

(REFERENCE COPY - Not for submission)

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

File Number: **0000098855** Submit Date: **2020-01-21** FRN: **0008959280** 

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
0008959280	Mark III Media, Inc.

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	3	95	\$210.00
				Total	\$210.00

### 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	
Mark III Media, Inc.	0008959280	

Fac. ID No.	Call Sign	City	State	Service
63162	KGWL-TV	LANDER	WY	DTV
63170	KGWR-TV	ROCK SPRINGS	WY	DTV
63175	K16AE-D	GILLETTE	WY	LD
63177	KGWC-TV	CASPER	WY	DTV
63179	K28KM-D	CLARETON	WY	LD

### **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	SHARED SERVICES AGREEMENT	
Parties to contract or instrument	SILVERTON BROADCASTING	
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	AGREEMENT FOR SALE OF ADVERTISING	
Parties to contract or instrument	WYOMEDIA CORP	
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	NEWS SERVICE AGREEMENT	
Parties to contract or instrument	SILVERTON BROADCASTING CO. LLC/WYOMEDAI CORP.	
Date of execution	07/2006	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: NEWS SERVICES AGREEMENT	

Document Information		
Description of contract or instrument	CERTIFICATE OF INC./ ORGANIZATIONAL MINUTES	
Parties to contract or instrument	STATE OF WYOMING	
Date of execution	05/2003	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: CERT. OF INC./ORGANIZATIONAL MINUTES	

Document Information		
Description of contract or instrument	NETWORK AFFILIATION AGREEMENT	
Parties to contract or instrument	CBS TELEVISION NETWORK	
Date of execution	07/2018	
Date of expiration	06/2021	
Agreement type (check all that apply)	Network Affiliation 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	0008959280		
Entity Name	Mark III Media, Inc.	Mark III Media, Inc.	
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 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 or	or more broadcast stations	No

Ownership Information		
FRN	0019785385	
Name	julie jaffe	
Address	PO Box	
	Street 1	1806 N BEVERLY GLEN DRIVE
	Street 2	
	City	LOS ANGELES

	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90077	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	Voting	35.0%	Jointly Held? Yes
from 0.0 to 100.0)	Equity	35.0%	
	Total assets (Equity Debt Plus)	35.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No

FRN	0019785302		
Name	Jennifer Lechter		
Address	РО Вох		
	Street 1	1118 COLD WATER C	ANYON
	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)	Stockholder		
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	35.0%	Jointly Held? Yes

	Equity	35.0%	
	Total assets (Equity Debt Plus)	35.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information			
FRN	0019417906		
Name	mark r. nalbone		
Address	PO Box		
	Street 1	2092 NOTTINGHAM	
	Street 2		
	City	CASPER	
	State ("NA" if non-U.S. address)	WY	
	Zip/Postal Code	82609	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (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	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	s (Equity Debt 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.

(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.

duties wholly unrelated to the Licensee(s)?

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.

MARK III MEDIA 100% JULIE JAFFE 35% JENNIFER LECHTER 35%

### Section III - Certification

**Section** Response Question Certification

No

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

No

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: OFFICER Exact Legal Title or Name of Respondent: MARK R NALBONE Name: MARK R NALBONE Phone: 3075775923