Response



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000044534Submit Date:2018-02-27FRN:0016655631Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status: Date:02/27/2018Filing Status:ActiveStatus:ActiveStatus:Status:

Section I - General Information

1. Respondent

FRN Entity Name 0016655631 Monticello Media LLC

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
149 Roscoe Blvd. South	Ponte Vedra Beach	FL	32082	+1 (904) 285-3239	george@mediaservicesgroup. com

2. Contact Representative

Name	Organization
Timothy G. Nelson	Brooks, Pierce et al.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
150 Fayetteville Street Suite 1700	Raleigh	NC	27601	+1 (919) 839- 0300	tnelson@brookspierce. com

3. Application Filing Fee

Question

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	\$420.00
		·	•	•	Total	\$420.00

4. Nature of Respondent

(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	10/01/2017
	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.

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN
Monticello Media LLC	0016655631

Fac. ID No.	Call Sign	City	State	Service
10651	WKAV	CHARLOTTESVILLE	VA	AM
11670	W231AD	CHARLOTTESVILLE	VA	FX
11672	WZGN	CROZET	VA	FM
19838	WCHV	CHARLOTTESVILLE	VA	AM
56361	WHTE-FM	RUCKERSVILLE	VA	FM
61716	WCHV-FM	CHARLOTTESVILLE	VA	FM
70861	WCYK-FM	STAUNTON	VA	FM
81122	W285EF	CHARLOTTESVILLE	VA	FX

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.

Description of contract or instrument	Certificate of Formation
Parties to contract or instrument	State of Delaware
Date of execution	02/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Certificate of Formation

Document Information

Description of contract or instrument	Limited Liability Company Agreement
Parties to contract or instrument	Monticello Media LLC
Date of execution	08/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Limited Liability Company Agreement

Document Information

Description of contract or instrument	Purchase and Subscription Agreement
Parties to contract or instrument	Monticello Media LLC and Suzanne Stone
Date of execution	10/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Purchase and Subscription Agreement

Document Information

Description of contract or instrument	Purchase and Subscription Agreement
Parties to contract or instrument	Monticello Media LLC and Paul Stone
Date of execution	10/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Purchase and Subscription Agreement

Document Information

Description of contract or instrument	Amendment to Certificate of Formation
Parties to contract or instrument	State of Delaware
Date of execution	07/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Amendment to Certificate of Formation

Document Information

Description of contract or instrument	Option Agreement

Parties to contract or instrument	Monticello Media LLC and Suzanne Stone
Date of execution	10/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Option Agreement

Decument	Information
Document	mormation

Description of contract or instrument	Security Agreement	
Parties to contract or instrument	Monticello Media LLC and Paul Stone	
Date of execution	10/2007	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Security Agreement	

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	0016655631	
Entity Name	Monticello Media LLC	
Address	PO Box	
	Street 1	149 Roscoe Blvd. South
	Street 2	
	City	Ponte Vedra Beach
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	32082
	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	0017563370		
Name	George R. Reed		
Address	PO Box		
	Street 1	149 Roscoe Blvd. South	
	Street 2		
	City	Ponte Vedra Beach	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32082	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, 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	51.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	51.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	No

FRN	0019387158
Name	Loree Reed

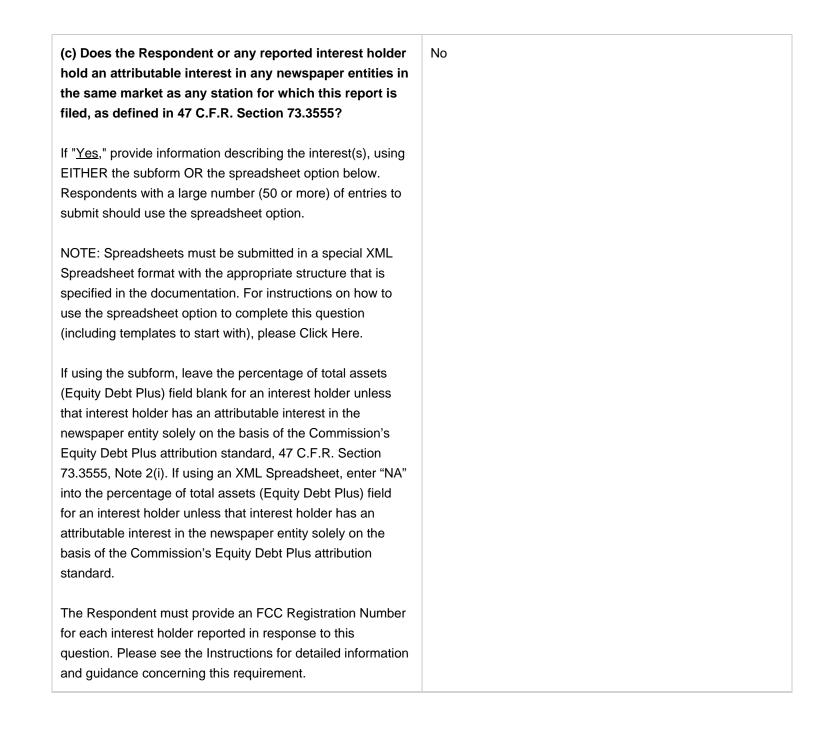
Address	PO Box		
	Street 1	149 Roscoe Blvd. South	
	Street 2		
	City	Ponte Vedra Beach	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32082	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
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)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?		No	

FRN	0019387117	
Name	Suzanne B. Stone	
Address	PO Box	
	Street 1	2300 North Atlantic Avenue
	Street 2	
	City	Daytona Beach
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	32118
	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	Gender Female	

Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	45.0%	Jointly Held? No
	Equity	45.0%	
	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

FRN	0019387133		
Name	Paul C. Stone	Paul C. Stone	
Address	PO Box		
	Street 1	2300 North Atlantic Avenue	
	Street 2		
	City	Daytona Beach	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32118	
	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, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	4.0%	Jointly Held? No
	Equity	4.0%	
	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	No

(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.	



(d) 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	0019387158	Name	Loree Reed
FRN	0017563370	Name	George R Reed
Relationship	Spouses		

Family Relationships

FRN	0019387133	Name	Paul C Stone
FRN	0019387117	Name	Suzanne B Stone
Relationship	Spouses		

(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.

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: President Exact Legal Title or Name of Respondent: Monticello Media LLC Name: George R. Reed Phone: 9042853239 02/27/2018