Response

No



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000102183Submit Date:2020-01-30FRN:0025884016Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:01/30/2020Filing Status:Active

Section I - General Information

1. Respondent

0024972457 WXOW-WQOW License, LLC	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 909	Quincy	IL	62306	+1 (217) 223- 5100	bdreasler@quincymedia. com

2. Contact Representative

Name	Organization
Elizabeth E. Spainhour	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	espainhour@brookspierce. com

3. Application Filing Fee

Question

Is this application being submitted without a filing fee?

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	МАТ	2	95	\$140.00
		·	·	•	Total	\$140.00

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	10/01/2019
	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.

5. Licensee(s) and Station(s)

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

Lic	censee/Permittee Name	FRN
W	/XOW-WQOW License, LLC	0024972457

Fac. ID No.	Call Sign	City	State	Service
64549	WXOW	LA CROSSE	WI	DTV
64550	WQOW	EAU CLAIRE	WI	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	Decades Network Affiliation Agreement		
Parties to contract or instrument	Decades Television Network		
Date of execution	02/2019		
Date of expiration	12/2022		
Agreement type (check all that apply)	Network Affiliation Agreement		

Document Information				
Description of contract or instrument	CW Plus Network Affiliation Agreement			
Parties to contract or instrument	The CW Plus Television Network			
Date of execution	03/2006			
Date of expiration	09/2020			
Agreement type (check all that apply)	Network Affiliation Agreement			

Document Information

Description of contract or instrument	ABC Network Affiliation Agreement
Parties to contract or instrument	ABC Television Network
Date of execution	06/2018
Date of expiration	10/2022
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Third Amended and Restated Credit Agreement	
Parties to contract or instrument	Wells Fargo Bank, NA and Suntrust Bank, NA	
Date of execution	11/2015	
Date of expiration	11/2022	
Agreement type (check all that apply)	Other Agreement Type: Third Amended and Restated Credit Agreement	

Document Information

Description of contract or instrument	Third Amended and Restated Pledge Agreement
Parties to contract or instrument	Wells Fargo Bank, NA and Suntrust Bank, NA
Date of execution	11/2015
Date of expiration	11/2022
Agreement type (check all that apply)	Other Agreement Type: Third Amended and Restated Pledge Agreement

Document Information

Description of contract or instrument	Third Amended and Restated Security Agreement
Parties to contract or instrument	Wells Fargo Bank, NA and Suntrust Bank, NA
Date of execution	11/2015
Date of expiration	11/2022
Agreement type (check all that apply)	Other Agreement Type: Third Amended and Restated Security Agreement

Document Information		
Description of contract or instrument	Operating Agreement	
Parties to contract or instrument	State of Missouri	
Date of execution	10/2015	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Operating Agreement	

Document Information

Description of contract or instrument	Articles of Organization
Parties to contract or instrument	State of Missouri
Date of execution	10/2015
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Articles of Organization

Document Information

Description of contract or instrument	Court TV Network Affiliation Agreement
Parties to contract or instrument	Court TV Television Network
Date of execution	01/2019
Date of expiration	04/2024
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Justice Network Affiliation Agreement
Parties to contract or instrument	Justice Television Network
Date of execution	01/2019
Date of expiration	04/2023
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Fourth Amendment to Credit Agreement
Parties to contract or instrument	Wells Fargo Bank, NA as Administrative Agent
Date of execution	02/2019
Date of expiration	11/2022
Agreement type (check all that apply)	Other Agreement Type: Fourth Amendment to Credit Agreement

(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	0024972457			
Entity Name	WXOW-WQOW License, LLC			
Address	PO Box 909			
	Street 1			
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62306		
	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 a that do not appear on this r	an attributable interest in one o report?	r more broadcast stations	No	

Ownership Information

Ownership Information

FRN	0005012216	
Entity Name	WXOW-WQOW Television, Inc.	
Address	PO Box 909	

	Street 1			
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62306		
	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	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 D Plus)				
Does interest holder have that do not appear on this	an attributable interest in one o report?	or more broadcast stations	No	

FRN	0019430719			
Name	Mary O. Winters			
Address	PO Box			
	Street 1	136 Emery Drive		
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62301		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Citizenship, Gender,	Citizenship	US	US	
Ethnicity, and Race Information (Natural	Gender	Gender Female		
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)		
Does interest holder have an	attributable interest in one or	more broadcast stations	Yes

Ownership Information				
FRN	0019430651			
Name	Harold B. Oakley	Harold B. Oakley		
Address	PO Box			
	Street 1	222 S. 16th Street		
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. address)	62301		
	Zip/Postal Code			
	Country (if non-U.S. address)			
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)				
Does interest holder have a that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	Yes	

Ownership Information

that do not appear on this report?

FRN	0019430735	
Name	Ralph M. Oakley	
Address	PO Box	
	Street 1	2824 Carnoustie Lane
	Street 2	
	City	Quincy
	State ("NA" if non-U.S. address)	IL

	Zip/Postal Code	62301		
	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)			
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes	

Ownership Information

FRN	0019430776				
Name	Bradley G. Eaton				
Address	PO Box				
	Street 1	3750 Deer Ridge Road			
	Street 2				
	City	Quincy	Quincy		
	State ("NA" if non-U.S. address)	IL			
	Zip/Postal Code	62305			
	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				

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

Yes

Ownership Information				
FRN	0019430750			
Name	Thomas A. Oakley			
Address	PO Box	Box		
	Street 1	935 Country Club Drive West		
	Street 2			
	City	Quincy		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62301		
	Country (if non-U.S. United States 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)	Debt		
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes	
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.If "No," submit as an exhibit an explanation.				

(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?	No
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 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	0019430719	Name	Mary O Winters
FRN	0019430750	Name	Thomas A Oakley
Relationship	Parent/Child		

Family Relationships

FRN	0019430750	Name	Thomas A Oakley
FRN	0019430735	Name	Ralph M Oakley
Relationship	Parent/Child		

Family Relationships

FRN	0019430735	Name	Ralph M Oakley
FRN	0019430719	Name	Mary O Winters
Relationship	Siblings		

No

(e) Is Respondent seeking an attribution exemption for any officer or director with 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.

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.

File Name	Uploaded By	Attachment Type	Description
Organizational Chart.pdf	Applicant	Ownership Chart	Organizational Chart

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: WXOW-WQOW License, LLC Name: Ralph M. Oakley Phone: 2172235100 01/30/2020