

FRN

0021343173

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

 File Number:
 0000104349
 Submit Date:
 2020-01-31
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 0022303135

 Purpose:
 Commercial Broadcast Stations Non-Biennial Ownership Report
 Status:
 Received
 Status Date:

 01/31/2020
 Filing Status:
 Active
 Status:
 Status:
 Status:

Section I - General Information

1. Respondent

Entity Name

Standard General S Corp.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
767 Fifth Avenue 12th Floor	New York	NY	10153	+1 (202) 663- 8000	scott. flick@pillsburylaw. com

2. Contact Representative

Name	Organization
Scott R. Flick, Esq.	Pillsbury Winthrop Shaw Pittman LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1200 Seventeenth Street, NW	Washington	DC	20036	+1 (202) 663- 8000	scott.flick@pillsburylaw. 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	For-profit corporation	

(b) Provide the following information about this report:

Purpose	Transfer of control or assignment of license/permit
"As of" date	09/19/2019
	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) /Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee Name	FRN
VideoIndiana, Inc.	0003015807

Fac. ID No.	Call Sign	City	State	Service
70162	WTHR	INDIANAPOLIS	IN	DTV

Licensee/Permittee Name	FRN
TEGNA Broadcast Holdings, LLC	0028358455

Fac. ID No.	Call Sign	City	State	Service
147	WTIC-TV	HARTFORD	СТ	DTV
8661	WOI-DT	AMES	IA	DTV
10213	WPMT	YORK	PA	DTV
14050	WCCT-TV	WATERBURY	СТ	DTV
28119	WZDX	HUNTSVILLE	AL	DTV
51502	KCWI-TV	AMES	IA	DTV
73318	WNEP-TV	SCRANTON	PA	DTV
73319	WQAD-TV	MOLINE	IL	DTV
73320	W10CP-D	TOWANDA	PA	LPT
73321	W20AD-D	WILLIAMSPORT	PA	LPT
73323	W36BE-D	STATE COLLEGE	PA	LPT
73324	W15CO-D	TOWANDA	PA	LPT
73325	W07DC-D	ALLENTOWN/BETHLEHEM	PA	LPT
73326	W14CO-D	CLARKS SUMMIT, ETC.	PA	LPT
73327	W28DP-D	POTTSVILLE	PA	LPT
129499	W26CV-D	MANSFIELD	PA	LD

Licensee/Permittee Name	FRN
TEGNA Memphis Broadcasting, Inc.	0028358570

Fac. ID No.	Call Sign	City	State	Service
11907	WATN-TV	MEMPHIS	TN	DTV
68518	WLMT	MEMPHIS	TN	DTV

Licensee/Permittee Name	FRN
VideOhio, Inc.	0006173322

Fac. ID No.	Call Sign	City	State	Service
70161	WALV-CD	INDIANAPOLIS	IN	DCA

Licensee/Permittee Name		FRN	FRN			
Cape Publications, Inc.		00243	0024376063			
Fac. ID No.	Call Sign	City		State	Service	
66469	KFSM-TV	FORT SMITH		AR	DTV	
Licensee/Permittee Name				FRN		
RadiOhio Incorporated		0003006061				
Fac. ID No.	Call Sign	City		State	Service	
54701	WBNS-FM	COLUMBUS		ОН	FM	
54901	WBNS	COLUMBUS		ОН	AM	
Licensee/Permittee Name			FRN			
WBNS-TV, Inc.		0003021060				
Fac. ID No.	Call Sign	City		State	Service	
71217	WBNS-TV	COLUMBUS		ОН	DTV	
				1	1	

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	through (c) for the facility or facility attributable Joint Sales Agreement the agreement is an attributable	ts should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) lities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and ents (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Licensee/Permittee Respondents should select "Not Applicable" in response to this question.			
2. Ownership Interests	(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests I generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Re itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated par non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuar standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening cor 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) or Permittee(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 mus separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not h an attributable interest in the Licensee(s) or Permittee(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	0021343173			
	Entity Name	Standard General S Corp.			

Address	PO Box				
	Street 1	767 Fifth Avenue			
	Street 2	12th Floor			
	City	New York			
	State ("NA" if non-U.S. address)	NY			
	Zip/Postal Code	10153			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
Positional Interests (check all that apply)	Respondent				
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%			
Does interest holder have a that do not appear on this re	n attributable interest in one c eport?	or more broadcast stations	Yes		

Ownership Information

FRN	0021343223			
Entity Name	Acme Amalgamated Holdings LLC			
Address	PO Box			
	Street 1	767 Fifth Avenue		
	Street 2	12th Floor		
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10153		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder			
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one c report?	r more broadcast stations	Yes	

FRN	0017681446

Name	Soohyung Kim			
Address	PO Box			
	Street 1	767 Fifth Avenue		
	Street 2	12th Floor		
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10153		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	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 his filing are non-attributable. an explanation.	ty, financial, or voting	Yes	



(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: Managing Member, Acme Amalgamated Holdings LLC Exact Legal Title or Name of Respondent: Standard General S Corp. Name: Soohyung Kim Phone: 2026638000
		01/31/2020