

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000175850 | Submit Date: 2021-12-01 | FRN: 0003768876

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 12/01/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0005944368	Four Seasons Peoria, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
5670 Wilshire Blvd. Suite 1620	Los Angeles	CA	90036	+1 (323) 965- 5400	fcc@ventechgroup.

2. Contact Representative

Name	Organization
Joan Stewart	Wiley Rein LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1776 K Street NW	Washington	DC	20006	+1 (202) 719-7438	jstewart@wiley.law

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	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
Four Seasons Peoria, LLC	0005944368

Fac. ID No.	Call Sign	City	State	Service
52280	WAOE	OSWEGO	IL	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	Assignment and Assumption Agreement and Fisrst Amendment to the Amended And Restated LLC Agreement of Four Seasons Peoria, LLC
Parties to contract or instrument	Four Seasons Broadcasting, LLC, Malibu Broadcasting, LLC and Venture Technologies Group, LLC
Date of execution	12/2013
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.

Ownership Information					
FRN	0005944368	0005944368			
Entity Name	Four Seasons Peoria, LLC	Four Seasons Peoria, LLC			
Address	PO Box	РО Вох			
	Street 1	5670 Wilshire Blvd.	5670 Wilshire Blvd.		
	Street 2	Suite 1620			
	City	Los Angeles			
	State ("NA" if non-U.S. address)	CA			
	Zip/Postal Code	90036			
	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 an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information		
FRN	0003768876	

Entity Name	Venture Technologies Group, LLC			
Address	РО Вох			
	Street 1	5670 Wilshire Blvd., Suite 16	520	
	Street 2			
	City	Los Angeles		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	90036		
	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	Voting	48.5%	Jointly Held? No	
from 0.0 to 100.0)	Equity	48.5%		
	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	0020015368				
Name	Thomas J. Wilson				
Address	PO Box				
\$	Street 1	3029 Prospect Avenue			
\$	Street 2				
	City	Cleveland			
	State ("NA" if non-U.S. address)	ОН			
Z	Zip/Postal Code	44115			
	Country (if non-U.S. address)	United States			
Listing Type (Other Interest Holder				
Positional Interests (check all that apply)	Officer				
	Citizenship	US			
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 or more broadcast stations that do not appear on this report?		Yes	

Ownership Information			
FRN	0019419092		
Entity Name	MALIBU BROADCASTING, LLC		
Address	PO Box		
	Street 1	3029 Prospect Avenue	
	Street 2		
	City	Cleveland	
	State ("NA" if non-U.S. OH address)		
	Zip/Postal Code	44115	
	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	Voting	48.5%	Jointly Held? No
from 0.0 to 100.0)	Equity	48.5%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this i	an attributable interest in one oreport?	r more broadcast stations	Yes

Ownership Information			
FRN	0021293626		
Name	Paul Koplin		
Address	PO Box		
	Street 1 5670 Wilshire Blvd., Suite 1620		
	Street 2		
	City	Los Angeles	

	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	90036		
	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	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 creport?	or more broadcast stations	Yes	
` ' '	nat any interests, including equi his filing are non-attributable. an explanation.	ity, financial, or voting	Yes	

(c) Does the Respondent or any reported interest holder No 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.

(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?

No

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

The Respondent must provide an FCC Registration Number

question. Please see the Instructions for detailed information

for each interest holder reported in response to this

and guidance concerning this requirement.

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

No

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.

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
VTG 2021 Form 323 Ownership Chart.pdf	Applicant	Ownership Chart	2021 Ownership Chart

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: Four Sesasons Peoria, LLC Name: Paul Koplin Phone: 3239655400