

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

File Number:0000173452Submit Date:2021-11-30FRN:0031130370Purpose:Commercial Broadcast Stations Non-Biennial Ownership ReportStatus:Status:

11/30/2021Filing Status: Active

Status: **Received** Status Date:

Section I - General Information

1. Respondent

FRN	Entity Name
0031130370	Chelan Valley Media Group LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 1416	Chelan	WA	98816	+1 (206) 399- 8716	karenheric@kozi. com

2. Contact Representative

Name	Organization
David G. O'Neil, Esq.	Rini O'Neil, PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2101 L Street, NW Suite 300	Washington	DC	20037	+1 (202) 955-3931	doneil@rinioneil.com

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Limited liability company	

(b) Provide the following information about this report:

Purpose	Transfer of control or assignment of license/permit
"As of" date	11/28/2021
	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.

and Station(s) /Permit(s)

Licensee/Permittee Name				FRN	
Chelan Valley Media Group LLC			003113037	0031130370	
Fac. ID No. Call Sign City				Service	
49366	KOZI-FM	CHELAN	WA	FM	
49370	KOZI	CHELAN	WA	АМ	
162412	KZAL	MANSON	WA	FM	

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee/Permittee Respondents 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/Permittee Respondents should select "Not Applicable" in response to this question.

Document Information				
Description of contract or instrument	Certificate of Formation			
Parties to contract or instrument	State of Washington			
Date of execution	05/2021			
Date of expiration	05/2022			
Agreement type (check all that apply)	Other Agreement Type: Governance Document			

Document Information			
Description of contract or instrument	Limited Liability Company Agreement		
Parties to contract or instrument	Chelan Valley Media Group LLC		
Date of execution	05/2021		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Governance Document		

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) 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				
FRN	0031130370	0031130370		
Entity Name	Chelan Valley Media Group L	Chelan Valley Media Group LLC		
Address	PO Box	1416		
	Street 1			
	Street 2			
	City	Chelan		
	State ("NA" if non-U.S. address)	WA		
	Zip/Postal Code	98816		
	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 an attributable interest in one or more broadcast stations that do not appear on this report?			No	

Ownership Information

e merenp mermanen						
FRN	0031684095					
Name	Melissa D. Davis					
Address	PO Box					
	Street 1	5028 47th Avenue NE				
	Street 2					
City		Seattle				
	State ("NA" if non-U.S. address)	WA				
	Zip/Postal Code	98105				
	Country (if non-U.S. address)					
Listing Type	Other Interest Holder					
Positional Interests (check all that apply)	LC/LLC/PLLC Member					
Interest Percentages (enter percentage values						

from 0.0 to 100.0)	Total assets (Equity Debt Plus)	25.0%	
Does interest holder have an	No		

that do not appear on this report?

Ownership Information			
FRN	0031684160		
Name	Karen Heric		
Address	PO Box		
	Street 1	50 Harris Row	
	Street 2		
	City	Manson	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98831	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	25.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	25.0%	
Does interest holder have a that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No

Ownership Information

FRN	0031684178	
Name	Matthew Peters	
Address	PO Box	
	Street 1	137 Summer Breeze Road
	Street 2	
	City	Manson
	State ("NA" if non-U.S. address)	WA
	Zip/Postal Code	98331
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	LC/LLC/PLLC Member	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	25.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	25.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

that do not appear on this repor

Ownership Information			
FRN	0031687320		
Entity Name	Allan C. Mayer Jr. Exempt Descendants Trust		
Address	PO Box	941	
	Street 1		
	Street 2		
	City	Manson	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98331	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	25.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	25.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	
	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes



(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).	