

FRN

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

File Number:0000174535Submit Date:2021-11-30FRN:0004331096Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:11/30/2021Filing Status:Active

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

### 1. Respondent

Entity Name

0001584465		Sinclair Television Media, Inc.					
Street	City (and Cou	ntry if non U.	State ("NA" if non-U.S.	Zip			

Address	S. address)	address)	Zip Code	Phone	Email
C/O Miles S. Mason, Pillsbury Winthrop Shaw Pittman LLP 1200 Seventeenth Street, NW	Washington	DC	20036	+1 (202) 663-8195	miles. mason@pillsburylaw. com

### 2. Contact Representative

Name	Organization		
Miles S. Mason	Pillsbury Winthrop Shaw Pittman LLP		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1200 Seventeenth Street, NW	Washington	DC	20036	+1 (202) 663- 8195	miles.mason@pillsburylaw. 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	For-profit corporation				
(b) Provide the following information about this report:					

 Purpose
 Biennial

### "As of" date

### 10/01/2021

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
SINCLAIR EUGENE LICENSEE, LLC	0023174535

Fac. ID No.	Call Sign	City	State	Service
49750	KCBY-TV	COOS BAY	OR	DTV
49754	K21MB-D	SCOTTSBURG	OR	LPT
49759	K15KB-D	SQUAW VALLEY	OR	LPT
49762	K33CP-D	GOLD BEACH	OR	LPT
49766	KVAL-TV	EUGENE	OR	DTV
182753	K35MT-D	PORT ORFORD	OR	LPT
190070	K21LY-D	MAPLETON	OR	LPT

Licensee/I	Permittee Name	FRN
SINCLAIR	R BOISE LICENSEE, LLC	0023174428

Fac. ID No.	Call Sign	City	State	Service
49760	KBOI-TV	BOISE	ID	DTV
190303	KYUU-LD	BOISE	ID	LPD

Licensee/Permittee Name	FRN
SINCLAIR LEWISTON LICENSEE, LLC	0023174568

Fac. ID No.	Call Sign	City	State	Service
56032	KLEW-TV	LEWISTON	ID	DTV

Licensee/Permittee Name	FRN
SINCLAIR BAKERSFIELD LICENSEE, LLC	0023174451

Fac. ID No.	Call Sign	City	State	Service
4148	KBAK-TV	BAKERSFIELD	СА	DTV
51501	KBFX-CD	BAKERSFIELD	CA	DCA

Licensee/Permittee Name		FRN
SINCLAIR LAGRANDE LICENSEE, LLC		0023174584

Fac. ID No.	Call Sign	City	State	Service
34882	KUNP-LD	PORTLAND	OR	LPD
81447	KUNP	LA GRANDE	OR	DTV

Licensee/Permittee Name	FRN
SINCLAIR YAKIMA LICENSEE, LLC	0023174543

Fac. ID No.	Call Sign	City	State	Service
56029	KEPR-TV	PASCO	WA	DTV
56033	KIMA-TV	YAKIMA	WA	DTV

Licensee/Permittee Name	FRN
SINCLAIR SEATTLE LICENSEE, LLC	0023174477

Fac. ID No.	Call Sign	City	State	Service
4624	KUNS-TV	BELLEVUE	WA	DTV
21656	KOMO-TV	SEATTLE	WA	DTV

Licensee/Permittee Name	FRN
SINCLAIR PORTLAND LICENSEE, LLC	0023174519

Fac. ID No.	Call Sign	City	State	Service
21648	K08PZ-D	CORVALLIS	OR	LPT
21649	KATU	PORTLAND	OR	DTV
21650	K26DB-D	ASTORIA	OR	LPT
21651	K35LD-D	PRINEVILLE	OR	LPT
21653	K20NL-D	GRAYS RIVER, LEBAM	WA	LPT
21657	K18HH-D	THE DALLES	OR	LPT
21660	K32NK-D	LINCOLN CITY, ETC.	OR	LPT
21662	K34PJ-D	TILLAMOOK	OR	LPT

Licensee/Permittee Name	FRN
SINCLAIR KENNEWICK LICENSEE, LLC	0023174600

Fac. ID No.	Call Sign	City	State	Service
25358	KVVK-CD	KENNEWICK, ETC.	WA	DCA
71072	KORX-CD	WALLA WALLA	WA	DCA
167797	KUNW-CD	ΥΑΚΙΜΑ	WA	DCA

Licensee/Permittee Name	FRN
South West Oregon Television Broadcasting Corporation	0006335509

Fac. ID No.	Call Sign	City	State	Service
61547	K13HM-D	MYRTLE CREEK	OR	LPT
61548	K26HO-D	GLIDE	OR	LPT
61551	KPIC	ROSEBURG	OR	DTV
61552	K11GH-D	TRI CITIES, ETC	OR	LPT
190502	K29KR-D	CAMAS VALLEY	OR	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.

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.

FRN	0001584465		
Entity Name	Sinclair Television Media, Inc.		
Address	PO Box		
	Street 1	C/O Miles S. Mason, Pillsbury Winthrop Shaw Pittman LLP	
	Street 2	1200 Seventeenth Street, NW	
	City	Washington	
	State ("NA" if non-U.S. address)	DC	
	Zip/Postal Code	20036	
	Country (if non-U.S. address)	United States	

#### Ownership Information

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%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an that do not appear on this re	n attributable interest in one o port?	r more broadcast stations	No

Ownership Information			
FRN	0008701088		
Entity Name	Sinclair Television of Seattle, I	nc.	
Address	PO Box		
	Street 1	C/O Miles S. Mason, Pillsbury	Winthrop Shaw Pittman LLP
	Street 2	1200 Seventeenth Street, NW	
	City	Washington	
	State ("NA" if non-U.S. address)		
	Zip/Postal Code		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
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 No that do not appear on this report?			

Ownership Information			
FRN	9990100944		
Name	Christopher Ripley		
Address	PO Box		
	Street 1	10706 Beaver Dam Road	

	Street 2		
	City	Hunt Valley	
	State ("NA" if non-U.S. address)	MD	
	Zip/Postal Code	21030	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director		
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	attributable interest in one or port?	more broadcast stations	Yes

<b>Ownership Information</b>	
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FRN	0019412915		
Name	Lucy Rutishauser		
Address	PO Box		
	Street 1	10706 Beaver Dam Road	
	Street 2		
	City	Hunt Valley	
	State ("NA" if non-U.S. address)	MD	
	Zip/Postal Code	21030	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director		
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 from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast s that do not appear on this report?		more broadcast stations	Yes

### **Ownership Information**

FRN			
Name			
Address	PO Box		
	Street 1	10706 Beaver Dam Road	
	Street 2		
	City	Hunt Valley	
	State ("NA" if non-U.S. address)	MD	
	Zip/Postal Code	21030	
	Country (if non-U.S. address)	United States	
Listing Type	sitional Interests Officer		
Positional Interests (check all that apply)			
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 a	an attributable interest in one o	r more broadcast stations	Yes

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
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 No duties wholly unrelated to the Licensee(s)?

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.

Certificatio	n

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>President and CEO, Sinclair</b> <b>Broadcast Group, Inc.</b> Exact Legal Title or Name of Respondent: <b>Sinclair Television Media, Inc.</b> Name: <b>Christopher S. Ripley</b> Phone: <b>4105681500</b>
		11/30/2021