



(REFERENCE COPY - Not for submission)

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

File Number: **0000229068** | Submit Date: **2023-11-29** | FRN: **0028267938**  
Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **11/29/2023**  
Filing Status: **Active**

Section I - General Information

1. Respondent

FRN		Entity Name			
0029384880		AIF IX (PMC Equity AIV), LP			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
9 West 57th Street 42nd Floor	New York	NY	10019	+1 (212) 515-3200	jloimm@apollo.com

2. Contact Representative

Name		Organization			
Michael D. Basile		Cooley LLP			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1299 Pennsylvania Avenue, NW Suite 700	Washington	DC	20004	+1 (202) 776-2556	mdbasile@cooley.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 partnership

(b) Provide the following information about this report:	
Purpose	Biennial
"As of" date	10/01/2023  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
CMG Radio Operating Company, LLC	0028275006

Fac. ID No.	Call Sign	City	State	Service
14244	WHIO	DAYTON	OH	AM
14245	WHKO	DAYTON	OH	FM
15649	WZLR	XENIA	OH	FM
73908	WHIO-FM	PLEASANT HILL	OH	FM

Licensee/Permittee Name	FRN
Broadcasting Licenses, Limited Partnership	0006281562

Fac. ID No.	Call Sign	City	State	Service
8241	KEVU-CD	EUGENE	OR	DCA
8246	K30BN-D	COOS BAY	OR	LPD
8257	K19GH-D	EUGENE, ETC.	OR	DCA
8302	K32FI-D	YONCALLA	OR	LPD
8306	K14GW-D	CORVALLIS	OR	LPD
8312	K14MQ-D	COOS BAY	OR	LPD
8316	K33NY-D	ROSEBURG	OR	LPD
8318	K35MS-D	CANYONVILLE, ETC	OR	LPD
8322	KLSR-TV	EUGENE	OR	DTV

Licensee/Permittee Name	FRN
WPXI, LLC	0014361083

Fac. ID No.	Call Sign	City	State	Service
73910	WPXI	PITTSBURGH	PA	DTV

Licensee/Permittee Name	FRN
Teton Opco Corp.	0032028300

Fac. ID No.	Call Sign	City	State	Service
6463	WFXT	BOSTON	MA	DTV

Licensee/Permittee Name	FRN
WFTV, LLC	0014359285

Fac. ID No.	Call Sign	City	State	Service
55454	WRDQ	ORLANDO	FL	DTV

72076	WFTV	ORLANDO	FL	DTV
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Licensee/Permittee Name			FRN	
Miami Valley Broadcasting Corporation			0001842509	

Fac. ID No.	Call Sign	City	State	Service
41458	WHIO-TV	DAYTON	OH	DTV

Licensee/Permittee Name			FRN	
Cox Television Jacksonville, LLC			0022027601	

Fac. ID No.	Call Sign	City	State	Service
11909	WFOX-TV	JACKSONVILLE	FL	DTV

Licensee/Permittee Name			FRN	
WSOC Television, LLC			0001842491	

Fac. ID No.	Call Sign	City	State	Service
12793	WAXN-TV	KANNAPOLIS	NC	DTV
74070	WSOC-TV	CHARLOTTE	NC	DTV

Licensee/Permittee Name			FRN	
CMG NY/Texas Radio, LLC			0029118726	

Fac. ID No.	Call Sign	City	State	Service
34976	KISS-FM	SAN ANTONIO	TX	FM
34977	KSMG	SEGUIN	TX	FM
37235	WBLI	PATCHOGUE	NY	FM
48718	KCYY	SAN ANTONIO	TX	FM
48723	KKYX	SAN ANTONIO	TX	AM
50029	KONO	SAN ANTONIO	TX	AM
50030	KONO-FM	HELOTES	TX	FM
70357	KTKX	TERRELL HILLS	TX	FM
71199	WBAB	BABYLON	NY	FM
72176	WHFM	SOUTHAMPTON	NY	FM

Licensee/Permittee Name			FRN	
KIRO-TV, Inc.			0014361620	

Fac. ID No.	Call Sign	City	State	Service
66781	KIRO-TV	SEATTLE	WA	DTV
66786	K26OZ-D	EVERETT	WA	LPD

Licensee/Permittee Name	FRN
Georgia Television, LLC	0022439848

Fac. ID No.	Call Sign	City	State	Service
23960	WSB-TV	ATLANTA	GA	DTV

Licensee/Permittee Name	FRN
Cox Radio, LLC	0029120201

Fac. ID No.	Call Sign	City	State	Service
1178	WDUV	NEW PORT RICHEY	FL	FM
1218	WRFC	ATHENS	GA	AM
3078	WXKT	MAYSVILLE	GA	FM
9801	KJSR	TULSA	OK	FM
10343	WCFB	DAYTONA BEACH	FL	FM
11709	WGAU	ATHENS	GA	AM
11710	WSBB-FM	DORAVILLE	GA	FM
23443	WOEX	ORLANDO	FL	FM
23444	WMMO	ORLANDO	FL	FM
28894	WHJX	PONTE VEDRA BEACH	FL	FM
40408	WFEZ	MIAMI	FL	FM
47102	KRMG-FM	SAND SPRINGS	OK	FM
48374	WGMG	CRAWFORD	GA	FM
48716	WWKA	ORLANDO	FL	FM
48722	KWEN	TULSA	OK	FM
48726	WDBO	ORLANDO	FL	AM
48728	WALR-FM	PALMETTO	GA	FM
48729	KRMG	TULSA	OK	AM
51120	WPUP	WATKINSVILLE	GA	FM
51986	WHPT	SARASOTA	FL	FM
53590	WJGL	JACKSONVILLE	FL	FM
53601	WOKV	JACKSONVILLE	FL	AM
53602	WEZI	JACKSONVILLE	FL	FM
59970	WSRV	GAINESVILLE	GA	FM
60810	WNGC	ARCADE	GA	FM
65764	KRAV-FM	TULSA	OK	FM
66013	WTBV	ST. PETERSBURG	FL	FM
70863	WAPE-FM	JACKSONVILLE	FL	FM

71418	WEDR	MIAMI	FL	FM
72081	WOKV-FM	ATLANTIC BEACH	FL	FM
72982	WHQT	CORAL GABLES	FL	FM
72984	WFLC	MIAMI	FL	FM
73977	WSB	ATLANTA	GA	AM
73978	WSB-FM	ATLANTA	GA	FM
74199	WXGL	ST. PETERSBURG	FL	FM
74200	WWRM	TAMPA	FL	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	0029384880	
Entity Name	AIF IX (PMC Equity AIV), LP	
Address	PO Box	
	Street 1	9 West 57th Street
	Street 2	42nd Floor
	City	New York
	State ("NA" if non-U.S. address)	NY

	<b>Zip/Postal Code</b>	10019	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Respondent		
<b>Positional Interests</b> (check all that apply)	Respondent		
<b>Tribal Nation or Tribal Entity</b>	Interest holder is not a Tribal nation or Tribal entity		
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>	0.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			No

<b>Ownership Information</b>			
<b>FRN</b>	0029384831		
<b>Entity Name</b>	AP IX (PMC) VoteCo, LLC		
<b>Address</b>	<b>PO Box</b>		
	<b>Street 1</b>	9 West 57th Street	
	<b>Street 2</b>	42nd Floor	
	<b>City</b>	New York	
	<b>State ("NA" if non-U.S. address)</b>	NY	
	<b>Zip/Postal Code</b>	10019	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	General Partner		
<b>Tribal Nation or Tribal Entity</b>	Interest holder is not a Tribal nation or Tribal entity		
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	100.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>	0.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			No

<b>(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.</b> If "No," submit as an exhibit an explanation.	Yes
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<b>(c) 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?</b>	No
If " <u>Yes</u> ," provide the following information for each such the relationship.	

<b>(d) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b>	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: <b>Officer of the General Partner</b> Exact Legal Title or Name of Respondent: <b>AIF IX (PMC Equity AIV), L.P.</b> Name: <b>Aaron Sobel</b> Phone: <b>2125153200</b>  11/29/2023