

## Federal (REFERENCE COPY - Not for submission) Communications Operations

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

File Number:0000045715Submit Date:2018-03-01FRN:0015452238Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:SupercededStatus Date:05/02/2018Filing Status:InActive

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

#### 1. Respondent

RN	Entity Name
008318198	GRIFFIN HOLDINGS, INC.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
111 South Cherokee Street	Muskogee	ОК	74403	+1 (918) 687- 6311	johngriffin@griffinfoods. com

#### 2. Contact Representative

Name	Organization
David A. O'Connor	Wilkinson Barker Knauer, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street NW Suite 800N	Washington	DC	20036	+1 (202) 783-4141	doconnor@wbklaw.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 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
GRIFFIN LICENSING, L.L.C.	0015452238

Fac. ID No.	Call Sign	City	State	Service
25382	KWTV-DT	OKLAHOMA CITY	ок	DTV
35434	KOTV-DT	TULSA	ОК	DTV
38214	KSBI	OKLAHOMA CITY	ОК	DTV
78322	KQCW-DT	MUSKOGEE	ОК	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		
FRN	0008318198	
Entity Name	GRIFFIN HOLDINGS, INC.	
Address	PO Box	
	Street 1	111 South Cherokee Street
	Street 2	
	City	Muskogee
	State ("NA" if non-U.S. address)	ОК

	Zip/Postal Code	74403		
	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	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	No	

Ownership Information				
FRN	0019321272			
Entity Name	John Watson Griffin Trust No	John Watson Griffin Trust No. 1		
Address	PO Box			
	Street 1	111 South Cherokee Street		
	Street 2			
	City	Muskogee		
	State ("NA" if non-U.S. address)	ОК		
	Zip/Postal Code	74403-5420		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Stockholder			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	59.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one or report?	or more broadcast stations	No	

FRN	0019272566
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John W. Griffin		
PO Box		
Street 1	111 South Cherokee Street	
Street 2		
City	Muskogee	
State ("NA" if non-U.S. address)	ОК	
Zip/Postal Code	74403-5420	
Country (if non-U.S. address)	United States	
Other Interest Holder		
Officer, Director		
Citizenship	US	
Gender	Male	
Ethnicity	Not Hispanic or Latino	
Race	American Indian or Alaska Na	tive
Voting	0.0%	Jointly Held? No
Equity	0.0%	
Total assets (Equity Debt Plus)	0.0%	
	PO BoxStreet 1Street 2CityState ("NA" if non-U.S. address)Zip/Postal CodeCountry (if non-U.S. address)Other Interest HolderOfficer, DirectorCitizenshipGenderEthnicityRaceVotingEquityTotal assets (Equity Debt	PO Box         Intervention           Street 1         111 South Cherokee Street 1           Street 2         Intervention           City         Muskogee           State ("NA" if non-U.S. address)         OK           Zip/Postal Code         74403-5420           Country (if non-U.S. address)         United States           Other Interest Holder         United States           Officer, Director         US           Gender         Male           Ethnicity         Not Hispanic or Latino           Race         American Indian or Alaska Na           Voting         0.0%

FRN	0019271667	
Name	Fern Sallee	
Address	PO Box	
	Street 1	111 South Cherokee Street
	Street 2	
	City	Muskogee
	State ("NA" if non-U.S. address)	ОК
	Zip/Postal Code	74403-5420
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Director	
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 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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information				
FRN	0019271618			
Name	Nate Burden	Nate Burden		
Address	PO Box			
	Street 1	111 South Cherokee Street		
	Street 2			
	City	Muskogee		
	State ("NA" if non-U.S. address)	ОК		
	Zip/Postal Code	74403-5420		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
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	No	

FRN	0023131857
Name	Kennith Girty

Address	PO Box		
	Street 1	111 South Cherokee Street	
	Street 2		
	City	Muskogee	
	State ("NA" if non-U.S. address)	ОК	
	Zip/Postal Code	74403-5420	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	American Indian or Alaska Nat	ive
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 ar	n attributable interest in one o	r more broadcast stations	No

that do not appear on this report?

FRN	0023131899	
Name	Michael Smith	
Address	PO Box	
	Street 1	111 South Cherokee Street
	Street 2	
	City	Muskogee
	State ("NA" if non-U.S. address)	ОК
	Zip/Postal Code	74403-5420
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Director	
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 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 ar that do not appear on this re	n attributable interest in one or port?	r more broadcast stations	No

Ownership Information				
FRN	0019321199			
Name	Aggie Geigle			
Address	PO Box			
	Street 1	111 South Cherokee Street		
	Street 2			
	City	Muskogee	Muskogee	
	State ("NA" if non-U.S. address)	ОК		
	Zip/Postal Code	74403-5420		
	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)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No	

FRN	0023132616	
Name	Clifford Beahm	
Address	PO Box	

	Street 1	111 South Cherokee Street	
	Street 2		
	City	Muskogee	
	State ("NA" if non-U.S. address)	ОК	
	Zip/Postal Code	74403-5420	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
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	No
	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes



(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 No duties wholly unrelated to the Licensee(s)?

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.

Certificatio	n

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>President, Chairman of the</b> <b>Board and CEO</b> Exact Legal Title or Name of Respondent: <b>Griffin Holdings, Inc.</b> Name: <b>John W. Griffin</b> Phone: <b>7028662200</b>
		03/01/2018