

(REFERENCE COPY - Not for submission)

FRN

0022406706

Not Applicable

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000169277
 Submit Date:
 2021-11-17
 FRN:
 0022406706

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 11/17/2021

 Filing Status:
 Active
 Status:
 Status
 Status Date:
 11/17/2021

Section I - General Information

1. Respondent

Entity Name SummitMedia, LLC

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
2700 Corporate Drive Suite 115	Birmingham	AL	35242	+1 (205) 322-2987	darryl. grondines@summitmediacorp. com

2. Contact Representative

Name		Organization				
	Francisco R. Montero, ESQ.	Fletcher, Heald & Hildreth, PLC				

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N 17th Street 11th Floor	Arlington	VA	22209	+1 (703) 812-0400	montero@fhhlaw.com

3. Application Filing Fee

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	10/01/2021
	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			
SM-KQCH, LLC				0027	762020		
Fac. ID No.	Call Sign City			St	ate	Service	
50314	KQCH		ОМАНА	N	E	FM	
Licensee/Permittee Name	•		FRN				
SM-WCYQ, LLC				0027	762152		
Fac. ID No.	Call Sign	Cit	у		State	Service	
49923	WCYQ	OA	AK RIDGE		TN	FM	
Licensee/Permittee Name	•			FRN			
SM-WAGG, LLC					877096		
Fac. ID No.	Call Sign	City			State	Service	
48717	WAGG		MINGHAM		AL	AM	
Licensee/Permittee Name	•			FRN 0022877443			
SWI-WRER, LEG				0022011445			
Fac. ID No.	Call Sign	С	ity	:	State	Service	
71330	WKLR	F	ORT LEE	VA		FM	
Licensee/Permittee Name	•			FRN			
SM-WNOX, LLC				0027762137			
Fac. ID No.	Call Sign		City	State		Service	
29741	WNOX		KARNS	T	١	FM	
Licensee/Permittee Name	•			FRN			
SM-WVEZ, LLC				0022	877393		
Fac. ID No.	Call Sign	City			State	Service	
53595	WVEZ	ST. MA	ATTHEWS		KY	FM	
Licensee/Permittee Name				FRN			
SM-KINE, LLC					877377		
Fac. ID No.	Call Sign	Ci	tv		Service		
34553	KINE-FM		ONOLULU		State HI	FM	
Licensee/Permittee Name	· •			FRN			

SM-WRKA, LLC				002	2877385	
Fac. ID No.	Call Sign	City			State	Service
48290	WRKA	LOU	ISVILLE		KY	FM
Licensee/Permittee I	Name			FRN	1	
SM-KICT, LLC				002	7761774	
Fac. ID No.	Call Sign		Sity		State	Service
63548	KICT-FM		WICHITA		KS	FM
Licensee/Permittee I	Name			FRN		
SM-KPHW, LLC				002	2877351	
Fac. ID No.	Call Sign	City	/		State	Service
27424	KPHW	KA	NEOHE		н	FM
Licensee/Permittee I	Name			FRN	l	
SM-KRTR-FM, LLC				002	2877336	
Fac. ID No.	Call Sign		City		State	Service
50118	KRTR-FM		KAILUA		н	FM
Licensee/Permittee I	Name			FRN	1	
SM-KSRZ-FM, LLC				002	7762012	
	Call Sime		2 :4.		N -1-	Convior
Fac. ID No. 50308	Call Sign KSRZ		City OMAHA		State	Service FM
Licensee/Permittee I	Name			FRN	l	
SM-KFTI, LLC				002	7761808	
Fac. ID No.	Call Sign	C	ity		State	Service
72356	KFTI	V	VICHITA		KS	AM
Licensee/Permittee I	Name			FRN	I	
SM-KRTR-AM, LLC				002	2877294	
Fac. ID No.	Call Sign	City			State	Service
13880	KPRP		IOLULU		н	AM
Licensee/Permittee I SM-WHZT, LLC	Name			FRN	2877286	
				002	2011200	
Fac. ID No.	Call Sign	City			State	Service

5971	WHZT	WILLIAMSTON				S	С	FM	
Licensee/Permittee Nam	e				FRN	I			
SM-KKNE, LLC	•					28773	10		
Fac. ID No.	Call Sign		City	/		State		Service	
14937	KKNE		WA	AIPAHU		HI		AM	
Licensee/Permittee Nam	e				FRN	I			
SM-WZZK, LLC					002	28772	03		
Fac. ID No.	Call Sign		City			S	tate	Service	
48724	WZZK-FM		BIRN	/INGHAM		A	AL.	FM	
Licensee/Permittee Nam	e				FRN	l			
SM-KTTS, LLC					002	77618	57		
					002				
Fac. ID No.	Call Sign		City			S	tate	Service	
62023	KTTS-FM		SPRI	NGFIELD		Ν	ЛO	FM	
Licensee/Permittee Nam	e				FRN	l			
SM-KEZO-FM, LLC					002	77620	87		
Fac. ID No.	Call Sign			City		State		Service	
Fac. ID No. 74105	Call Sign KEZO-FM			City OMAHA		State		Service FM	
	KEZO-FM				FRN	NE			
74105	KEZO-FM				FRN	NE			
74105 Licensee/Permittee Nam SM-WKHK, LLC	KEZO-FM				FRN	NE	50	FM	
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No.	KEZO-FM	City		OMAHA	FRN	NE	50 State	FM Servic	:e
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No.	KEZO-FM		DNIAL H		FRN	NE	50	FM	:e
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No. 319	кеzо-FM e Call Sign WKHK		NIAL F	OMAHA	FRN 002	NE 1 28774	50 State	FM Servic	:e
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No.	кеzо-FM e Call Sign WKHK		DNIAL H	OMAHA	FRN 002	NE 1 28774	50 State VA	FM Servic	:e
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No. 319 Licensee/Permittee Nam	кеzо-FM e Call Sign WKHK		NIAL F	OMAHA	FRN 002	NE 1 28774	50 State VA	FM Servic	:e
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No. 319 Licensee/Permittee Nam	кеzо-FM e Call Sign WKHK		DNIAL F	OMAHA	FRN 002	NE 1 28774	50 State VA	FM Servic	:e
74105 Licensee/Permittee Name SM-WKHK, LLC Fac. ID No. 319 Licensee/Permittee Name SM-WBHK, LLC	e Call Sign WKHK		City	OMAHA	FRN 002	NE 28774	50 State VA	FM Servic	:e
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No. 319 Licensee/Permittee Nam SM-WBHK, LLC Fac. ID No.	KEZO-FM call Sign WKHK e Call Sign WBHK		City	OMAHA HEIGHTS	FRN 002	NE 28774 28772 28772 State AL	50 State VA	FM Service	e
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No. 319 Licensee/Permittee Nam SM-WBHK, LLC Fac. ID No. 65227	KEZO-FM call Sign WKHK e Call Sign WBHK		City	OMAHA HEIGHTS	FRN 002 FRN 002	NE 28774 28772 28772 State AL	50 State VA	FM Service	e
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No. 319 Licensee/Permittee Nam SM-WBHK, LLC Fac. ID No. 65227 Licensee/Permittee Nam	KEZO-FM call Sign WKHK e Call Sign WBHK e	COLO	City WA	OMAHA HEIGHTS	FRN 002 FRN 002	NE 28774 28772 28772 State AL 77619	50 State VA	FM Service	
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No. 319 Licensee/Permittee Nam SM-WBHK, LLC Fac. ID No. 65227 Licensee/Permittee Nam SM-KRVI, LLC Fac. ID No. SM-KRVI, LLC	KEZO-FM KEZO-FM Call Sign Call Sign WKHK e Call Sign Call Sign	COLO	City WA	OMAHA	FRN 002 FRN 002	NE 28774 28772 28772 State AL	50 State VA 37 37 23 23 State	FM Service FM Service	
74105 Licensee/Permittee Nam SM-WKHK, LLC Fac. ID No. 319 Licensee/Permittee Nam SM-WBHK, LLC Fac. ID No. 65227 Licensee/Permittee Nam SM-KRVI, LLC	KEZO-FM call Sign WKHK e Call Sign WBHK e	COLO	City WA	OMAHA HEIGHTS	FRN 002 FRN 002	NE 28774 28772 28772 State AL	50 State VA 37 32 23	FM Service FM FM	

SM-WSFR, LLC				00228	77401	
Fac. ID No.	Call Sign	C	City	S	tate	Service
55499	WSFR		CORYDON	I	N	FM
Licensee/Permittee Name	·			FRN		
SM-WQNU, LLC	•			00228	77419	
Fac. ID No.	Call Sign		City	Sta		Service
20332	WQNU		LYNDON	K		FM
Licensee/Permittee Name	•			FRN		
SM-KSGF-AM, LLC				00277	61907	
Fac. ID No.	Call Sign	City			State	Service
62024	KSGF	SPI	RINGFIELD		МО	AM
Licensee/Permittee Name	•			FRN		
SM-KYQQ, LLC				00277	61766	
Fac. ID No.	Call Sign	City			State	Service
37121	KYQQ	ARKA	NSAS CITY		KS	FM
Licensee/Permittee Name	\			FRN		
SM-KFDI, LLC				00277	61824	
Fac. ID No.	Call Sign		City			Service
72357	KFDI-FM		WICHITA	K	S	FM
Licensee/Permittee Name	•			FRN		
SM-KSGF-FM, LLC				00277	61881	
Fac. ID No.	Call Sign	(City		State	Service
2924	KSGF-FM		ASH GROVE		MO	FM
Licensee/Permittee Name)			FRN		
SM-KCCN, LLC				00228	77369	
	0-11-01-0		0.11		01-1	0
Fac. ID No. 34552	Call Sign KCCN-FM		City		State HI	Service FM
UTUUL					· · ·	
Licensee/Permittee Name	•			FRN		
SM-WKHT, LLC				00277	62145	
Fac. ID No.	Call Sign	С	ity	5	State	Service

40854	WKHT	KN	KNOXVILLE		TN		FM
Licensee/Permittee Name				FRN	1		
SM-WZNN, LLC	0022877195						
Fac. ID No.	Call Sign	City				State	Service
71417	WPYA	GAR	DENDALE			AL	FM
Licensee/Permittee Name				FRN	ı		
SM-WHTI, LLC				002	287	77435	
Fac. ID No.	Call Sign	С	ity		St	ate	Service
27439	WJSR	L	AKESIDE		V	A	FM
Licensee/Permittee Name				FRN	1		
SM-KKCD, LLC				002	776	62079	
					_		
Fac. ID No.	Call Sign		City		Stat	e	Service
74103	KKCD		OMAHA		NE		FM
Licensee/Permittee Name				FRN	1		
SM-WJMZ, LLC				002	287	77278	
Fac. ID No.	Call Sign	(City			State	Service
1303	WJMZ-FM		ANDERSON			SC	FM
Licensee/Permittee Name				FRN	ı		
SM-KSPW, LLC				002	2776	61873	
Fac. ID No.	Call Sign		City		Sta	te	Service
10119	KSPW		SPARTA		МС	D	FM
Licensee/Permittee Name				FRN	1		
SM-WWST, LLC						62103	
	0-11 0:	0:::::				01-1-	Operation
Fac. ID No.	Call Sign	City				State	Service
29727	WWST	SEV	/IERVILLE			TN	FM
Licensee/Permittee Name				FRN	I		
SM-KXSP, LLC				002	2776	61956	
	Call Sign		City		24-4	•	Sorvico
Fac. ID No.	Call Sign		City		Stat		Service
50313	KXSP		ОМАНА		NE		AM
Licensee/Permittee Name				FRN	1		

SM-WBHJ, LLC			0022	2877211		
Fac. ID No.	Call Sign	City		State	Service	
730	WBHJ	MIDFIELD		AL	FM	
Licensee/Permittee Name			FRN			
SM-WBPT, LLC				2877245		
Fac. ID No.	Call Sign	City		State	Service	
5355	WBPT	HOMEWOOD		AL	FM	
Licensee/Permittee Name			FRN			
SM-WURV, LLC			0022	2877468		
Fac. ID No.	Call Sign	City		State	Service	
37230	WURV	RICHMOND		VA	FM	
Licensee/Permittee Name			FRN			
SM-WENN, LLC			0022877252			
Fac. ID No.	Call Sign	City		State	Service	
6411	WENN	BIRMINGHAM		AL	АМ	
Licensee/Permittee Name			FRN			
SM-KFXJ, LLC			0027	761782		
Fac. ID No.	Call Sign	City		State	Service	
37133	KFXJ	AUGUSTA		KS	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	0022406706								
Entity Name	SummitMedia, LLC	SummitMedia, LLC							
Address	PO Box	PO Box							
	Street 1	Street 1 2700 Corporate Drive							
	Street 2								
	City								
	State ("NA" if non-U.S. address)	AL							
	Zip/Postal Code	35242							
	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? No						
from 0.0 to 100.0)	Equity	0.0%							
	Total assets (Equity Debt0.0%Plus)								
Does interest holder have that do not appear on this	an attributable interest in one c report?	r more broadcast stations	No						

Ownership Information		
FRN	0019404011	
Name	H. Carl Parmer	
Address	PO Box	
	Street 1	2700 CORPORATE DRIVE
	Street 2	SUITE 115
	City	BIRMINGHAM
	State ("NA" if non-U.S. address)	AL

	Zip/Postal Code	35242		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - Manger			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	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)	0.0%		
Does interest holder have	an attributable interest in one o	or more broadcast stations	No	

that do not appear on this report?

Ownership Information			
FRN	0023056880		
Entity Name	SummitMedia Member, LLC		
Address	PO Box		
	Street 1	1 2700 CORPORATE DRIVE	
	Street 2 SUITE 115		
	City BIRMINGHAM		
	State ("NA" if non-U.S. address)	non-U.S. AL	
	Zip/Postal Code	35242	
	Country (if non-U.S. address)	United States	
Listing Type	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	Voting	100.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	100.0%	
	Total assets (Equity Debt Plus)	100.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in	1
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.	

(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 " \underline{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.	

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: Manager Exact Legal Title or Name of Respondent: SummitMedia, LLC Name: Carl Parmer Phone: 2053222987 11/17/2021