

(REFERENCE COPY - Not for submission)

FRN

0029640687

Not Applicable

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000170298
 Submit Date:
 2021-11-22
 FRN:
 0029640687

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 11/22/2021

 Filing Status:
 Active
 Status
 Status Date:
 11/22/2021

Coastal Television Broadcasting Group LLC

Section I - General Information

1. Respondent

Entity Name

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2750 Luberon Lane	Cumming	GA	30041	+1 (678) 777- 8659	bfielder@youralaskalink. com

2. Contact Representative

Name	Organization
Dan Kirkpatrick	Baker & Hostetler LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1050 Connecticut Avenue, NW Suite 1100	Washington	DC	20036	+1 (202) 861- 1758	dkirkpatrick@bakerlaw. com

3. Application Filing Fee

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	10/01/2021			
	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	
KTBY License LLC	0029622164	

Fac. ID No.	Call Sign	City	State	Service
35654	K09QH-D	KENAI	AK	LPT
35655	КТВҮ	ANCHORAGE	AK	DTV
62634	K31MD-D	KASILOF	AK	LPT
62723	K33AF-D	NINILCHIK	AK	LPT
62731	K08KA-D	GIRDWOOD	AK	LPT
62883	K04JH-D	HOMER	AK	LPT

Licensee/Permittee Name	FRN
FRTV License LLC	0029636065

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

Licensee/Permittee Name			FRN		
WLOV License LLC			0029633443		
Fac. ID No.	Call Sign	City		State	Service
37732	WLOV-TV	WEST POINT		MS	DTV

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	0029640687			
Entity Name	Coastal Television Broadcast	ing Group LLC		
Address	PO Box			
	Street 1	2750 Luberon Lane		
	Street 2			
	City	Cumming		
	State ("NA" if non-U.S. address)	GA		
	Zip/Postal Code	30041		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent	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 that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No	

Ownership Information

Ownership Info	ormation
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FRN	0019289024	
Name	William A. Fielder, III.	
Address	PO Box	

	Street 1	2750 Luberon Lane		
	Street 2			
	City	Cumming		
	State ("NA" if non-U.S. address)	GA		
	Zip/Postal Code	30041		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, LC/LLC/PLLC Member			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Male		
	Ethnicity	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)			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes		

Ownership Information			
FRN	0019289032	0019289032	
Name	William C. Fielder	William C. Fielder	
Address	PO Box		
	Street 1	2750 Luberon Lane	
	Street 2		
	City	Cumming	
	State ("NA" if non-U.S. address)	GA	
	Zip/Postal Code	30041	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Hispanic or Latino	
1		1	

	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?			No
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.			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?	No
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 unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's 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 Yes or related to each other as parentchild or as siblings?

If " \underline{Yes} ," provide the following information for each such the relationship.

Family Relationships

, ,			
FRN	0019289032	Name	William C Fielder
FRN	0019289024	Name	William A Fielder , III .

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

No

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.

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: Manager Exact Legal Title or Name of Respondent: Coastal Television Broadcasting Group LLC Name: William A Fielder , III. Phone: 6787778659 11/22/2021