

FRN

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: 0000183598 Submit Date: 2022-01-31 FRN: 0031701220 Status: **Received** Status Date: Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report 01/31/2022 Filing Status: Active

Section I - General Information

1. Respondent

Entity Name

003170122	0	Big Horn Tele	evision Group LLC		
Street	City (and Count	ny if non U	State ("NA" if non U.S.	7in	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
610 Peachtree Parkway Suite 203	Cumming	GA	30041	+1 (678) 234- 1271	drmichaelhogan@gmail. com

2. Contact Representative

Name	Organization
Daniel 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

Not Applicable

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: Transfer of control or assignment of license/permit Purpose "As of" date 12/31/2021 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) /Permittees(s) and Station(s) /Permit(s)

Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/Permittee Name	FRN
BHTV License LLC	0029636099

Fac. ID No.	Call Sign	City	State	Service
63162	KGWL-TV	LANDER	WY	DTV
63170	KGWR-TV	ROCK SPRINGS	WY	DTV
63175	K16AE-D	GILLETTE	WY	LPD
63177	KGWC-TV	CASPER	WY	DTV
63179	K28KM-D	CLARETON	WY	LPD

Licensee/Permittee Nat	me	FRN	FRN		
BRTV License LLC 0031173073					
Fac. ID No.	Call Sign	City	State	Service	
73255	WMDN	MERIDIAN	MS	DTV	

Section II – Non-Biennial Ownership Information

Licensee/Permittee Respondents should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) 1.47 C.F.R. through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and Section 73.3613 attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If and Other the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Documents Otherwise, select "Other." Non-Licensee/Permittee Respondents should select "Not Applicable" in response to this question. Not Applicable. (a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by 2. Ownership generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent Interests 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) or Permittee(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) or Permittee(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 guestion. 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 0031701220 **Big Horn Television Group LLC Entity Name**

Address	PO Box				
	Street 1	610 Peachtree Parkway			
	Street 2	Suite 203			
	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				
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	t 0.0%			
Does interest holder have a that do not appear on this re	or more broadcast stations	No			

Ownership Information

FRN	0029710969				
Name	Michael G. Hogan				
Address	PO Box				
	Street 1	610 Peachtree Parkway			
	Street 2	Suite 203			
	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 Membe	er, Other - Manager			
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No		
from 0.0 to 100.0) Total assets (Equity Debt 100.0% Plus)					
Does interest holder have a that do not appear on this re	n attributable interest in one o eport?	or more broadcast stations	No		

Ownership Information

FRN 00	031906092
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Name	Sarah Miles				
Address	PO Box				
	Street 1	610 Peachtree Parkway			
	Street 2	Suite 203	Suite 203		
	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				
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	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?					
(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.					



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

(e) Is Respondent seeking an attribution exemption for any officer or director with No duties wholly unrelated to the Licensee(s)?

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.

Certif	ication

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: President, CEO and Manager Exact Legal Title or Name of Respondent: Big Horn Television Group LLC Name: Michael Hogan Phone: 6782341271 01/31/2022