

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000102676 | Submit Date: 2020-01-30 | FRN: 0023962665

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
0023207095	CNZ Communications, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
PO Box 1756	Pacifc Palisades	CA	90272	+1 (310) 573-1600	randynonberg@cnzcommunications.

2. Contact Representative

Name	Organization
Kathleen A. Kirby	Wiley Rein LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1776 K. Street N.W.	Washington DC	DC	20006	+1 (202) 719-3360	kkirby@wileyrein.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)

Licensee/Permittee Name	FRN
Caballero Acquisition LLC	0014625362

Fac. ID No.	Call Sign	City	State	Service
167838	KMMD-CD	SALINAS	CA	DCA

Licensee/Permittee Name	FRN
Milwaukee Media LLC	0023962665

Fac. ID No.	Call Sign	City	State	Service
35091	WMKE-CD	MILWAUKEE	WI	DCA
60571	WIWN	FOND DU LAC	WI	DTV

Licensee/Permittee Name	FRN
Caballero III, LLC	0028638583

Fac. ID No.	Call Sign	City	State	Service
17830	KGMM-CD	SAN ANTONIO	TX	DCA

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	0023207095

Entity Name	CNZ Communications, LLC		
Address	РО Вох	1756	
	Street 1		
	Street 2		
	City	Pacifc Palisades	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90272	
	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?
rom 0.0 to 100.0)	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	or more broadcast stations	Yes

FRN 0019517481 Name Terrence E. Crosby Address PO Box 1756 Street 1 Street 2 City Pacific Palisades State ("NA" if non-U.S. address) CA Zip/Postal Code 90272 Country (if non-U.S. address) United States Listing Type Other Interest Holder Positional Interests (check all that apply) Officer, Other - Manager Citizenship, Gender, Ethnicity, and Race Information (Natural of Natural of Nat	Ownership Information			
Address PO Box 1756 Street 1 Street 2 City Pacific Palisades State ("NA" if non-U.S. address) Zip/Postal Code 90272 Country (if non-U.S. address) United States Listing Type Other Interest Holder Positional Interests (check all that apply) Citizenship, Gender, Ethnicity, and Race Citizenship US	FRN	0019517481	0019517481	
Street 1 Street 2 City Pacific Palisades State ("NA" if non-U.S. address) Zip/Postal Code 90272 Country (if non-U.S. address) United States Citizenship, Gender, Ethnicity, and Race City Pacific Palisades CA United States United States United States	Name	Terrence E. Crosby	Terrence E. Crosby	
Street 2 City Pacific Palisades State ("NA" if non-U.S. address) Zip/Postal Code 90272 Country (if non-U.S. address) United States Characteristic Palisades Characteris	Address	РО Вох	1756	
City Pacific Palisades State ("NA" if non-U.S. address) Zip/Postal Code 90272 Country (if non-U.S. address) Listing Type Other Interest Holder Positional Interests (check all that apply) Citizenship, Gender, Ethnicity, and Race CA United States United States United States		Street 1		
State ("NA" if non-U.S. address) Zip/Postal Code 90272 Country (if non-U.S. address) Listing Type Other Interest Holder Positional Interests (check all that apply) Citizenship, Gender, Ethnicity, and Race CA United States United States		Street 2		
address) Zip/Postal Code 90272 Country (if non-U.S. address) Listing Type Other Interest Holder Positional Interests (check all that apply) Citizenship, Gender, Ethnicity, and Race Citizenship US		City	Pacific Palisades	
Country (if non-U.S. address) Listing Type Other Interest Holder Positional Interests (check all that apply) Citizenship, Gender, Ethnicity, and Race United States United States United States		_	CA	
Listing Type Other Interest Holder Positional Interests (check all that apply) Citizenship, Gender, Ethnicity, and Race Other Interest Holder US		Zip/Postal Code	90272	
Positional Interests (check all that apply) Citizenship, Gender, Ethnicity, and Race Officer, Other - Manager US			United States	
(check all that apply) Citizenship, Gender, Ethnicity, and Race Citizenship US	Listing Type	Other Interest Holder		
Ethnicity, and Race		Officer, Other - Manager		
	-	Citizenship	US	
	Information (Natural	Gender	Male	
Persons Only) Ethnicity Not Hispanic or Latino	Persons Only)	Ethnicity	Not Hispanic or Latino	

	Race	White	
Interest Percentages (enter percentage values	Voting	62.5%	Jointly Held? No
from 0.0 to 100.0)	Equity	62.5%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information				
FRN	0019517515			
Name	Randy E. Nonberg			
Address	РО Вох	1756		
	Street 1			
	Street 2			
	City	Pacific Palisades		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	90272		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, 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 that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	No	

Ownership Information		
FRN	0025746124	
Entity Name	Nonberg Family Trust	
Address	РО Вох	1756
	Street 1	

	Street 2		
	City	Pacific Palisades	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90272	
	Country (if non-U.S. address)	United States	
Listing Type Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member Interest holder is not a Tribal nation or Tribal entity		
Tribal Nation or Tribal Entity			
Interest Percentages (enter percentage values	Voting	37.5%	Jointly Held? No
from 0.0 to 100.0)	Equity	37.5%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes
• •	nat any interests, including equi	ty, financial, or voting	Yes
Interests, not reported in t	his filing are non-attributable.		

(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 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.

No

(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?

No

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 "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.

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: Vice President Exact Legal Title or Name of Respondent: CNZ Communications LLC Name: David Nonberg Phone: 3105731600 01/30/2020
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