



(REFERENCE COPY - Not for submission)

Amendment to a Commercial Broadcast Stations Biennial Ownership Report

File Number: 0000040885 | Submit Date: 2018-02-16 | FRN: 0005804406

Purpose: Commercial Broadcast Stations Biennial Ownership Report Amendment | Status: Received | Status Date: 02/16/2018 | Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0011681483		LeSEA Broadcasting of Indianapolis, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
61300 IRONWOOD ROAD	SOUTH BEND	IN	46614	+1 (574) 291-8200	whylton@lesea.com

2. Contact Representative

Name		Organization			
Joseph C. Chautin III		HARDY, CAREY, CHAUTIN & BALKIN, L.L.P.			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1080 WEST CAUSEWAY APPROACH	Mandeville	LA	70471	+1 (985) 629-0777	jchautin@hardycarey.com

3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	Yes
If this application is being submitted without a filing fee, Indicate reason for fee exemption.	Other Provide Explanation: Amendment

4. Nature of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
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.
Reason for Amendment	Update to 47 C.F.R. Section 73.3613 documents section.

5. Licensee(s)
and Station(s)

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

Licensee/Permittee Name	FRN
LeSEA Broadcasting of Indianapolis, Inc.	0011681483

Fac. ID No.	Call Sign	City	State	Service
37102	WHMB-TV	INDIANAPOLIS	IN	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.

Document Information	
Description of contract or instrument	PROMISSORY NOTE (TERM)
Parties to contract or instrument	FIRST NBC
Date of execution	05/2014
Date of expiration	05/2019
Agreement type (check all that apply)	Other Agreement Type: Promissory

Document Information	
Description of contract or instrument	AMENDED AND RESTATED BYLAWS
Parties to contract or instrument	DIRECTORS
Date of execution	05/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity organization

Document Information	
Description of contract or instrument	10TH MODIFICATION TO CREDIT AGREEMENT
Parties to contract or instrument	First NBC

Date of execution	03/2015
Date of expiration	05/2019
Agreement type (check all that apply)	Other Agreement Type: Credit

Document Information	
Description of contract or instrument	CREDIT AGREEMENT
Parties to contract or instrument	FIRST NBC
Date of execution	05/2014
Date of expiration	05/2019
Agreement type (check all that apply)	Other Agreement Type: Credit Agreement

Document Information	
Description of contract or instrument	8TH MODIFICATION TO CREDIT AGREEMENT
Parties to contract or instrument	FIRST NBC
Date of execution	05/2014
Date of expiration	05/2019
Agreement type (check all that apply)	Other Agreement Type: Credit Agreement

Document Information	
Description of contract or instrument	9TH MODIFICATION TO CREDIT AGREEMENT
Parties to contract or instrument	FIRST NBC
Date of execution	12/2014
Date of expiration	05/2019
Agreement type (check all that apply)	Other Agreement Type: Credit

Document Information	
Description of contract or instrument	AMENDED AND RESTATED ARTICLES OF INCORPORATION
Parties to contract or instrument	STATE OF INDIANA
Date of execution	05/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity formation

Document Information	
Description of contract or instrument	SECURITY AGREEMENT
Parties to contract or instrument	FIRST NBC
Date of execution	05/2014

Date of expiration	05/2019
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	0011681483		
Entity Name	LeSEA Broadcasting of Indianapolis, Inc.		
Address	PO Box		
	Street 1	61300 IRONWOOD ROAD	
	Street 2		
	City	SOUTH BEND	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46614	
	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	0027151786		
Name	Andrew Sumrall		
Address	PO Box		
	Street 1	5777 Boxwood Drive East	
	Street 2		
	City	SOUTH BEND	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46614	
	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 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	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?			Yes

Ownership Information		
FRN	0005804406	
Entity Name	LESEA BROADCASTING CORPORATION	
Address	PO Box	
	Street 1	61300 IRONWOOD ROAD
	Street 2	
	City	SOUTH BEND
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46614
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

Positional Interests (check all that apply)	Owner		
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	100.0%	Jointly Held? No
	Equity	100.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information			
FRN	0027158203		
Name	Anthony Agostino		
Address	PO Box		
	Street 1	10450 Woodchuck Court	
	Street 2		
	City	Granger	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46530	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
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	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?			Yes

Ownership Information	
FRN	0019221696
Name	Angela Grabowski

Address	PO Box		
	Street 1	61300 IRONWOOD ROAD	
	Street 2		
	City	SOUTH BEND	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46614	
	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 Persons Only)	Citizenship	US	
	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 an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information			
FRN	0022439590		
Name	R. Keith Passon		
Address	PO Box		
	Street 1	10511 GREENFIELD AVE.	
	Street 2		
	City	NOBLESVILLE	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46060	
	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 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?			Yes

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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<p>(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?</p> <p>If "Yes," 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 Click Here.</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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(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? If "Yes," provide the following information for each such the relationship.	Yes
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Family Relationships			
FRN	0027151786	Name	Andrew Sumrall

FRN	0019221696	Name	Angela Grabowski
Relationship	Siblings		

<p>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</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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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 only a single 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 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: President Exact Legal Title or Name of Respondent: LESEA BROADCASTING OF INDIANAPOLIS, INC. Name: Andrew Sumrall Phone: 5742918200 02/16/2018