



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: **0000198642** | Submit Date: **2022-08-30** | FRN: **0032111601**
Purpose: **Commercial Broadcast Stations Non-Biennial Ownership Report** | Status: **Received** | Status Date:
08/30/2022 | Filing Status: **Active**

Section I - General Information

1. Respondent

FRN		Entity Name			
0032111601		Imagicom Holdings, LLC			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3000 WorldReach Drive	Indian Land	SC	29707	+1 (803) 578-1418	grichardson@imagicom.com

2. Contact Representative

Name		Organization			
Burt A. Braverman, Esq.		Davis Wright Tremaine LLP			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1301 K Street, N.W. Suite 500 East	Washington	DC	20005	+1 (202) 973-4210	burtbraverman@dwt.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	Transfer of control or assignment of license/permit
"As of" date	08/01/2022 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)
/Permittees(s)
and Station(s)
/Permit(s)

Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/Permittee Name	FRN
Imagicommm Tulsa, LLC	0032111452

Fac. ID No.	Call Sign	City	State	Service
11910	KOKI-TV	TULSA	OK	DTV
54420	KMYT-TV	TULSA	OK	DTV

Licensee/Permittee Name	FRN
Imagicommm Yakima, LLC	0032111379

Fac. ID No.	Call Sign	City	State	Service
12729	KFFX-TV	PENDLETON	OR	DTV
58685	KBWU-LD	RICHLAND, ETC.,	WA	LPD
58694	KCYU-LD	YAKIMA	WA	LPD
58695	K34MZ-D	PROSSER	WA	LPT

Licensee/Permittee Name	FRN
Imagicommm Spokane, LLC	0032111403

Fac. ID No.	Call Sign	City	State	Service
58684	KAYU-TV	SPOKANE	WA	DTV
58687	K19AU-D	OMAK, OKANOGAN, ETC.	WA	LPT
58689	K31AH-D	OMAK, ETC	WA	LPT
58691	K09UP-D	COLVILLE	WA	LPT
58696	K19BY-D	GRANGEVILLE, ETC,	ID	LPT
168364	K27NC-D	COEUR D'ALENE	ID	LPT
189692	K33LW-D	SANDPOINT	ID	LPT
198068	K18LH-D	LEWISTON	ID	LPT

Licensee/Permittee Name	FRN
Imagicommm Medford, LLC	0032111353

Fac. ID No.	Call Sign	City	State	Service
32958	KMVU-DT	MEDFORD	OR	DTV
129027	K26NB-D	KLAMATH FALLS	OR	LPT
130086	K32LQ-D	YREKA	CA	LPT
130106	KFBI-LD	MEDFORD	OR	LPD
130825	K31GP-D	BROOKINGS, ETC.	OR	LPT
168366	K34NO-D	GRANTS PASS	OR	LPT

Licensee/Permittee Name	FRN
Imagicom Alexandria, LLC	0032111288

Fac. ID No.	Call Sign	City	State	Service
52907	KLAX-TV	ALEXANDRIA	LA	DTV

Licensee/Permittee Name	FRN
Imagicom Yuma, LLC	0032111304

Fac. ID No.	Call Sign	City	State	Service
33639	KYMA-DT	YUMA	AZ	DTV

Licensee/Permittee Name	FRN
Imagicom Memphis, LLC	0032111486

Fac. ID No.	Call Sign	City	State	Service
12521	WHBQ-TV	MEMPHIS	TN	DTV

Licensee/Permittee Name	FRN
Imagicom Syracuse, LLC	0032111395

Fac. ID No.	Call Sign	City	State	Service
15567	WNYS-CD	ITHACA	NY	DCA
40758	WSYT	SYRACUSE	NY	DTV

Licensee/Permittee Name	FRN
Imagicom Greenwood, LLC	0032111239

Fac. ID No.	Call Sign	City	State	Service
43203	WABG-TV	GREENWOOD	MS	DTV
181137	WNBD-LD	GREENWOOD	MS	LPD
181144	WXVT-LD	CLEVELAND	MS	LPD

Licensee/Permittee Name	FRN
Imagicom Idaho Falls, LLC	0032111338

Fac. ID No.	Call Sign	City	State	Service
1259	K13UF-D	REXBURG	ID	LPD
1266	K32LS-D	DRIGGS	ID	LPT
1270	KPVI-DT	POCATELLO	ID	DTV
189407	K19KY-D	POCATELLO	ID	LPT

Licensee/Permittee Name	FRN
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Imagicomm Eureka, LLC	0032111254
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Fac. ID No.	Call Sign	City	State	Service
42631	KVIQ-LD	EUREKA	CA	LPD
53379	K07GJ-D	HOOPA	CA	LPT
53381	K02OD-D	SHELTER COVE	CA	LPT
53382	KIEM-TV	EUREKA	CA	DTV

Licensee/Permittee Name	FRN
Imagicomm Binghamton, LLC	0032111312

Fac. ID No.	Call Sign	City	State	Service
62210	WICZ-TV	BINGHAMTON	NY	DTV

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee/Permittee Respondents 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/Permittee Respondents 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) or Permittee(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) or Permittee(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	0032111601	
Entity Name	Imagicomm Holdings, LLC	
Address	PO Box	
	Street 1	3000 WorldReach Drive
	Street 2	
	City	Indian Land

	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29707	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	9990150046		
Name	Charles David Cerullo		
Address	PO Box		
	Street 1	3000 WorldReach Drive	
	Street 2		
	City	Indian Land	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29707	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information		
FRN	9990150047	
Name	Dale S. Ardizzone	
Address	PO Box	
	Street 1	3000 WorldReach Drive
	Street 2	

	City	Indian Land	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29707	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	9990150048		
Name	Robert I. Brace		
Address	PO Box		
	Street 1	3000 WorldReach Drive	
	Street 2		
	City	Indian Land	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29707	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information		
FRN	0032357071	
Entity Name	MediaComm, Inc.	
Address	PO Box	
	Street 1	9700 Southern Pine Blvd.

	Street 2		
	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		
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Owner, Stockholder		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	100.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.			Yes

<p>(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?</p> <p>If "<u>Yes</u>," 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.</p> <p>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.</p> <p>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.</p> <p>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.</p>	No
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(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 " <u>Yes</u> ," 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.	

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 LICENSE --OR 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: Imagicomm Holdings, LLC Name: Charles D Cerullo Phone: 8035781418 08/30/2022