

### (REFERENCE COPY - Not for submission)

FRN

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# Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000176505
 Submit Date:
 2021-12-01
 FRN:
 0029924750

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 12/02/2021

 Filing Status:
 Active
 Status:
 Status Date:
 12/02/2021

# **Section I - General Information**

# 1. Respondent

Entity Name

0029924750 Taylor Made Bro		adcasting Network LLC				
Street Address	City (and Coun address)	try if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
900 S. Main Street	Grove		ОК	74344	+1 (918) 791- 1951	kgve@boltfiber. com

### 2. Contact Representative

Name	Organization
Tanner Linn	Taylor Made Broadcasting Network LLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
900 South Main Street	Grove	ОК	74345	+1 (918) 791-1951	kgve@boltfiber.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	MAR	3	95	\$255.00
		·	•	•	Total	\$255.00

# 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
Taylor Made Broadcasting Network LLC	0029924750

Fac. ID No.	Call Sign	City	State	Service
8184	KGVE	GROVE	ОК	FM
17691	KGLC	МІАМІ	ОК	FM
18056	KVIS	МІАМІ	ОК	AM

# 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	Articles of Formation	
Parties to contract or instrument	State of Oklahoma	
Date of execution	06/2020	
Date of expiration	No expiration date	

Agreement type (check all that apply)	Other Agreement Type: Articles of Formation
Document Information	

Document information		
Description of contract or instrument	Security Agreement	
Parties to contract or instrument	Licensee and Caleb Corporation/Northeast Oklahoma Broadcast Network, Inc.	
Date of execution	03/2021	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Security Agreement	

## 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	0029924750	
Entity Name	Taylor Made Broadcasting Network LLC	
Address	PO Box	
	Street 1	900 S. Main Street
	Street 2	
	City	Grove
	State ("NA" if non-U.S. address)	ОК
	Zip/Postal Code	74344
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
Positional Interests (check all that apply)	Respondent	
Tribal Nation or Tribal	Interest holder is not a Tribal nation or Tribal entity	

Entity			
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			No

that do not appear on this report?

### **Ownership Information** 0030639454 FRN Mark T. Linn Name Address PO Box Street 1 900 South Main Street Street 2 Grove City State ("NA" if non-U.S. OK address) **Zip/Postal Code** 74345 **United States** Country (if non-U.S. address) Listing Type Other Interest Holder LC/LLC/PLLC Member **Positional Interests** (check all that apply) Citizenship, Gender, Citizenship US Ethnicity, and Race Male Gender Information (Natural Persons Only) Ethnicity Not Hispanic or Latino Race White Interest Percentages Voting 51.0% **Jointly Held?** (enter percentage values No from 0.0 to 100.0) 51.0% Equity **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

### **Ownership Information**

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FRN	0030639504	
Name	Tanner I. Linn	
Address	PO Box	
	Street 1	900 South Main Street
	Street 2	

	City	Grove	
	State ("NA" if non-U.S. address)	ОК	
	Zip/Postal Code	74345	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
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	49.0%	Jointly Held? No
	Equity	49.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	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 holderNohold an attributable interest in any newspaper entities inthe same market as any station for which this report isfiled, as defined in 47 C.F.R. Section 73.3555?

If "<u>Yes</u>," 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 Yes or related to each other as parentchild or as siblings?

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

#### **Family Relationships**

FRN	0030639454	Name	Mark T Linn
FRN	0030639504	Name	Tanner I Linn
Relationship	Parent/Child		

(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.	

# 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.

The licensee has two individual members. No flow chart is required.

### **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: <b>Member</b> Exact Legal Title or Name of Respondent: <b>Taylor Made Broadcasting Network LLC</b> Name: <b>Tanner Lee Linn</b> Phone: <b>9187911951</b> 12/01/2021