

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

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

File Number:0000225357Submit Date:2023-11-08FRN:0026784025Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:11/09/2023Filing Status:Active

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

#### 1. Respondent

# FRN Entity Name 0026784025 EMG2, LLC

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
61043 Longview Lane	Cove	OR	97824	+1 (541) 786-5223	randy@elkhornmediagroup. com

#### 2. Contact Representative

Name	Organization	
Mark Lipp	Fletcher, Helad & Hildreth, PLC	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812-0400	lipp@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	MAR	6	95	\$570.00
		<u>,</u>	·	<u>~</u>	Total	\$570.00

## 4. Nature of Respondent

(a) Provide the following information about the Responder	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	10/01/2023
	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
	EMG2, LLC	0026784025

Fac. ID No.	Call Sign	City	State	Service
643	КТІХ	PENDLETON	OR	AM
644	КЖНТ	PENDLETON	OR	FM
12511	KTEL	WALLA WALLA	WA	АМ
57756	KUMA	PENDLETON	OR	АМ
57757	KWVN-FM	PENDLETON	OR	FM
166045	KUMA-FM	PILOT ROCK	OR	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.

Document Information		
Description of contract or instrument	Articles of Organization	
Parties to contract or instrument	EMG2, LLC, Randolph McKone, Debra McKone	

Date of execution	11/2016
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Articles of Organization

#### 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	0026784025	0026784025		
Entity Name	EMG2, LLC			
Address PO Box				
	Street 1	61043 Longview Lane		
	Street 2			
	City	Cove		
	State ("NA" if non-U.S. address)	OR		
	Zip/Postal Code	97824		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal r	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%		

No

#### Ownership Information

Does interest holder have an attributable interest in one or more broadcast stations

Ownership Information			
FRN	0019286590	0019286590	
Name	Randy McKone		
Address	PO Box		
	Street 1	61043 Longview Lane	
	Street 2		
	City	Cove	
	State ("NA" if non-U.S. address)	OR	
	Zip/Postal Code	97824	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
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 from 0.0 to 100.0)	Voting	70.0%	Jointly Held? No
	Equity	70.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have	an attributable interest in one c	r more broadcast stations	Yes

that do not appear on this report?

FRN	0020592796	0020592796	
Name	Debra McKone	Debra McKone	
Address	PO Box		
	Street 1	61043 Longview Lane	
	Street 2		
	City	Cove	
	State ("NA" if non-U.S. address)	OR	
	Zip/Postal Code	97824	
	Country (if non-U.S. address)	United States	

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	30.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	30.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations Ye that do not appear on this report?			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.	

(c) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

#### Family Relationships

FRN	0019286590	Name	Randy McKone
FRN	0020592796	Name	Debra McKone
Relationship	Spouses		

(d) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," 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.

Licensee has no parent entity.

#### **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>Managing Member</b> Exact Legal Title or Name of Respondent: <b>EMG2, LLC</b> Name: <b>Randy McKone</b> Phone: <b>5417865223</b> 11/08/2023