

#### (REFERENCE COPY - Not for submission)

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

 File Number:
 0000163511
 Submit Date:
 2021-10-12
 FRN:
 0025637547

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 10/25/2021

 Filing Status:
 Active
 Status:
 Status Date:
 10/25/2021

#### **Section I - General Information**

#### 1. Respondent

# FRN Entity Name 0025637547 Frontier Media, LLC

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3161 Channel Drive Suite 2	Juneau	АК	99801	+1 (907) 586-3630	richard@frontiermediausa. com

#### 2. Contact Representative

Name	Organization
Jonathan Mark, Esq.	Davis Wright Tremaine LLP

Street	City (and Country if non U.S.	·			<b>F</b>
Address	address)	State	Code	Phone	Email
1301 K	Washington	DC	20005	+1 (202) 973-	JonathanMark@dwt.
Street, N.W.				4217	com
Suite 500 East					

#### 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:

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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.	

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

Licensee/Permittee Name	FRN	
Alaska Broadcast Communications, Inc.	0003801016	

Fac. ID No.	Call Sign	City	State	Service
788	KTKN	KETCHIKAN	AK	AM
789	KGTW	KETCHIKAN	AK	FM
32950	КТКИ	JUNEAU	AK	FM
60516	KIFW	SITKA	AK	AM
60517	KSBZ	SITKA	AK	FM
61235	KJNO	JUNEAU	AK	AM

Licensee/Permittee Name	FRN
Jo-Al Broadcasting, Inc.	0010307825

Fac. ID No.	Call Sign	City	State	Service
31348	КТОҮ	TEXARKANA	AR	FM

FRN

0017818899

Licensee/Permittee Name	
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Juneau Alaska Communications, LLC

Fac. ID No.	Call Sign	City	State	Service
820	KSUP	JUNEAU	AK	FM
823	KINY	JUNEAU	AK	AM
161171	кххј	JUNEAU	AK	AM

Licensee/Permittee Name	FRN
Texarkana Radio Center Licenses, LLC	0022201115

Fac. ID No.	Call Sign	City	State	Service
33541	KTFS-FM	TEXARKANA	AR	FM
33542	KTFS	TEXARKANA	тх	AM
33729	КСМС	TEXARKANA	тх	AM
33762	КВҮВ	HOPE	AR	FM
165971	КТТҮ	NEW BOSTON	тх	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.

Entity Name Fro Address PO Stro Stro City Sta add	ate ("NA" if non-U.S. dress)	3161 Channel Drive Suite 2 Juneau AK		
Address PO Stro City Sta add	D Box reet 1 reet 2 ty ate ("NA" if non-U.S. dress)	Suite 2 Juneau		
Stro Stro City Sta add	reet 1 reet 2 ty ate ("NA" if non-U.S. dress)	Suite 2 Juneau		
Stro City Sta add	reet 2 ty ate ("NA" if non-U.S. dress)	Suite 2 Juneau		
City Sta ado	ty ate ("NA" if non-U.S. dress)	Juneau		
Sta	ate ("NA" if non-U.S. dress)			
ado	dress)	АК		
Zin		АК		
	p/Postal Code	99801		
	ountry (if non-U.S. dress)	United States		
Listing Type Res	Respondent			
Positional InterestsRes(check all that apply)	Respondent			
Tribal Nation or Tribal Inte	Interest holder is not a Tribal nation or Tribal entity			
(enter percentage values	ting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	juity	0.0%		
Tot Plu	tal assets (Equity Debt us)	0.0%		
Does interest holder have an attri that do not appear on this report?		more broadcast stations	No	

**Ownership Information** 

FRN	0026415299			
Name	Richard J. Burns			
Address	PO Box	(		
	Street 1	3161 Channel Drive		
	Street 2	Suite 2		
	City	Juneau		
	State ("NA" if non-U.S. address)	АК		
	Zip/Postal Code	99801		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member			
Citizenship, Gender,	Citizenship	AU		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	50.0%		
	Total assets (Equity Debt Plus)	50.0%		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

<b>O</b>	I
Ownership	Information

Ownership Information				
FRN	0026415323	0026415323		
Name	Sharon Burns	Sharon Burns		
Address	PO Box			
	Street 1	3161 Channel Drive		
	Street 2	Suite 2		
	City	Juneau		
	State ("NA" if non-U.S. address)	АК		
	Zip/Postal Code	99801		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member			

Citizenship	AU	
Gender	Female Not Hispanic or Latino	
Ethnicity		
Race	White	
Voting	50.0%	Jointly Held? No
Equity	50.0%	
Total assets (Equity Debt Plus)	50.0%	
an attributable interest in one or report?	r more broadcast stations	No
	Gender Ethnicity Race Voting Equity Total assets (Equity Debt Plus) an attributable interest in one o	GenderFemaleEthnicityNot Hispanic or LatinoRaceWhiteVoting50.0%Equity50.0%Total assets (Equity Debt Plus)50.0%S0.0%

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?	No
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.	
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.	

(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	0026415323	Name	Sharon Burns	
FRN	0026415299	Name	Richard J Burns	
Relationship	Spouses			

(e) Is Respondent seeking an attribution exemption for any officer or director with<br/>duties wholly unrelated to the Licensee(s)?NoIf "Yes," complete the information in the required fields and submit an Exhibit fully describing<br/>that individual's duties and responsibilities, and explaining why that individual should not be<br/>attributed an interest.No

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>Managing Member</b> Exact Legal Title or Name of Respondent: <b>Frontier Media, LLC</b> Name: <b>Richard Burns</b> Phone: <b>9075863630</b> 10/12/2021