



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial  
Ownership Report (FCC Form 323)

File Number: 0000045154 | Submit Date: 2018-02-28 | FRN: 0025010240

Purpose: Commercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 02/28/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0027151984		2016 BLR Annuity Trust-B			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
c/o Sheldon Bonovitz Duane Morris LLP 30 South 17th Street	Philadelphia	PA	19103-4196	+1 (202) 303-1141	mjones@willkie.com

2. Contact Representative

Name		Organization			
Michael Jones		Willkie Farr & Gallagher LLP			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1875 K Street, N.W.	Washington	DC	20006	+1 (202) 303-1141	mjones@willkie.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	Other Annuity Trust

(b) Provide the following information about this report:	
Purpose	Biennial

"As of" date	10/01/2017  <b>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.</b>
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## 5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN
Telemundo Las Vegas License LLC	0012852398

Fac. ID No.	Call Sign	City	State	Service
63768	KBLR	PARADISE	NV	DTV

Licensee/Permittee Name	FRN
NBC Telemundo License LLC	0019509470

Fac. ID No.	Call Sign	City	State	Service
19783	KVEA	CORONA	CA	DTV
23142	WWSI	ATLANTIC CITY	NJ	DTV
30601	KHRR	TUCSON	AZ	DTV
35280	KNTV	SAN JOSE	CA	DTV
35994	KXTX-TV	DALLAS	TX	DTV
38375	KDEN-TV	LONGMONT	CO	DTV
47535	WNBC	NEW YORK	NY	DTV
47904	WRC-TV	WASHINGTON	DC	DTV
47905	WMAQ-TV	CHICAGO	IL	DTV
47906	KNBC	LOS ANGELES	CA	DTV
51864	WNEU	MERRIMACK	NH	DTV
58608	KNSO	MERCED	CA	DTV
62354	KTLM	RIO GRANDE CITY	TX	DTV
63153	WCAU	PHILADELPHIA	PA	DTV
63154	WTVJ	MIAMI	FL	DTV
64969	KVDA	SAN ANTONIO	TX	DTV
64971	WSCV	FORT LAUDERDALE	FL	DTV
64974	KEJT-CD	SALT LAKE CITY	UT	DCA
64979	K15CU-D	SALINAS	CA	LPD
64984	KTMD	GALVESTON	TX	DTV
64987	KSTS	SAN JOSE	CA	DTV

70119	WSNS-TV	CHICAGO	IL	DTV
73333	WNJU	LINDEN	NJ	DTV
74170	WVIT	NEW BRITAIN	CT	DTV
81458	KTAZ	PHOENIX	AZ	DTV

Licensee/Permittee Name	FRN
Station Venture Operations, LP	0003593860

Fac. ID No.	Call Sign	City	State	Service
35277	KNSD	SAN DIEGO	CA	DTV
49330	KXAS-TV	FORT WORTH	TX	DTV
64996	WBTS-LD	BOSTON	MA	LPD

Licensee/Permittee Name	FRN
Telemundo of Puerto Rico	0003727880

Fac. ID No.	Call Sign	City	State	Service
64983	WKAQ-TV	SAN JUAN	PR	DTV

### 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
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FRN	0027151984		
Entity Name	2016 BLR Annuity Trust-B		
Address	PO Box		
	Street 1	c/o Sheldon Bonovitz Duane Morris LLP	
	Street 2	30 South 17th Street	
	City	Philadelphia	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	19103-4196	
	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 from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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	0020685962		
Name	Sheldon M. Bonovitz		
Address	PO Box		
	Street 1	Duane Morris LLP	
	Street 2	30 South 17th Street	
	City	Philadelphia	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	19103-4196	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	

	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<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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<p><b>(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?</b></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 <a href="#">Click Here</a>.</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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<p><b>(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?</b></p> <p>If "<u>Yes</u>," provide the following information for each such the relationship.</p>	No
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<p><b>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b></p> <p>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.</p>	No
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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>Trustee</b> Exact Legal Title or Name of Respondent: <b>2016 BLR Annuity Trust-B</b> Name: <b>Sheldon M. Bonovitz</b> Phone: <b>2023031141</b>  02/28/2018