

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

File Number: 0000041549 Submit Date: 2018-02-07 FRN: 0006032437 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/07/2018 Filing Status: Active

## **Section I - General Information**

### 1. Respondent

FRN	Entity Name
0020032314	Mariah Media Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
P.O. Box 7528	Portland	ME	04112	+1 (207) 772- 5000	jdumais@outsidetv. com

#### 2. Contact Representative

David D. Oxer	nford	W	/ilkinson Ba	arker Knauer, LLP	
Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW	Washington	DC	20036	+1 (202) 783- 4141	doxenford@wbklaw. com

Organization

### 3. Application **Filing Fee**

# Not Applicable

Name

Suite 800N

## 4. Nature of Respondent

(a) Provide the following information about the Responder	ıt:
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	For-profit corporation

#### (b) Provide the following information about this report:

Purpose	Biennial
"As of" date	10/01/2017
	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.

## and Station(s)

67431

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

•	<b>U</b> 1	the following Licensee(s) al	•	,	
Licensee/Permitte	e Name		FRN		
RSN West LLC			00083	385668	
Fac. ID No.	Call Sign	City		State	Service
125590	K38FW	STATELINE		NV	LPA
125591	K31KH-D	STATELINE		NV	LPD
Licensee/Permitte	e Name		FRN	I	
Resort Television	USA, LLC		000	6032437	
Fac. ID No.	Call Sign	City		State	Service
23179	K36DB-CD	AVON, VAIL		со	DCA

BRECKENRIDGE

СО

LPD

## Section II – Biennial Ownership Information

K26GY-D

and Other Documents	contracts and other instruments report. In addition, attributable Lo disclosed by the licensee of the b attributable JSA, or a network aff	set forth in 47 C.F.R. Section 73 ocal Marketing Agreements (LMA prokering station on its ownershi filiation agreement, check the ap se Respondents that only hold a	ull power television, AM, and/or FM stations should list all .3613(a) through (c) for the facility or facilities listed on this As) and attributable Joint Sales Agreements (JSAs) must be p report. If the agreement is an attributable LMA, an propriate box. Otherwise, select "Other." Non-Licensee uthorizations for Class A television and/or low power television on.
Interests	generating a series of subforms. itself. If the Respondent is not a in non-insulated members, and any standards set forth in 47 C.F.R. S or entities.) List each interest hol Leave the percentage of total as attributable interest in the Respo Section 73.3555, Note 2(i). In the case of vertical or indirect attributable interest in the Licens Entities that are part of an organi separate ownership reports. In si an attributable interest in the Licens Please see the Instructions for fu	Answer each question on each a natural person, also list each of to other persons or entities with a Section 73.3555. (A "direct" inter der with a direct attributable inter sets (Equity Debt Plus) field blan ndent solely on the basis of the o ownership structures, list only th ee(s) for which the report is bein izational structure that includes h uch a structure do not report, or ensee(s) for which the report is b in the detail concerning interests	nolding companies or other forms of indirect ownership must file file a separate report for, any interest holder that does not have being submitted. that must be reported in response to this question.
	Ownership Information		· · · · · · · · · · · · · · · · · · ·
	FRN	0020032314	
	Entity Name	Mariah Media Inc.	
	Address	PO Box	
		Street 1	P.O. Box 7528

	Street 2		
	City	Portland	
	State ("NA" if non-U.S. address)	ME	
	Zip/Postal Code	04112	
	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 Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes

## **Ownership Information**

Ownership information			
FRN	0021319462		
Name	Lawrence J. Burke		
Address	PO Box		
	Street 1	400 Market Street	
	Street 2		
	City	Santa Fe	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code	87501	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	95.0%	Jointly Held? No
from 0.0 to 100.0)			

	Equity	95.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have ar that do not appear on this re	attributable interest in one or port?	r more broadcast stations	Yes
(b) Respondent certifies that interests, not reported in this	any interests, including equit s filing are non-attributable.	y, financial, or voting	Yes

If "No," submit as an exhibit an explanation.

(c) Does the Respondent or any reported interest holder	No
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?	
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.	
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 "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.	

### 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>Member</b> Exact Legal Title or Name of Respondent: <b>Mariah Media, LLC</b> Name: <b>Lawrence J Burke</b> Phone: <b>2077725000</b> 02/07/2018