

(REFERENCE COPY - Not for submission)

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

File Number: **0000098847** Submit Date: **2020-01-21** FRN: **0001623990** 

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/21/2020

Filing Status: Active

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

### 1. Respondent

FRN	Entity Name
0001623990	Wyomedia Corp

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1856 SKYVIEW DRIVE	CASPER	WY	82601	+1 (307) 577- 5923	mnalbone@kfnbtv.

### 2. Contact Representative

Name	Organization
HOWARD LIBERMAN	DRINKER BIDDLE & REATH LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1500 K STREET, NW	WASHINGTON	DC	20006	+1 (202) 842- 8876	HOWARD.LIBERMAN@DBR.

## 3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	No

#### **Fees**

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAT	4	95	\$280.00
				Total	\$280.00

### 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	10/01/2019	
	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):

Licensee/Permittee Name	FRN	
Wyomedia Corp	0001623990	

Fac. ID No.	Call Sign	City	State	Service
21612	KFNR	RAWLINS	WY	DTV
21613	KFNE	RIVERTON	WY	DTV
21616	K11RN-D	DOUGLAS	WY	LPT
40250	KLWY	CHEYENNE	WY	DTV
74256	KFNB	CASPER	WY	DTV
130278	K09XL-D	DOUGLAS	WY	LPD
190191	KWYF-LD	CASPER	WY	LPT

### **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.

ocument Information				
Description of contract or instrument	NEWS SERVICE AGREEMENT			

Parties to contract or instrument	SILVERTON BROADCASTING
Date of execution	07/2006
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: NEWS SERVICE AGREEMENT

Document Information		
Description of contract or instrument	AGREEMENT FOR THE SALE OF COMMERCIAL TIME	
Parties to contract or instrument	MARK III MEDIA	
Date of execution	06/2004	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Attributable LMA	

Document Information			
Description of contract or instrument	SHARED SERVICES AGREEMENT		
Parties to contract or instrument	MARK III MEDIA/SILVERTON BROADCASTING /WYOMEDIA CORP		
Date of execution	06/2004		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: SHARED SERVICES AGREEMENT		

Document Information		
Description of contract or instrument	NETWORK AFFILIATE AGREEMENT	
Parties to contract or instrument	FOX BROADCASTING	
Date of execution	01/2017	
Date of expiration	12/2019	
Agreement type (check all that apply)	Network Affiliation Agreement	

Document Information		
Description of contract or instrument	CERT OF INC/ BY LAWS	
Parties to contract or instrument	STATE OF WY	
Date of execution	04/1989	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Attributable LMA	

(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	0001623990		
Entity Name	Wyomedia Corp		
Address	PO Box		
	Street 1	1856 SKYVIEW DRIVE	
	Street 2		
	City	CASPER	
	State ("NA" if non-U.S. address)	WY	
	Zip/Postal Code	82601	
	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	an attributable interest in one oreport?	r more broadcast stations	No

Ownership Information		
FRN	0019417948	
Name	Madeline Gussman	
Address	РО Вох	

	Street 1	909 N WHITTIER DRIVE	
	Street 2		
	City	BEVERLY HILLS	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90210	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Owner		
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	100.0%	Jointly Held? No
	Equity	100.0%	
	Total assets (Equity Debt Plus)	100.0%	
Does interest holder have a	an attributable interest in one or report?	r more broadcast stations	No

Ownership Information			
FRN	9990139866	9990139866	
Name	THOMAS JAMES CORSON	THOMAS JAMES CORSON	
Address	РО Вох	PO Box	
	Street 1	1690 N. BUCK CREEK ROAD	
	Street 2		
	City	CASPER	
	State ("NA" if non-U.S. address)	WY	
	Zip/Postal Code	82604	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer	Officer	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
		İ	

	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 that do not appear on this report?			No
(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	

(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?

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.

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.

No

(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?

No

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

No

If "Yes," 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.

MADELINE GUSSMAN 100%

#### **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: SECRETARY TREASURER Exact Legal Title or Name of Respondent: THOMAS JAMES CORSON Name: THOMAS JAMES CORSON Phone: 3075775923