

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000230600** Submit Date: **2023-12-01** FRN: **0020095352**

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 12/01/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0020264826	Townsquare Media Licensee of Albany and Lafayette, Inc.	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
1 Manhattanville Road Suite 202	Purchase	NY	10577	+1 (203) 861-0900	fcccontact@townsquaremedia.

2. Contact Representative

Name	Organization
Emilie de Lozier	Wilkinson Barker Knauer, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW Suite 800N	Washington	DC	20036	+1 (202) 383-3378	edelozier@wbklaw.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	For-profit corporation	

(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/Permittee Name	FRN
Townsquare Media of Lafayette, LLC	0006076970

Fac. ID No.	Call Sign	City	State	Service
275	KROF	ABBEVILLE	LA	AM
12674	KTDY	LAFAYETTE	LA	FM
12682	KPEL	LAFAYETTE	LA	AM
54650	KHXT	ERATH	LA	FM
59288	KPEL-FM	BREAUX BRIDGE	LA	FM
59289	KMDL	KAPLAN	LA	FM

Licensee/Permittee Name	FRN
Townsquare Media of Albany, Inc.	0015904147

Fac. ID No.	Call Sign	City	State	Service
6613	WQBK-FM	MALTA	NY	FM
22004	WTMM-FM	MECHANICVILLE	NY	FM
40767	WPBZ-FM	RENSSELAER	NY	FM
40769	WQSH	COBLESKILL	NY	FM
72118	WGNA-FM	ALBANY	NY	FM

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	0020264826				
Entity Name	Townsquare Media Licensee	Townsquare Media Licensee of Albany and Lafayette, Inc.			
Address	PO Box				
	Street 1	1 Manhattanville Road			
	Street 2	Suite 202	Suite 202		
	City	Purchase			
	State ("NA" if non-U.S. address)	NY			
	Zip/Postal Code	10577			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
Positional Interests (check all that apply)	Respondent	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal ı	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 Yes that do not appear on this report?				

Ownership Information				
FRN	0019970656			
Name	Erik Hellum	Erik Hellum		
Address	PO Box			
	Street 1	1 Manhattanville Road		
	Street 2	Suite 202		
	City	Purchase		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10577		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			

Positional Interests (check all that apply)	Officer		
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	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	0021302039	0021302039	
Name	Claire Yenicay	Claire Yenicay	
Address	PO Box		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Manager	Officer, Other - Manager	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
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)		
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

FRN	0020258943		
Name	Stuart Rosenstein		
Address	PO Box		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code 10577		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Manager		
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)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information		
FRN	0021302013	
Name	Bill Wilson	
Address	PO Box	
	Street 1	1 Manhattanville Road
	Street 2 Suite 202	
	City Purchase	
	State ("NA" if non-U.S. NY address)	
	Zip/Postal Code	10577
	Country (if non-U.S. United States address)	
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	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	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?		Yes	

Ownership Information			
FRN	0020258976	0020258976	
Name	Scott Schatz		
Address	PO Box		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	Country (if non-U.S. address)	United States	
Listing Type	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)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information	
FRN	0020258935

Name	Steven Price		
Address	РО Вох		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Manager		
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)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information		
FRN	0020264842	
Entity Name	Townsquare Media of Albany and Lafayette, Inc.	
Address	PO Box	
	Street 1	1 Manhattanville Road
	Street 2 Suite 202 City Purchase State ("NA" if non-U.S. NY address)	
	Zip/Postal Code	10577
	Country (if non-U.S. United States address)	
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	100.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	100.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

FRN	0031566037		
Name	Allison Zolot		
Address	РО Вох		
	Street 1	1 Manhattanville Road	
	Street 2	Suite 202	
	City	Purchase	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10577	
	Country (if non-U.S. address)	United States	
_isting Type	Other Interest Holder		
Positional Interests check all that apply)	Officer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race nformation (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
nterest Percentages enter percentage values	Voting	0.0%	Jointly Held? No
rom 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
	an attributable interest in one or	r more broadcast stations	Yes

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

No

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 "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.

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: Senior Vice President and General Counsel Exact Legal Title or Name of Respondent: Townsquare Media Licensee of Albany and Lafayette, Inc. Name: Allison Zolot Phone: 2038610900