

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000102181** Submit Date: **2020-01-30** FRN: **0025884016**

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
0028285294	WSIL License, LLC

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 909	Quincy	IL	62306	+1 (217) 223- 5100	bdreasler@quincymedia.

2. Contact Representative

Name		Organization		
	Elizabeth E. Spainhour	Brooks, Pierce et al.		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
150 Fayetteville Street Suite 1700	Raleigh	NC	27601	+1 (919) 839- 0300	espainhour@brookspierce. com

3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	No

Fees

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAT	2	95	\$140.00
				Total	\$140.00

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	
WSIL License, LLC	0028285294	

Fac. ID No.	Call Sign	City	State	Service
73998	KPOB-TV	POPLAR BLUFF	MO	DTV
73999	WSIL-TV	HARRISBURG	IL	DTV
74000	K10KM-D	CAPE GIRARDEAU	МО	LPT

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	ABC Network Affiliation Agreement		
Parties to contract or instrument	ABC Television Network		
Date of execution	06/2018		
Date of expiration	12/2022		

Agreement type	Network Affiliation Agreement
(check all that apply)	

Document Information		
Description of contract or instrument	Articles of Organization	
Parties to contract or instrument	State of Missouri	
Date of execution	12/2018	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Organization	

Document Information		
Description of contract or instrument	H&I Network Affiliation Agreement	
Parties to contract or instrument	H&I Network	
Date of execution	03/2019	
Date of expiration	12/2022	
Agreement type (check all that apply)	Network Affiliation Agreement	

Document Information			
Description of contract or instrument	Court TV Network Affiliation Agreement		
Parties to contract or instrument	Court TV Network		
Date of execution	01/2019		
Date of expiration	04/2024		
Agreement type (check all that apply)	Network Affiliation Agreement		

Document Information		
Description of contract or instrument	Justice Network Affiliation Agreement	
Parties to contract or instrument	Justice Network	
Date of execution	01/2019	
Date of expiration	04/2023	
Agreement type (check all that apply)	Network Affiliation Agreement	

Document Information		
Description of contract or instrument	ION Media Network Affiliation Agreement	
Parties to contract or instrument	ION Media Network	
Date of execution	01/2019	
Date of expiration	04/2021	
Agreement type (check all that apply)	Network Affiliation Agreement	

Document Information			
Description of contract or instrument	Fourth Amendment to Credit Agreement		
Parties to contract or instrument	Wells Fargo Bank, NA as Administrative Agent		
Date of execution	02/2019		
Date of expiration	11/2022		
Agreement type (check all that apply)	Other Agreement Type: Fourth Amendment to Credit Agreement		

Document Information		
Description of contract or instrument	Third Amended and Restated Pledge Agreement	
Parties to contract or instrument	Wells Fargo Bank, NA and Suntrust Bank, NA	
Date of execution	11/2015	
Date of expiration	11/2022	
Agreement type (check all that apply)	Other Agreement Type: Third Amended and Restated Pledge Agreement	

Document Information		
Description of contract or instrument	Third Amended and Restated Security Agreement	
Parties to contract or instrument	Wells Fargo Bank, NA and Suntrust Bank, NA	
Date of execution	11/2015	
Date of expiration	11/2022	
Agreement type (check all that apply)	Other Agreement Type: Third Amended and Restated Security Agreement	

Document Information		
Description of contract or instrument	Third Amended and Restated Credit Agreement	
Parties to contract or instrument	Wells Fargo Bank, NA and Suntrust Bank, NA	
Date of execution	11/2015	
Date of expiration	11/2022	
Agreement type (check all that apply)	Other Agreement Type: Third Amended and Restated Credit Agreement	

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	0028285294			
Entity Name	WSIL License, LLC	WSIL License, LLC		
Address	PO Box 909			
	Street 1			
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62306		
	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			
(enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No	

Ownership Information			
FRN	0028285252		
Entity Name	WSIL Television, Inc.		
Address	PO Box 909		
	Street 1 Street 2		
	City Quincy		
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code 62306		

	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (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 from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No	
	Equity	100.0%		
	Total assets (Equity Debt Plus)	%		
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations	No	

Ownership Information				
FRN	0019430776			
Name	Bradley G. Eaton			
Address	РО Вох			
	Street 1	3750 Deer Ridge Road		
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. IL address)			
	Zip/Postal Code	62305		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer	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)	bt %		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	Yes	

FRN	0019430651		
Name	Harold B. Oakley		
Address	PO Box		
	Street 1	222 S. 16th Street	
	Street 2		
	City	Quincy	
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code 62301		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (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)	Debt %	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	0019430735		
Name	Ralph M. Oakley		
Address	PO Box		
	Street 1	2824 Carnoustie Lane	
	Street 2 City Quincy		
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code	62301	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US			
	Gender	Male	Male		
	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 that do not appear on this	an attributable interest in one creport?	or more broadcast stations	Yes		

Ownership Information				
FRN	0019430750			
Name	Thomas A. Oakley			
Address	РО Вох	О Вох		
	Street 1	935 Country Club Drive West		
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62301		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (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?		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt % Plus)			
Does interest holder have a	an attributable interest in one o	r more broadcast stations	Yes	

Ownership Information	
FRN	0019430719

Name	Mary O. Winters			
Address	РО Вох			
	Street 1	136 Emery Drive		
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62301		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer	Officer		
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	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	%		
Does interest holder have hat do not appear on this	an attributable interest in one o	r more broadcast stations	Yes	
•	at any interests, including equi	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

No

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?

Yes

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

Family Relationships				
FRN	0019430719	Name	Mary O Winters	
FRN	0019430735	Name	Ralph M Oakley	
Relationship	Siblings			

Family Relationships				
FRN	0019430750	Name	Thomas A Oakley	
FRN	0019430719	Name	Mary O Winters	
Relationship	Parent/Child			

Family Relationships			
FRN	0019430750	Name	Thomas A Oakley
FRN	0019430735	Name	Ralph M Oakley
Relationship	Parent/Child		

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
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.	

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
Organizational Chart.pdf	Applicant	Ownership Chart	Organizational 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: President Exact Legal Title or Name of Respondent: WSIL License, LLC Name: Ralph M. Oakley Phone: 2172235100 01/30/2020