

(REFERENCE COPY - Not for submission)

FRN

0028208965

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

Entity Name

File Number: 0000100097Submit Date: 2020-01-24FRN: 0028208965Purpose: Commercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 01/24/2020Filing Status: ActiveStatusStatusStatus

Section I - General Information

1. Respondent

LILLIAN LINCOLN HOWELL TRUST FBO LINCOLN CLARK HOWELL

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
c/o Steven D. Anderson 320 Primrose Dr.	Burlingame	CA	94010	+1 (650) 212- 5900	sanderson@ayhmh. com

2. Contact Representative

Name	Organization
Benjamin J. Lambiotte	Foster Garvey P.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac Street, N.W Suite 200	Washington	DC	20007	+1 (202) 965- 7880	benjamin.lambiotte@foster. com

3. Application Filing Fee

4. Nature of Respondent

Not Applicable

(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	Other Trust		

(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				
Lincoln Broadcasting Cor	0009298266			
Fac. ID No.	Call Sign	City	State	Service
37511	KTSF	SAN FRANCISCO	CA	DTV

Section II – Biennial Ownership Information

 1. 47 C.F.R. Section 73.3613 and Other Documents Documents Licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, a attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Lice Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low pow stations, should select "Not Applicable" in response to this question. 	ocal Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be brokering station on its ownership report. If the agreement is an attributable LMA, an ffiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee ee Respondents that only hold authorizations for Class A television and/or low power television		
 2. Ownership Interests (a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interest generating a series of subforms. Answer each question on each subform. The first subform listing should be for the itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent purs standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening 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 attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standar 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 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 owner separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that d 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 	Respondent partners, uant to the companies has an d, 47 C.F.R. ht an ship must file oes not have		
The Respondent must provide an FCC Registration Number for each interest holder reported in response to this qu Please see the Instructions for detailed information and guidance concerning this requirement.	estion.		
Ownership Information			
FRN 0028208965			
Entity Name LILLIAN LINCOLN HOWELL TRUST FBO LINCOLN CLARK HOWELL			
Address PO Box			
Street 1 c/o Steven D. Anderson			
Street 2 320 Primrose Dr.			

	City	Burlingame		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	94010		
	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 or report?	or more broadcast stations	No	

Ownership Information

FRN	0027133842				
Name	Eugene V. Bissell				
Address	РО Вох				
	Street 1	1414 South Penn Sq.			
	Street 2				
	City	Philadelphia			
	State ("NA" if non-U.S. address)	PA			
	Zip/Postal Code	19102			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Other - Trustee				
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	33.3%	Jointly Held? No		
from 0.0 to 100.0)	Equity	33.3%			

	Total assets (Equity Debt Plus)	33.3%	
Does interest holder have an	attributable interest in one or	more broadcast stations	No

Ownership Information	Ownership Information				
FRN	0019404664				
Name	Lincoln C. Howell				
Address PO Box					
	Street 1	1761 Manor Drive			
	Street 2				
	City	Hillsborough			
	State ("NA" if non-U.S. address)	CA			
	Zip/Postal Code	94101			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Other - Trustee				
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	33.3% Jointly Held? No			
from 0.0 to 100.0)	Equity	33.3%			
	Total assets (Equity Debt Plus)	33.3%			
Does interest holder have an attributable interest in one or more broadcast stations No					

Ownership Information

that do not appear on this report?

FRN	9990135473	
Name	Elaine P. Mroz	
Address	PO Box	
	Street 1	3 Riley Road
	Street 2	
	City	Lunenburg
	State ("NA" if non-U.S. address)	MA

	Zip/Postal Code	01462			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Other - Trustee				
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US			
	Gender	Female			
	Ethnicity	Not Hispanic or Latino			
	Race	White			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No		
	Equity	33.3%			
	Total assets (Equity Debt Plus)	33.3%			
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 interests, not reported in this	Yes				

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).	

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: Trustee Exact Legal Title or Name of Respondent: Lillian Lincoln Howell Trust FBO Lincoln Clark Howell Name: Barbara J. Bissell Phone: 4154682626
		01/24/2020