

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000102223 | Submit Date: 2020-01-30 | FRN: 0020095352

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/30/2020

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0017029414	Townsquare Media Billings, LLC	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
1 Manhattanville Road Suite 202	Purchase	NY	10577	+1 (203) 861-0900	fcccontact@townsquaremedia.

2. Contact Representative

Name	Organization
Howard M. Liberman	Wilkinson Barker Knauer, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW Suite 800N	Washington	DC	20036	+1 (202) 383- 3373	hliberman@wbklaw. com

3. Application Filing Fee

Not Applicable

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.		

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN	
Townsquare Media Billings License, LLC	0017029554	

Fac. ID No.	Call Sign	City	State	Service
1315	КСНН	WORDEN	MT	FM
16772	KBUL	BILLINGS	MT	AM
16773	KCTR-FM	BILLINGS	MT	FM
16774	KKBR	BILLINGS	MT	FM
35370	КМНК	BILLINGS	MT	FM

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	0017029414	0017029414		
Entity Name	Townsquare Media Bi	Townsquare Media Billings, LLC		
Address	РО Вох			
	Street 1	1 Manhattanville Road		
	Street 2	Suite 202		
	City	City Purchase		

	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	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 that do not appear on this	an attributable interest in one creport?	r more broadcast stations	No

Ownership Information				
FRN	0019970656	0019970656		
Name	Erik Hellum	Erik Hellum		
Address PO Box				
	Street 1	1 Manhattanville Road		
	Street 2	Suite 202		
	City	Purchase		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10577		
Country (if non-U.S. United States address)		United States		
Listing Type	Other Interest Holder	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 an attributable interest in one or more broadcast stations that do not appear on this report?

Yes

Ownership Information				
FRN	0021302013			
Name	Bill Wilson	Bill Wilson		
Address	PO Box			
	Street 1	1 Manhattanville Road		
	Street 2	Suite 202		
	City	Purchase		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10577		
	Country (if non-U.S. United States address)			
Listing Type	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		
	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 that do not appear on this report?				

Ownership Information			
FRN	0019891159		
Entity Name	Townsquare Media West Central Radio Broadcasting, LLC		
Address	РО Вох		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	

	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 from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	Equity	100.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information				
FRN	0020258943			
Name	Stuart Rosenstein	Stuart Rosenstein		
Address	РО Вох			
	Street 1	1 Manhattanville Road		
	Street 2	Suite 202		
	City	Purchase		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10577		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - Manager			
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	an attributable interest in one oreport?	r more broadcast stations	Yes	

FRN	0021302039		
Name	Claire Yenicay		
Address	PO Box		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Manager		
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	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	r more broadcast stations	Yes

Ownership Information		
FRN	0020258976	
Name	Scott Schatz	
Address	РО Вох	
	Street 1	1 Manhattanville Road
	Street 2	Suite 202
	City	Purchase
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	10577
	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 Persons Only)	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)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	0025052325		
Name	Michael Josephs		
Address	РО Вох		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	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	r more broadcast stations	Yes

Ownership Information	
FRN	0025050279

Name	Christopher Kitchen		
Address	РО Вох		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	erest 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	r more broadcast stations	Yes

Ownership Information			
FRN	0020258935		
Name	Steven Price		
Address	PO Box		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Manager	Officer, Other - Manager	
Citizenship, Gender,	Citizenship	US	

Ethnicity, and Race Information (Natural	Gender	Male Not Hispanic or Latino	
Persons Only)	Ethnicity		
	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)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes
• • •	nat any interests, including equi	ty, financial, or voting	Yes
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?

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?

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

No

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

No

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: Executive Vice President and General Counsel Exact Legal Title or Name of Respondent: Townsquare Media Billings, LLC Name: Christopher Kitchen Phone: 2038610900