

### (REFERENCE COPY - Not for submission)

FRN

Not Applicable

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

 File Number:
 0000044207
 Submit Date:
 2018-02-27
 FRN:
 0005004916

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 02/27/2018

 Filing Status:
 Active
 Status:
 Status
 Status Date:
 02/27/2018

## **Section I - General Information**

### 1. Respondent

Entity Name

0019930619	The Patricia Lucas Bennett Marital Trust

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
134 Columbus Street	Charleston	SC	29403	+1 (843) 577-7111	jwaring@eveningpostindustries. com

### 2. Contact Representative

Name	Organization
Michael D. Basile	Cooley LLP

			Zip		
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email
1299 Pennsylvania Avenue, NW Suite 700	Washington	DC	20004	+1 (202) 776-2556	mdbasile@cooley.com

### 3. Application Filing Fee

## 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:

Purpose	Biennial
"As of" date	10/01/2017
	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
KSBY Communications, LLC	0023677487

Fac. ID No.	Call Sign	City	State	Service
19654	KSBY	SAN LUIS OBISPO	CA	DTV

FRN

### Licensee/Permittee Name

KPAX Communications, LLC 0023677594

Fac. ID No.	Call Sign	City	State	Service
35453	KAJJ-CD	KALISPELL	МТ	DCA
35455	KPAX-TV	MISSOULA	МТ	DTV

Licensee/Permittee Name	FRN
KRIS Communications, LLC	0023833155

Fac. ID No.	Call Sign	City	State	Service
25559	KRIS-TV	CORPUS CHRISTI	ТХ	DTV
51373	K09YZ-D	BEEVILLE-REFUGIO	тх	DCA
51374	K31KK-D	KINGSVILLE-ALICE	тх	DCA
51375	K22JA-D	CORPUS CHRISTI	тх	DCA

Licensee/Permittee Name	FRN
KATC Communications, LLC	0023677651

Fac. ID No.	Call Sign	City	State	Service
33471	КАТС	LAFAYETTE	LA	DTV

Licensee/Permittee Name	FRN
KXLF Communications, LLC	0023677669

Fac. ID No.	Call Sign	City	State	Service
35959	KXLF-TV	BUTTE	MT	DTV

Licensee/Permittee Name	FRN
KVOA Communications, LLC	0023677644

Fac. ID No.	Call Sign	City	State	Service
25735	KVOA	TUCSON	AZ	DTV
168403	K04QP-D	CASAS ADOBES	AZ	DCA

5290	KTVH-DT		HELENA		MT		D	TV
35567	KRTV		GREAT FALLS		MT		_	TV
128063	KBGF-LD		GREAT FALLS		MT		LF	۶D
.icensee/Permittee N	Jame			FRI	N			
KCTZ Communication					236774	79		
ac. ID No.	Call Sign		City	:	State		Serv	ice
33756	KBZK		BOZEMAN		MT		DTV	'
.icensee/Permittee N	lame			FR	N			
KTVQ Communication	ns, LLC			00	236777	701		
Fac. ID No.	Call Sign		City	S	state		Servi	ice
35694	KTVQ		BILLINGS	I	МΤ		DTV	
.icensee/Permittee N	lame				FF	RN		
Sangre de Cristo Con	nmunications, LLC				00	02367773	35	
Fac. ID No.	Call Sign	City				State	:	Service
59014	KOAA-TV	PUEB	SLO			СО		DTV
59021	K30JM-D	COLC	ORADO SPRINGS			со		LPD
.icensee/Permittee N	lame			FR	N			
WLEX Communicatio	ns, LLC			00	236777	719		

### 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	0019930619	0019930619			
Entity Name	The Patricia Lucas Bennett Marital Trust				
Address	PO Box				
	Street 1	134 Columbus Street			
	Street 2				
	City	Charleston			
	State ("NA" if non-U.S. address)	SC			
	Zip/Postal Code	29403			
	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 nation or Tribal entity				
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	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** 

#### **Ownership Information**

FRN	0019933001		
Name	Richard L. Braunstein, Esq.		
Address	PO Box		

	Street 1	134 Columbus Street		
	Street 2			
	City	Charleston		
	State ("NA" if non-U.S. address)	SC		
	Zip/Postal Code	29403		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Other - 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 from 0.0 to 100.0)	Voting	25.0%	Jointly Held? No	
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes	

**Ownership Information** 0019264134 FRN Name Pierre Manigault Address PO Box Street 1 134 Columbus Street Street 2 Charleston City State ("NA" if non-U.S. SC address) **Zip/Postal Code** 29403 Country (if non-U.S. **United States** address) Other Interest Holder Listing Type **Positional Interests** Other - Trustee (check all that apply) Citizenship, Gender, US Citizenship Ethnicity, and Race Gender Male Information (Natural Persons Only) Ethnicity Not Hispanic or Latino

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

Ownership Information				
FRN	0019932953	0019932953		
Name	Ivan V. Anderson, Jr.	Ivan V. Anderson, Jr.		
Address	PO Box			
	Street 1	134 Columbus Street		
	Street 2			
	City	Charleston		
	State ("NA" if non-U.S. address)	SC		
	Zip/Postal Code	29403		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - 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 from 0.0 to 100.0)	Voting	25.0%	Jointly Held? No	
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have	an attributable interest in one o	r more broadcast stations	Yes	

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

Yes

## **Ownership Information**

FRN	0019264548		
Name	Patricia Manigault		
Address	PO Box		
	Street 1	134 Columbus Street	
	Street 2		

	City	Charleston		
	State ("NA" if non-U.S.SCaddress)			
	Zip/Postal Code	29403		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Trustee			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	25.0%	Jointly Held? No	
	Equity	0.0%		
	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?			Yes	
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.			Yes	

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

(c) Does the Respondent or any reported interest holder	No
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?	

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 No or related to each other as parentchild or as siblings?

No

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with 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.

### 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>Trustee</b> Exact Legal Title or Name of Respondent: <b>The</b> <b>Patricia Lucas Bennett Marital Trust</b> Name: <b>Pierre Manigault</b> Phone: <b>8435777111</b> 02/27/2018