

(REFERENCE COPY - Not for submission)

FRN

0020014726

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000175903Submit Date:2021-12-01FRN:0003768876Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:12/01/2021Filing Status:Active

Section I - General Information

1. Respondent

Thomas Wilson GST Trust FBO Mallory Wilson

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3029 Prospect Avenue	Cleveland	ОН	44115	+1 (216) 361- 1000	tomw@malibufox. com

2. Contact Representative

Name	Organization
Joan Stewart	Wiley Rein LLP

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

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	Other Trust	

(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		F	FRN		
WLFM, LLC			001893	34182	
Fac. ID No.	Call Sign	City	ę	State	Service
128239	WRME-LD	CHICAGO		IL	LPD
Licensee/Permittee Name			FRN		
Four Seasons Peoria, LLC			00059	44368	
Fac. ID No.	Call Sign	City	St	ate	Service
52280	WAOE	OSWEGO	IL	-	DTV

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	contracts and other instruments report. In addition, attributable L disclosed by the licensee of the attributable JSA, or a network at Respondents, as well as License	set forth in 47 C.F.R. Section 73 ocal Marketing Agreements (LM brokering station on its ownersh ffiliation agreement, check the ap	full power television, AM, and/or FM stations should list all 8.3613(a) through (c) for the facility or facilities listed on this As) and attributable Joint Sales Agreements (JSAs) must be ip report. If the agreement is an attributable LMA, an oppropriate box. Otherwise, select "Other." Non-Licensee uthorizations for Class A television and/or low power television ion.	
	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 f	urther detail concerning interests	that must be reported in response to this question.	
		In FCC Registration Number for letailed information and guidance	each interest holder reported in response to this question. e concerning this requirement.	
	Ownership Information			
	FRN 0020014726			
	Entity Name	Thomas Wilson GST Trust FB	O Mallory Wilson	
	Address	PO Box		
		Street 1	3029 Prospect Avenue	
		Street 2		

City

Cleveland

	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	44115	
	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 c	or more broadcast stations	No

that do not appear on this report?

Ownership Information

FRN	9990139176			
Name	Terrence P. Fergus			
Address	PO Box			
	Street 1	6060 Parkland Blvd.		
	Street 2	Suite 100		
	City	Cleveland		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	44124		
	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	100.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	100.0%		
	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?	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 ex	hibit an explanation.
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(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 No or related to each other as parentchild or as siblings?

If "<u>Yes</u>," provide the following information for each such the relationship.

(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.	

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: Authorized Agent Exact Legal Title or Name of Respondent: Thomas Wilson GST Trust FBO Mallory Wilson Name: Jen Rasmussen Phone: 2169168424 12/01/2021