

(REFERENCE COPY - Not for submission)

FRN

Leon Blvd. Suite 650

Not Applicable

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000101238
 Submit Date:
 2020-01-28
 FRN:
 0004343323

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/28/2020

 Filing Status:
 Active
 Status
 Status Date:
 01/28/2020

Section I - General Information

1. Respondent

Entity Name

0022405583 Hemisphere		Media Holdings, LLC				
Street Address	City (and Count S. address)	ry if non U.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
4000 Ponce De	Coral Gables		FL	33146	+1 (305) 421- 6334	atolston@hemispheretv. com

2. Contact Representative

Name	Organization
Sally A. Buckman	Lerman Senter PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2001 L Street, NW Suite 400	Washington	DC	20036	+1 (202) 429- 8970	sbuckman@lermansenter. com

3. Application Filing Fee

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	10/01/2019
	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.

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

Licensee/Permittee	Name	FRN		
Televicentro of Puerto Rico, LLC			0004343323	
Fac. ID No.	Call Sign	City	State	Service
26681	WTIN-TV	PONCE	PR	DTV
52073	WAPA-TV	SAN JUAN	PR	DTV
73336	WNJX-TV	MAYAGUEZ	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				
FRN	0022405583			
Entity Name	Hemisphere Media Holdings, LLC			
Address	PO Box			
	Street 1	4000 Ponce De Leon Blvd.		
	Street 2	Suite 650		
	City	Coral Gables		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33146		

Ownership Information

	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 ar that do not appear on this re	n attributable interest in one or port?	more broadcast stations	No

Ownership Information				
FRN	0022806061			
Entity Name	HMTV, LLC			
Address	PO Box			
	Street 1	4000 PONCE DE LEON BLVD.		
	Street 2	Suite 650		
	City	CORAL GABLES		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33146		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
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	100.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No	

Ownership Information		

FRN	0019404110
Name	Alan Sokol

Address	PO Box			
	Street 1	4000 PONCE DE LEON BLVD).	
	Street 2	Suite 650		
	City	CORAL GABLES		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33146		
	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	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 an	attributable interest in one or	more broadcast stations	No	

Ownership Information

that do not appear on this report?

FRN	0019328194	
Name	Craig Fischer	
Address	PO Box	
	Street 1	4000 PONCE DE LEON BLVD.
	Street 2	Suite 650
	City	CORAL GABLES
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33146
	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	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?		No	

Ownership Information

FRN	0023102213		
Name	Alex J. Tolston		
Address	PO Box		
	Street 1	4000 PONCE DE LEON BLVD.	
	Street 2	Suite 650	
	City	CORAL GABLES	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33146	
	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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

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.



(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.

Certif	ication

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).	

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: Executive VP, Chief Legal Officer and Corp. Sec. Exact Legal Title or Name of Respondent: Hemisphere Media Holdings, LLC
	Name: Alex J Tolston Phone: 3054216334
	FILUNE. 3034210334
	01/28/2020
	and that to the best of my knowledge and belief, all statements in this report are