

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

FRN

0024799025

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

File Number:0000100930Submit Date:2020-01-28FRN:0024799025Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:01/28/2020Filing Status:Active

# **Section I - General Information**

KAUZ License Subsidiary, LLC

### 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
2131 Ayrsley Town	Charlotte	NC	28273	+1 (704) 643- 4148	thenson@ayrsley. com
Boulevard Suite 300					

#### 2. Contact Representative

Name	Organization
Daniel A. Kirkpatrick	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 North 17th Street 11th Floor	Arlington	VA	22209	+1 (703) 812-0432	kirkpatrick@fhhlaw.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	1	95	\$70.00
		·	·	1	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
KAUZ License Subsidiary, LLC	0024799025

Fac. ID No.	Call Sign	City	State	Service
6864	KAUZ-TV	WICHITA FALLS	тх	DTV

# 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	Certificate of Formation		
Parties to contract or instrument	State of Delaware		
Date of execution	07/2015		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Corporate Organizational Document		

#### **Document Information**

Description of contract or instrument	Operating Agreement
Parties to contract or instrument	KAUZ, LLC
Date of execution	07/2015
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Corporate Organizational Document

#### **Document Information**

Description of contract or instrument	Affiliation Agreement (CBS)
Parties to contract or instrument	CBS Affiliate Relations
Date of execution	07/2019
Date of expiration	12/2021
Agreement type (check all that apply)	Network Affiliation Agreement

#### **Document Information**

Description of contract or instrument	The CW Plus Station Affiliation Agreement
Parties to contract or instrument	The CW Network, LLC
Date of execution	08/2017
Date of expiration	09/2020
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information		
Description of contract or instrument	ION Network Affiliation Agreement	
Parties to contract or instrument	ION Media	
Date of execution	07/2018	
Date of expiration	07/2020	
Agreement type (check all that apply)	Network Affiliation 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	0024799025	0024799025	
Entity Name	KAUZ License Subsidiary, LL	KAUZ License Subsidiary, LLC	
Address	PO Box		
	Street 1	2131 Ayrsley Town Boulevard	Ŀ
	Street 2	Suite 300	
	City	Charlotte	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28273	
	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 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 Debt Plus)	0.0%	
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?		

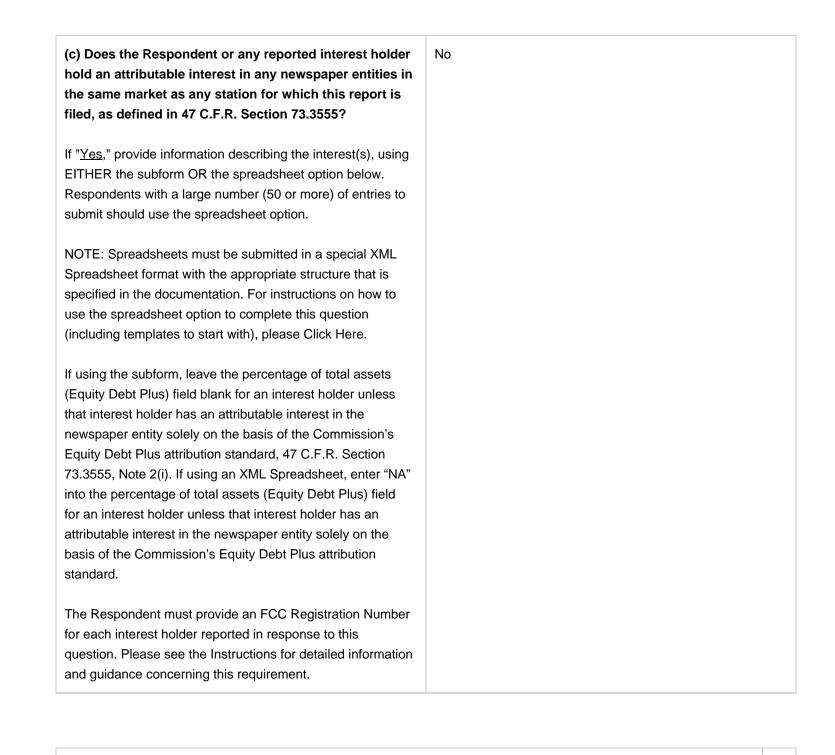
# Ownership Information

FRN	0024798993	
Entity Name	KAUZ, LLC	
Address	PO Box	
	Street 1	2131 Ayrsley Town Blvd
	Street 2	Suite 300
	City	Charlotte
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code 28273	
	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 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 o report?	r more broadcast stations	No

#### **Ownership Information** FRN 0019264381 Name Thomas B. Henson, Esq. Address **PO Box** Street 1 2131 Ayrsley Town Blvd Street 2 Suite 300 Charlotte City State ("NA" if non-U.S. NC address) **Zip/Postal Code** 28273 Country (if non-U.S. **United States** address) Listing Type Other Interest Holder **Positional Interests** Other - Manager (check all that apply) Citizenship, Gender, US Citizenship Ethnicity, and Race Gender Male **Information (Natural** Persons Only) Not Hispanic or Latino Ethnicity White Race **Interest Percentages** Voting 0.0% **Jointly Held?** (enter percentage values 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?

(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.YesIf "No," submit as an exhibit an explanation.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 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
2020 ASM Org Chart.pdf	Applicant	Ownership Chart	Ownership Org 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>KAUZ License Subsidiary, LLC</b> Name: <b>Thomas B Henson</b> Phone: <b>7046434148</b> 01/28/2020