>		
<div>Tribal Nation or Tribal Entity</div>	<div>Interest holder is not a Tribal nation or Tribal entity</div>		
<div>Interest Percentages</div> <div>(enter percentage values from 0.0 to 100.0)</div>	<div>Voting</div> <div>0.0%</div> <div>Jointly Held?</div> <div>No</div>		
	<div>Equity</div> <div>0.0%</div>		
	<div>Total assets (Equity Debt Plus)</div> <div>0.0%</div>		
<div>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</div>			<div>No</div>

Ownership Information

<div>FRN</div>	<div>0007122393</div>				
<div>Name</div>	<div>Gregory J. Smith</div>				
<div>Address</div>	<div>PO Box</div>				
	<div>Street 1</div>	<div>121 Powder Cap Ct.</div>			
	<div>Street 2</div>				
	<div>City</div>	<div>Cle Elum</div>			
	<div>State ("NA" if non-U.S. address)</div>	<div>WA</div>			
	<div>Zip/Postal Code</div>	<div>98922-3144</div>			
	<div>Country (if non-U.S. address)</div>	<div>United States</div>			
<div>Listing Type</div>	<div>Other Interest Holder</div>				
<div>Positional Interests</div> <div>(check all that apply)</div>	<div>LC/LLC/PLLC Member, Other - Manager</div>				
<div>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</div>	<div>Citizenship</div>	<div>US</div>			
	<div>Gender</div>	<div>Male</div>			
	<div>Ethnicity</div>	<div>Not Hispanic or Latino</div>			
	<div>Race</div>	<div>White</div>			
<div>Interest Percentages</div> <div>(enter percentage values from 0.0 to 100.0)</div>	<div>Voting</div>	<div>50.0%</div>	<div>Jointly Held?</div> <div>No</div>		
	<div>Equity</div>	<div>1.0%</div>			

	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	0020140125		
Name	Carol J. Smith		
Address	PO Box		
	Street 1	115 5th Ave. S	
	Street 2	Apt 4	
	City	Kirkland	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98033	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Other - Manager		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	50.0%	Jointly Held? No
	Equity	1.0%	
	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?			No

Ownership Information		
FRN	0020140133	
Name	Patricia Thurman	
Address	PO Box	
	Street 1	121 Powder Cap Ct.
	Street 2	
	City	Cle Elum
	State ("NA" if non-U.S. address)	WA

	Zip/Postal Code	98922-3144	
	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	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	16.0%	
	Total assets (Equity Debt Plus)	16.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0020140158		
Name	Angela Koplan		
Address	PO Box		
	Street 1	121 Powder Cap Ct.	
	Street 2		
	City	Cle Elum	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98922-3144	
	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	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	16.0%	

	Total assets (Equity Debt Plus)	16.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information			
FRN	0020140166		
Name	Walter Smith		
Address	PO Box		
	Street 1	121 Powder Cap Ct.	
	Street 2		
	City	Cle Elum	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98922-3144	
	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	0.0%	Jointly Held? No
	Equity	16.0%	
	Total assets (Equity Debt Plus)	16.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information		
FRN	0020140190	
Name	Gwyn Schneider	
Address	PO Box	
	Street 1	121 Powder Cap Ct.
	Street 2	
	City	Cle Elum
	State ("NA" if non-U.S. address)	WA

	Zip/Postal Code	98922-3144	
	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	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	16.0%	
	Total assets (Equity Debt Plus)	16.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0020140216		
Name	Denise DeBlieck		
Address	PO Box		
	Street 1	121 Powder Cap Ct.	
	Street 2		
	City	Cle Elum	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98922-3144	
	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	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	16.0%	

	Total assets (Equity Debt Plus)	16.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information			
FRN	0020140224		
Name	Russell Smith		
Address	PO Box		
	Street 1	121 Powder Cap Ct.	
	Street 2		
	City	Cle Elum	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98922-3144	
	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	0.0%	Jointly Held? No
	Equity	16.0%	
	Total assets (Equity Debt Plus)	16.0%	
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 "<u>Yes</u>," 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>	No
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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 "<u>Yes</u>," provide the following information for each such the relationship.</p>	Yes
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Family Relationships			
FRN	0020140158	Name	Angela Koplan
FRN	0020140190	Name	Gwyn Schneider
Relationship	Siblings		

Family Relationships			
FRN	0020140125	Name	Carol J Smith
FRN	0020140166	Name	Walter Smith
Relationship	Parent/Child		

Family Relationships			
FRN	0020140216	Name	Denise DeBlieck
FRN	0020140224	Name	Russell Smith
Relationship	Siblings		

Family Relationships			
FRN	0007122393	Name	Gregory J Smith
FRN	0020140133	Name	Patricia Thurman
Relationship	Parent/Child		

Family Relationships			
FRN	0020140133	Name	Patricia Thurman
FRN	0020140190	Name	Gwyn Schneider
Relationship	Siblings		

Family Relationships			
FRN	0007122393	Name	Gregory J Smith
FRN	0020140224	Name	Russell Smith
Relationship	Parent/Child		

Family Relationships			
FRN	0007122393	Name	Gregory J Smith
FRN	0020140166	Name	Walter Smith
Relationship	Parent/Child		

Family Relationships			
FRN	0020140125	Name	Carol J Smith
FRN	0020140133	Name	Patricia Thurman
Relationship	Parent/Child		

Family Relationships			
FRN	0020140133	Name	Patricia Thurman
FRN	0020140216	Name	Denise DeBlieck
Relationship	Siblings		

Family Relationships			
FRN	0020140166	Name	Walter Smith
FRN	0020140224	Name	Russell Smith
Relationship	Siblings		

Family Relationships			
FRN	0020140133	Name	Patricia Thurman
FRN	0020140158	Name	Angela Koplan
Relationship	Siblings		

Family Relationships			
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FRN	0020140125	Name	Carol J Smith
FRN	0020140216	Name	Denise DeBlieck
Relationship	Parent/Child		

Family Relationships			
FRN	0020140158	Name	Angela Koplan
FRN	0020140224	Name	Russell Smith
Relationship	Siblings		

Family Relationships			
FRN	0020140125	Name	Carol J Smith
FRN	0020140158	Name	Angela Koplan
Relationship	Parent/Child		

Family Relationships			
FRN	0020140190	Name	Gwyn Schneider
FRN	0020140224	Name	Russell Smith
Relationship	Siblings		

Family Relationships			
FRN	0007122393	Name	Gregory J Smith
FRN	0020140190	Name	Gwyn Schneider
Relationship	Parent/Child		

Family Relationships			
FRN	0020140125	Name	Carol J Smith
FRN	0020140224	Name	Russell Smith
Relationship	Parent/Child		

Family Relationships			
FRN	0020140133	Name	Patricia Thurman
FRN	0020140166	Name	Walter Smith
Relationship	Siblings		

Family Relationships			
FRN	0020140133	Name	Patricia Thurman
FRN	0020140224	Name	Russell Smith
Relationship	Siblings		

Family Relationships			
FRN	0020140158	Name	Angela Koplan

FRN	0020140216	Name	Denise DeBlieck
Relationship	Siblings		
Family Relationships			
FRN	0020140166	Name	Walter Smith
FRN	0020140216	Name	Denise DeBlieck
Relationship	Siblings		
Family Relationships			
FRN	0020140158	Name	Angela Koplan
FRN	0020140166	Name	Walter Smith
Relationship	Siblings		
Family Relationships			
FRN	0020140190	Name	Gwyn Schneider
FRN	0020140216	Name	Denise DeBlieck
Relationship	Siblings		
Family Relationships			
FRN	0020140125	Name	Carol J Smith
FRN	0020140190	Name	Gwyn Schneider
Relationship	Parent/Child		
Family Relationships			
FRN	0007122393	Name	Gregory J Smith
FRN	0020140216	Name	Denise DeBlieck
Relationship	Parent/Child		
Family Relationships			
FRN	0020140166	Name	Walter Smith
FRN	0020140190	Name	Gwyn Schneider
Relationship	Siblings		
Family Relationships			
FRN	0007122393	Name	Gregory J Smith
FRN	0020140158	Name	Angela Koplan
Relationship	Parent/Child		

<p>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</p> <p>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.</p>	No
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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 LICENSE --OR 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.	<p>Official Title: Manager Exact Legal Title or Name of Respondent: 37th Avenue Group LLC Name: Gregory J. Smith Phone: 2067905405</p> <p>01/30/2020</p>