

FRN

0034454629

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

 File Number:
 0000235725
 Submit Date:
 2024-01-18
 FRN:
 0034454629

 Purpose:
 Commercial Broadcast Stations Non-Biennial Ownership Report
 Status:
 Received
 Status Date:

 01/18/2024
 Filing Status:
 Active
 Status:
 Status:
 Status:

Section I - General Information

BENJAMIN J. TISCH 1989 TRUST

1. Respondent

| Entity Name |
|-------------|
| |

| Street Address | City (and Country if non U. S. address) | State ("NA" if non-U.S. address) | Zip Code | Phone | Email |
|--------------------|--|-------------------------------------|-------------|-----------------------|--------------------------------|
| 460 Park Avenue | New York | NY | 10022 | +1 (212) 935- 6655 | schechter@towerviewllc. com |

2. Contact Representative

| Name | Organization |
|-----------------------------|-----------------------------|
| Gary S. Smithwick, Esquire. | Smithwick & Belendiuk, P.C. |

| Street Address | City (and Country if non U.S. address) | State | Zip Code | Phone | Email |
|--|---|-------|-------------|-----------------------|-----------------------------|
| 5028 Wisconsin Avenue, N.W. Suite 301 | Washington | DC | 20016 | +1 (202) 363- 4560 | gsmithwick@fccworld. 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 | Other Trust | | |

| b) Provide the following | , information | about this report. | |
|--------------------------|---------------|--------------------|--|
| D) FIOVICE LITE IONOWING | a miormation | about this report. | |
| | | | |

| Purpose | Transfer of control or assignment of license/permit |
|--------------|--|
| "As of" date | 12/20/2023 When filing a biennial ownership report or validating |
| | and resubmitting a prior biennial ownership report of valuating 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 | |
|-------------------------|------------|--|
| Saga Broadcasting, LLC | 0009112459 | |

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|------------|-------|---------|
| 4633 | KBAI | BELLINGHAM | WA | AM |
| 34467 | KGMI | BELLINGHAM | WA | AM |
| 34469 | KISM | BELLINGHAM | WA | FM |
| 58886 | KAFE | BELLINGHAM | WA | FM |
| 58887 | KPUG | BELLINGHAM | WA | АМ |

| Licensee/Permittee Name | FRN |
|-------------------------------|------------|
| Franklin Communications, Inc. | 0003303344 |

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|--------------|-------|---------|
| 7111 | WBCO | BUCYRUS | ОН | АМ |
| 7112 | WQEL | BUCYRUS | ОН | FM |
| 11277 | WLVQ | COLUMBUS | ОН | FM |
| 22339 | WSNY | COLUMBUS | ОН | FM |
| 30563 | WNNP | RICHWOOD | ОН | FM |
| 54556 | WVMX | WESTERVILLE | ОН | FM |
| 60590 | WNND | PICKERINGTON | ОН | FM |

| Licensee/Permittee Name | FRN |
|-------------------------------|------------|
| Tidewater Communications, LLC | 0009269473 |

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|-----------------|-------|---------|
| 10649 | WINA | CHARLOTTESVILLE | VA | AM |
| 10653 | WQMZ | CHARLOTTESVILLE | VA | FM |
| 19837 | WWWV | CHARLOTTESVILLE | VA | FM |
| 39492 | WQPO | HARRISONBURG | VA | FM |
| 39493 | WSVA | HARRISONBURG | VA | AM |
| 40648 | WMQR | BROADWAY | VA | FM |
| 52394 | WCNR | KESWICK | VA | FM |
| 60105 | WSIG | MOUNT JACKSON | VA | FM |
| 67080 | WNOR | NORFOLK | VA | FM |
| 67082 | WAFX | SUFFOLK | VA | FM |
| 72143 | WHBG | HARRISONBURG | VA | AM |
| 73935 | WWRE | BRIDGEWATER | VA | FM |

| 74161 | WCVL-FM | CHARLOTTESVILLE | VA | FM |
|--------|---------|-----------------|----|----|
| 161156 | WVAX | CHARLOTTESVILLE | VA | AM |

| Licensee/Permittee Name | FRN |
|--------------------------------------|------------|
| Saga Communications of Arkansas, LLC | 0008049322 |

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|-----------|-------|---------|
| 18085 | KJBX | CASH | AR | FM |
| 53472 | KDXY | LAKE CITY | AR | FM |
| 53473 | KEGI | TRUMANN | AR | FM |

| Licensee/Permittee Name | FRN |
|--|------------|
| Saga Communications of North Carolina, LLC | 0008227787 |

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|-----------------|-------|---------|
| 37242 | WOXL-FM | BILTMORE FOREST | NC | FM |
| 51155 | WYSE | CANTON | NC | AM |
| 68835 | WISE | ASHEVILLE | NC | AM |
| 72070 | WTMT | WEAVERVILLE | NC | FM |

| Licensee/Permittee Name | FRN | |
|----------------------------------|------------|--|
| Saga Communications Of Iowa, LLC | 0003576667 | |

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|------------|-------|---------|
| 7823 | KOEZ | AMES | IA | FM |
| 28882 | KAZR | PELLA | IA | FM |
| 29078 | KICD | SPENCER | IA | AM |
| 29079 | KICD-FM | SPENCER | IA | FM |
| 29080 | KMRR | SPENCER | IA | FM |
| 58533 | KPSZ | DES MOINES | IA | AM |
| 58534 | KRNT | DES MOINES | IA | AM |
| 58541 | KSTZ | DES MOINES | IA | FM |
| 58547 | KIOA | DES MOINES | IA | FM |

| Licensee/Permittee Name | FRN |
|---------------------------------------|------------|
| Saga Communications of Tuckessee, LLC | 0005005111 |

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|---------------|-------|---------|
| 12495 | WNZE | CLARKSVILLE | TN | AM |
| 14915 | WRND | OAK GROVE | КY | FM |
| 61253 | WCVQ | FORT CAMPBELL | КY | FM |

| 61260 | WQEZ | FORT CAMPBELL | KY | AM |
|-------|------|---------------|----|----|
| 65202 | WKFN | CLARKSVILLE | TN | AM |
| 73970 | WVVR | HOPKINSVILLE | KY | FM |
| 83979 | WZZP | HOPKINSVILLE | KY | FM |

Saga Communications of South Dakota, LLC

FRN

FRN

0009269424

0009269820

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|----------|-------|---------|
| 42113 | KUQL | ETHAN | SD | FM |
| 43239 | КМІТ | MITCHELL | SD | FM |
| 57839 | WNAX-FM | YANKTON | SD | FM |
| 57846 | WNAX | YANKTON | SD | AM |

Licensee/Permittee Name

Saga Communications of New England, LLC

Fac. ID No. Call Sign City State Service 9427 WIII CORTLAND NY FM 9795 WSNI KEENE NH FΜ WMLL 17278 BEDFORD NH FΜ MARLBORO VT 17797 WRSY FM 18048 WHCU ITHACA NY AM 18051 WYXL ITHACA NY FΜ 25833 WHAI GREENFIELD MA FΜ 32390 WQNY ITHACA NY FM 32391 WNYY ITHACA NY AM 36406 WFIZ ODESSA NY FΜ 36833 WKBK KEENE NH AM WKNE 36834 KEENE NH FM 46962 WHMP NORTHAMPTON MA AM WLZX-FM 46963 NORTHAMPTON MA FΜ WPOR 49982 PORTLAND ME FΜ 49983 WBAE PORTLAND ME AM ORANGE-ATHOL 51118 WQVD MA AM GREENFIELD 54779 WIZZ MA AM 54780 WPVQ-FM GREENFIELD FΜ MA WCLZ NORTH YARMOUTH FΜ 56569 ME

| 57227 | WZBK | KEENE | NH | AM |
|-------|---------|-----------------|----|----|
| 57228 | WINQ-FM | WINCHESTER | NH | FM |
| 57780 | WKVT-FM | BRATTLEBORO | VT | FM |
| 57781 | WINQ | BRATTLEBORO | VT | AM |
| 58536 | WYNZ | SOUTH PORTLAND | ME | FM |
| 58538 | WZAN | PORTLAND | ME | AM |
| 58543 | WFEA | MANCHESTER | NH | AM |
| 58544 | WGAN | PORTLAND | ME | AM |
| 58546 | WLZX | EAST LONGMEADOW | MA | AM |
| 58548 | WMGX | PORTLAND | ME | FM |
| 58550 | WZID | MANCHESTER | NH | FM |
| 58551 | WAQY | SPRINGFIELD | MA | FM |
| 73088 | WVAE | BIDDEFORD | ME | АМ |

FRN

0009108051

Licensee/Permittee Name

Saga South Communications, LLC

Fac. ID No. Call Sign City State Service 737 WNDD ALACHUA FL FM 1099 WYND-FM SILVER SPRINGS FL FΜ 3969 WXST HOLLYWOOD SC FΜ 6634 WMXZ ISLE OF PALMS SC FM WCKN MONCKS CORNER SC FM 11651 SC 24776 WAVF HANAHAN FΜ 25206 WOEZ BURTON SC FΜ 40705 WLHH RIDGELAND SC FM 49910 WVSC PORT ROYAL SC FM WOGK 49962 OCALA FL FΜ WSPO CHARLESTON SC 60038 AM 72201 WNDN CHIEFLAND FL FM

| Licensee/Permittee Name | FRN |
|--------------------------------------|------------|
| Saga Communications of Illinois, LLC | 0009269655 |

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|-------------|-------|---------|
| 9960 | WDBR | SPRINGFIELD | IL | FM |
| 9961 | WTAX | SPRINGFIELD | IL | AM |
| 9964 | WTAX-FM | SHERMAN | IL | FM |

| 28195 | WYXY | SAVOY | IL | FM |
|-------|------|-------------|----|----|
| 41592 | WREE | URBANA | IL | FM |
| 58537 | WYMG | СНАТНАМ | IL | FM |
| 58539 | WIXY | CHAMPAIGN | IL | FM |
| 58542 | WLRW | CHAMPAIGN | IL | FM |
| 58549 | WLFZ | SPRINGFIELD | IL | FM |

Licensee/Permittee Name

Lakefront Communications, LLC 0009180795

FRN

| Fac. ID No. | Call Sign | City | State | Service |
|-------------|-----------|-----------------|-------|---------|
| 26222 | WJMR-FM | MENOMONEE FALLS | WI | FM |
| 36370 | WKLH | MILWAUKEE | WI | FM |
| 36371 | WJOI | MILWAUKEE | WI | AM |
| 36372 | WHQG | MILWAUKEE | WI | FM |
| 67484 | WRXS | BROOKFIELD | WI | FM |

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 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** 0034454629 FRN **BENJAMIN J. TISCH 1989 TRUST Entity Name**

| Address | PO Box | | | | |
|---|--|---------------------------|---------------------|--|--|
| | Street 1 | 460 Park Avenue | | | |
| | Street 2 | | | | |
| | City | New York | New York | | |
| | State ("NA" if non-U.S. address) | NY | | | |
| | Zip/Postal Code | 10022 | | | |
| | 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) | 0.0% | | | |
| Does interest holder have a that do not appear on this re | n attributable interest in one c eport? | r more broadcast stations | No | | |

Ownership Information

| FRN | 0034454496 | | |
|--|---|---------------------------|---------------------|
| | | | |
| Name | James Tisch | James Tisch | |
| Address | PO Box | | |
| | Street 1 | 460 Park Avenue | |
| | Street 2 | 20th Floor | |
| | City | New York | |
| | State ("NA" if non-U.S. address) | NY | |
| | Zip/Postal Code | 10022 | |
| | Country (if non-U.S. address) | United States | |
| Listing Type | Other Interest Holder | | |
| Positional Interests (check all that apply) | Other - Co-Trustee | | |
| Interest Percentages (enter percentage values | Voting | 33.3% | Jointly Held? No |
| from 0.0 to 100.0) | Total assets (Equity Debt Plus) | | |
| Does interest holder have a that do not appear on this | an attributable interest in one o report? | r more broadcast stations | No |

| FRN | 0019929629 |
|-----|------------|
| | |
| • | |

| Name | Daniel R. Tisch | | | |
|--|--|---------------------------|---------------------|--|
| Address | PO Box | | | |
| | Street 1 | 460 Park Avenue | | |
| | Street 2 | 20th Floor | | |
| | City | New York | New York | |
| | State ("NA" if non-U.S. address) | NY | | |
| | Zip/Postal Code | 10022 | | |
| | Country (if non-U.S. address) | United States | | |
| Listing Type | Other Interest Holder | | | |
| Positional Interests (check all that apply) | Other - Co-Trustee | | | |
| Interest Percentages (enter percentage values | Voting | 33.3% | Jointly Held? No | |
| from 0.0 to 100.0) | 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 | |

| Ownership Information | | | | |
|--|-------------------------------------|-----------------|---------------------|--|
| FRN | 0034454405 | | | |
| Name | ANDREW TISCH | | | |
| Address | PO Box | | | |
| | Street 1 | 460 Park Avenue | | |
| | Street 2 | 20th Floor | | |
| | City | New York | | |
| | State ("NA" if non-U.S. address) | NY | | |
| | Zip/Postal Code | 10022 | | |
| | Country (if non-U.S. address) | United States | | |
| Listing Type | Other Interest Holder | | | |
| Positional Interests (check all that apply) | Other - Co-Trustee | | | |
| Interest Percentages (enter percentage values | Voting | 33.3% | Jointly Held? No | |
| from 0.0 to 100.0) | Total assets (Equity Debt Plus) | | | |
| Does interest holder have an attributable interest in one or more broadcast stations No 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. 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 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 | 0034454496 | Name | James Tisch |
|--------------|------------|------|--------------|
| FRN | 0034454405 | Name | ANDREW TISCH |
| Relationship | Siblings | | |

Family Relationships

| FRN | 0034454496 | Name | James Tisch |
|--------------|------------|------|----------------|
| FRN | 0019929629 | Name | Daniel R Tisch |
| Relationship | Siblings | | |

Family Relationships

| FRN | 0019929629 | Name | Daniel R Tisch |
|--------------|------------|------|----------------|
| FRN | 0034454405 | Name | ANDREW TISCH |
| Relationship | Siblings | | |

| (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. | |

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: Managing Member, Towerview LLC Exact Legal Title or Name of Respondent: Benjamin J. Tisch 1989 Trust Name: Daniel R. Tisch Phone: 2129356655 |
|---------------|--|--|
| | | 01/18/2024 |