

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000173564** Submit Date: **2021-11-30** FRN: **0003474871**

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/30/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0003471398	The CW Television Stations Inc.	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2020 M Street, NW Licensing Dept.	Washington	DC	20036	+1 (202) 457- 4704	dryson@viacomcbs.

2. Contact Representative

Name		Organization	
	Nancy A. Ory	Lerman Senter PLLC	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2001 L Street, NW Suite 400	Washington	DC	20036	+1 (202) 416- 6791	nory@lermansenter. com

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	1	95	\$85.00
				Total	\$85.00

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	10/01/2021	
	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
The CW Television Stations Inc.	0003471398

Fac. ID No.	Call Sign	City	State	Service
23428	KSTW	TACOMA	WA	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.

Document Information		
Description of contract or instrument	By-Laws	
Parties to contract or instrument	State of Delaware	
Date of execution	12/1985	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate Document	

Document Information

Description of contract or instrument	Certificate of Incorporation
Parties to contract or instrument	State of Delaware
Date of execution	12/1985
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Corporate Document

Document Information		
Description of contract or instrument	Amendment to the Bylaws	
Parties to contract or instrument	State of Delaware	
Date of execution	02/2002	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate Document	

Document Information		
Description of contract or instrument	Certificate of Amendment of Certificate of Incorporation	
Parties to contract or instrument	State of Delaware	
Date of execution	01/2003	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate Document	

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.

FRN 0003471398		
FRN 0003471396	0003471398	
Entity Name The CW Television Stations Inc.	The CW Television Stations Inc.	
Address PO Box	РО Вох	

	Street 1	2020 M Street, NW Licensing	g Dept.
	Street 2		
	City	Washington	
	State ("NA" if non-U.S. address)	DC	
	Zip/Postal Code	20036	
	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%	<u> </u>
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one or	r more broadcast stations	No

Ownership Information			
FRN	0028955805		
Name	Christopher Fontana		
Address	PO Box		
	Street 1	1515 Broadway	
	Street 2		
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		r more broadcast stations	Yes

EDN	0024062247		
FRN	0024963217		
Name	David Hillman	David Hillman	
Address	PO Box		
	Street 1	1515 Broadway	
	Street 2		
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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 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	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information		
FRN	0024963258	
Name	James C. Morrison	
Address	РО Вох	
	Street 1	1515 Broadway
	Street 2	

	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	0019307073		
Name	Eric Sobczak	Eric Sobczak	
Address	РО Вох		
	Street 1	20 Stanwix Street	
	Street 2	Room 1018	
	City	Pittsburgh	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15222	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer	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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		r more broadcast stations	Yes

Ownership Information				
FRN	0021267794			
Name	Michele M. Scaringella			
Address	PO Box			
	Street 1	1515 Broadway		
	Street 2			
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10036	10036	
	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	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held?	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	Yes	

Ownership Information		
FRN	0019306620	
Name	Kenneth Koen	
Address	РО Вох	
	Street 1	1515 Broadway
	Street 2	

	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	0028959328		
Name	Syed A. Wasim	Syed A. Wasim	
Address	РО Вох		
	Street 1	1515 Broadway	
	Street 2		
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer	Officer	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Asian	

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 an attributable interest in one or more broadcast stations that do not appear on this report?		r more broadcast stations	Yes

Ownership Information			
FRN	0019306646	0019306646	
Name	Mallory Levitt		
Address	PO Box		
	Street 1	1515 Broadway	
	Street 2		
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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	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)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information		
FRN	0028959302	
Name	Naomi Waltman	
Address	PO Box	
	Street 1	1515 Broadway
	Street 2	

	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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	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)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	r more broadcast stations	Yes

Ownership Information			
FRN	0021267430	0021267430	
Name	Nicholas Poser	Nicholas Poser	
Address	РО Вох	РО Вох	
	Street 1	1515 Broadway	
	Street 2		
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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,	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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		r more broadcast stations	Yes

Ownership Information			
FRN	0019307271	0019307271	
Name	Michael Wittman		
Address	PO Box		
	Street 1	1515 Broadway	
	Street 2		
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes

Ownership Information		
FRN	0019297175	
Name	Julie Behuniak	
Address	PO Box	
	Street 1	1515 Broadway
	Street 2	

	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	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	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)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	r more broadcast stations	Yes

Ownership Information			
FRN	0019306281		
Name	Jo Ann Haller	Jo Ann Haller	
Address	PO Box		
	Street 1	20 Stanwix Street, Room 1014	
	Street 2		
	City	Pittsburgh	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15222	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer	Officer	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	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)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes		

Ownership Information				
FRN	0024963084	0024963084		
Name	John W. Bagwell	John W. Bagwell		
Address	РО Вох			
	Street 1	1515 Broadway		
	Street 2			
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10036		
	Country (if non-U.S. address)	United States		
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	10036 United States US		
	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)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	Yes	

Ownership Information			
FRN	0028930774	0028930774	
Entity Name	CBS Operations Inve	CBS Operations Investments Inc.	
Address	РО Вох		
	Street 1	2020 M Street, NW	
	Street 2	Licensing Dept.	

	City	Washington	
	State ("NA" if non-U.S. address)	DC	
	Zip/Postal Code	20036	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Stockholder		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	nation or Tribal entity	
Interest Percentages (enter percentage values	Voting	100.0%	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?	or more broadcast stations	Yes

Ownership Information			
FRN	0028955706		
Name	David Byrnes		
Address	PO Box		
	Street 1	1515 Broadway	
	Street 2		
	City	New York	
	State ("NA" if non-U.S. NY address)		
	Zip/Postal Code	10036	
	Country (if non-U.S. address)	United States	
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 (Equi	y Debt 0.	.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or mo	ore broadcast stations	Yes

Ownership Information				
FRN	0028955979	0028955979		
Name	Christopher Lovejoy	Christopher Lovejoy		
Address	PO Box			
	Street 1	1515 Broadway		
	Street 2			
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10036		
	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)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes	

Ownership Information		
FRN	0019306471	
Name	Michael Koczko	
Address	РО Вох	
	Street 1	1515 Broadway
	Street 2	
	City	New York
	State ("NA" if non-U.S. address)	NY

	Zip/Postal Code	10036	
	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	Gender	Male	
Persons Only)	Citizenship US Gender Male	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	United States US Male Not Hispanic or Latino White 0.0% 0.0% 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	Yes

Ownership Information				
FRN	0019283456	0019283456		
Name	Richard M. Jones			
Address	РО Вох			
	Street 1	1515 Broadway		
	Street 2			
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10036		
	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 (Equi	y Debt 0.	.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or mo	ore broadcast stations	Yes

Ownership Information				
FRN	0019306117	0019306117		
Name	Mindy Greene	Mindy Greene		
Address	PO Box			
	Street 1	1515 Broadway		
	Street 2			
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10036		
	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	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)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes	

Ownership Information		
FRN	2130017375	
Name	Naveen Chopra	
Address	РО Вох	
	Street 1	1515 Broadway
	Street 2	
	City	New York
	State ("NA" if non-U.S. address)	NY
		'

	Zip/Postal Code	10036	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Asian	
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 c	or more broadcast stations	Yes

Ownership Information			
FRN	2130015189		
Name	Christa A. D Alimonte		
Address	РО Вох		
	Street 1	1515 Broadway	
	Street 2		
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10036	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes	
(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?

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 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?

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

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

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.

File Name	Uploaded By	Attachment Type	Description
Viacom CBS Org Chart.pdf	Applicant	Ownership Chart	

Section III - Certification

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: SVP and Assoc. General Counsel Exact Legal Title or Name of Respondent: The CW Television Stations Inc. Name: John W. Bagwell Phone: 2128462675 11/30/2021