

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000228370Submit Date:2023-11-28FRN:0002855179Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:11/28/2023Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name
0015222631	Madison Halsted LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
26 NORTH HALSTED STREET	CHICAGO	IL	60661	+1 (312) 705- 2600	efieldman@metv. com

2. Contact Representative

Name	Organization
Matthew S. DelNero, Esq.	Covington & Burling LLP

			Zip		
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email
One CityCenter 850 Tenth Street, N.W.	Washington	DC	20001	+1 (202) 662-5543	mdelnero@cov.com

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	Limited liability company		

(b) Provide the following information about this report:

· · · · · · · · · · · · · · · · · · ·	
Purpose	Biennial
"As of" date	10/01/2023
	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/Permitte	e Name		FRN	
Channel 41 and 63 Limited Partnership			00095623	380
Fac. ID No.	Call Sign	City	State	Service
71422	WBME-CD	MILWAUKEE	WI	DCA
168618	WYTU-LD	MILWAUKEE	WI	LPD
Licensee/Permitte	e Name		FRN	
WBND-TV Limited	Partnership		0009562448	
Fac. ID No.	Call Sign	City	State	Service
168647	WMYS-LD	SOUTH BEND	IN	LPD
Licensee/Permitte	e Name		FRN	
Channel 23 Limited	d Partnership		0009562422	
Fac. ID No.	Call Sign	City	State	Service
71425	WWME-CD	CHICAGO	IL	DCA
Licensee/Permitte	e Name		FRN	
WCIU-TV Limited I	Partnership		0009562265	
Fac. ID No.	Call Sign	City	State	Service
71428	WCIU-TV	CHICAGO	IL	DTV
Licensee/Permitte	e Name		FRN	
WCWW-TV Limited	d Partnership		0009562471	
Fac. ID No.	Call Sign	City	State	Service
24617	WCWW-LD	SOUTH BEND	IN	LPD
Licensee/Permitte	e Name		FRN	
WDJT-TV Limited	Partnership		0009562349	
Fac. ID No.	Call Sign	City	State	Service

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.

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 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	0015222631			
Entity Name	Madison Halsted LLC			
Address	PO Box			
	Street 1	26 NORTH HALSTED STREE	г	
	Street 2			
	City	CHICAGO		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	60661		
	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 n	ation 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?			No	

Ownership Information

FRN	0020055612			
Name	Norman Shapiro			
Address	PO Box			
	Street 1	26 North Halsted Street		
	Street 2			
	City	Chicago	Chicago	
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	60661		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder,	Other - Trustee & Co-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	53.2%	Jointly Held? No	
from 0.0 to 100.0)	Equity	21.7%		
	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	Yes	

Ownership Information

FRN	0020055653		
Name	Fred Bishop		
Address	PO Box		
	Street 1	26 North Halsted Street	
	Street 2		
	City	Chicago	
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code	60661	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director, Other - Trustee & Co-Trustee		

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	29.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	75.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or m that do not appear on this report?		r more broadcast stations	Yes

Ownership Information				
FRN	0020055661			
Entity Name	Norman Shapiro FN Trust			
Address	PO Box			
	Street 1	26 North Halsted Street		
	Street 2			
	City	Chicago		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	60661		
	Country (if non-U.S. address)	United States		
Listing Type	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	16.1%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.3%		
	Total assets (Equity Debt Plus)			
Does interest holder have ar that do not appear on this re	n attributable interest in one o port?	r more broadcast stations	No	

Ownership Information

FRN	0027096577			
Name	Evan Fieldman			
Address	PO Box			
	Street 1	26 North Halsted Street		

	Street 2			
	City	Chicago		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	60661		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	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)			
Does interest holder have an that do not appear on this re	Yes			
(b) Respondent certifies that interests, not reported in this	Yes			

If "No," submit as an exhibit an explanation.

(c) 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.

(d) 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.	

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, Secretary and Treasurer Exact Legal Title or Name of Respondent: Madison Halsted LLC Name: Norman H. Shapiro Phone: 3127052600 11/28/2023