

Licensing and Management System

FRN: 0016152480 | [Search \(/dataentry/public/tv/...](#) [Log Out \(/dataentry/j_spring_security_logout\)](#)

[Applications \(/dataentry/secure/applications.html\)](#) [Authorizations \(/dataentry/secure/authorizations.html\)](#)

[Facilities \(/dataentry/secure/facilities.html\)](#)

Approved by [OMB \(Office of Management and Budget\)](#) 3060-0010

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)
Application Submitted

[FAQ \(/dataentry/api/download/faq\)](#)

Application Submitted

Download Reference Copy
([../api/download/draftcopy/323/25076f9160e1af430160e6528abd2386](#))

- Your application has been submitted for processing.
- Use the assigned **File Number: 0000040721** when referencing this application in the future.
 - The progress of this application can be tracked on the **Pending Applications ([../applications.html](#))** page.

General Information

Application Purpose: Commercial Broadcast
Stations Biennial Ownership
Report
Filing Type: Biennial
Filing Information: Licensee
"As Of" Filing Date: 10/01/2017
Status: Submitted
Date Submitted: 01/24/2018

Respondent Information

Name: HITV License Subsidiary, Inc.
Address: 131 East 69th Street
Apt. 7A
NEW YORK, NY 10021
US
Phone: +1 (212) 585-3340
Email: kkellynyc@yahoo.com

Fees

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAT	3	70	\$210.00
Total				\$210.00	

[Pay Fees](#)

[View Submitted Applications](#)

Technical problems or trouble accessing the system? [Submit Help Request \(https://esupport.fcc.gov/request.htm\)](#) or [Contact \(877\) 480-3201 TTY: \(717\) 338-2824](#)

Federal Communications Commission
445 12th Street SW
Washington, DC 20554

Phone: 1-888-225-5322
TTY: 1-888-835-5322
Fax: 1-866-418-0232
[Contact Us \(http://www.fcc.gov/contact-us\)](http://www.fcc.gov/contact-us)

[RSS \(http://www.fcc.gov/rss\)](http://www.fcc.gov/rss)
[Privacy Policy \(http://www.fcc.gov/encyclopedia/privacy-policy\)](http://www.fcc.gov/encyclopedia/privacy-policy)
[Moderation Policy \(http://www.fcc.gov/comment-policy\)](http://www.fcc.gov/comment-policy)
[Website Policies & Notices \(http://www.fcc.gov/encyclopedia/website-notices\)](http://www.fcc.gov/encyclopedia/website-notices)
[Required Browser & Plug-ins \(http://www.fcc.gov/encyclopedia/required-](http://www.fcc.gov/encyclopedia/required-browser)

[FOIA \(http://www.fcc.gov/foia\)](http://www.fcc.gov/foia)
[No Fear Act Data \(http://www.fcc.gov/encyclopedia/no-fear-act-data\)](http://www.fcc.gov/encyclopedia/no-fear-act-data)
[Open Government Directive \(http://www.fcc.gov/open\)](http://www.fcc.gov/open)
[Plain Writing Act \(http://www.fcc.gov/encyclopedia/plain-writing-fcc\)](http://www.fcc.gov/encyclopedia/plain-writing-fcc)
[2009 Recovery and Reinvestment Act \(http://www.fcc.gov/encyclopedia/american-](http://www.fcc.gov/encyclopedia/american-recovery)



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial
Ownership Report (FCC Form 323)

File Number: 0000040721 | Submit Date: 2018-01-24 | FRN: 0016152480

Purpose: Commercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 01/24/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0016152480		HITV License Subsidiary, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
131 East 69th Street Apt. 7A	NEW YORK	NY	10021	+1 (212) 585-3340	kkellynyc@yahoo.com

2. Contact Representative

Name		Organization			
John S. Logan		Cooley LLP			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1299 Pennsylvania Ave., NW Suite 700	Washington	DC	20004	+1 (202) 776-2640	jlogan@cooley.com

3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	No

Fees

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAT	3	70	\$210.00
				Total	\$210.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:

Relationship to stations/permits	Licensee
Nature of Respondent	For-profit corporation

(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
HITV License Subsidiary, Inc.		0016152480

Fac. ID No.	Call Sign	City	State	Service
36914	KGMD-TV	HILO	HI	DTV
36917	KFVE	HONOLULU	HI	DTV
36920	KGMV	WAILUKU	HI	DTV

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 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 required to be filed pursuant to 47 C.F.R. Section 73.3613 for the facility or facilities listed on this report. If the agreement is an attributable Local Marketing Agreement (LMA), an attributable Joint Sales Agreement (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.

Document Information	
Description of contract or instrument	Limited Liability Company Agreement
Parties to contract or instrument	HITV Operating Co. Holdings, LLC and Kim D. Kelly and Kenneth J. O'Keefe
Date of execution	09/2014

Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Limited Liability Company Agreement

Document Information	
Description of contract or instrument	Bylaws
Parties to contract or instrument	HITV Operating Co. Inc. and the State of Delaware
Date of execution	05/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Bylaws

Document Information	
Description of contract or instrument	Amended and Restated Purchase Option Agreement
Parties to contract or instrument	HITV Operating Co. Inc. and American Spirit Media, LLC (F /K/A Ottumwa Media Holdings, LLC)
Date of execution	10/2010
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Option Agreement

Document Information	
Description of contract or instrument	Certificate of Formation
Parties to contract or instrument	HITV Operating Co. Holdings, LLC
Date of execution	09/2014
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Certificate of Formation

Document Information	
Description of contract or instrument	Amended and Restated Certificate of Incorporation
Parties to contract or instrument	HITV License Subsidiary, Inc. and the State of Delaware
Date of execution	05/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Certificate of Incorporation

Document Information	
Description of contract or instrument	Bylaws
Parties to contract or instrument	HITV License Subsidiary, Inc. and the State of Delaware
Date of execution	05/2007
Date of expiration	No expiration date

Agreement type (check all that apply)	Other Agreement Type: Bylaws
---	--

Document Information	
Description of contract or instrument	Amended and Restated Certificate of Incorporation
Parties to contract or instrument	HITV Operating Co. Inc. and the State of Delaware
Date of execution	05/2007
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Certificate of Incorporation

Document Information	
Description of contract or instrument	Equity Purchase Agreement
Parties to contract or instrument	HITV Operating Co. Holdings, LLC and GMC Television Broadcasting Holdings, Inc.
Date of execution	09/2014
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Equity Purchase Agreement

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	0016152480	
Entity Name	HITV License Subsidiary, Inc.	
Address	PO Box	
	Street 1	131 East 69th Street
	Street 2	Apt. 7A
	City	NEW YORK

	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10021	
	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 from 0.0 to 100.0)	Voting	0.0%	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?			No

Ownership Information			
FRN	0016564437		
Entity Name	HITV Operating Co., Inc.		
Address	PO Box		
	Street 1	131 East 69th Street	
	Street 2	Apt. 7A	
	City	NEW YORK	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10021	
	Country (if non-U.S. address)	United States	
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 from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	Equity	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

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

<p>(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?</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>	No
---	----

<p>(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?</p> <p>If "<u>Yes</u>," provide the following information for each such the relationship.</p>	No
--	----

<p>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</p> <p>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.</p>	No
--	----

3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

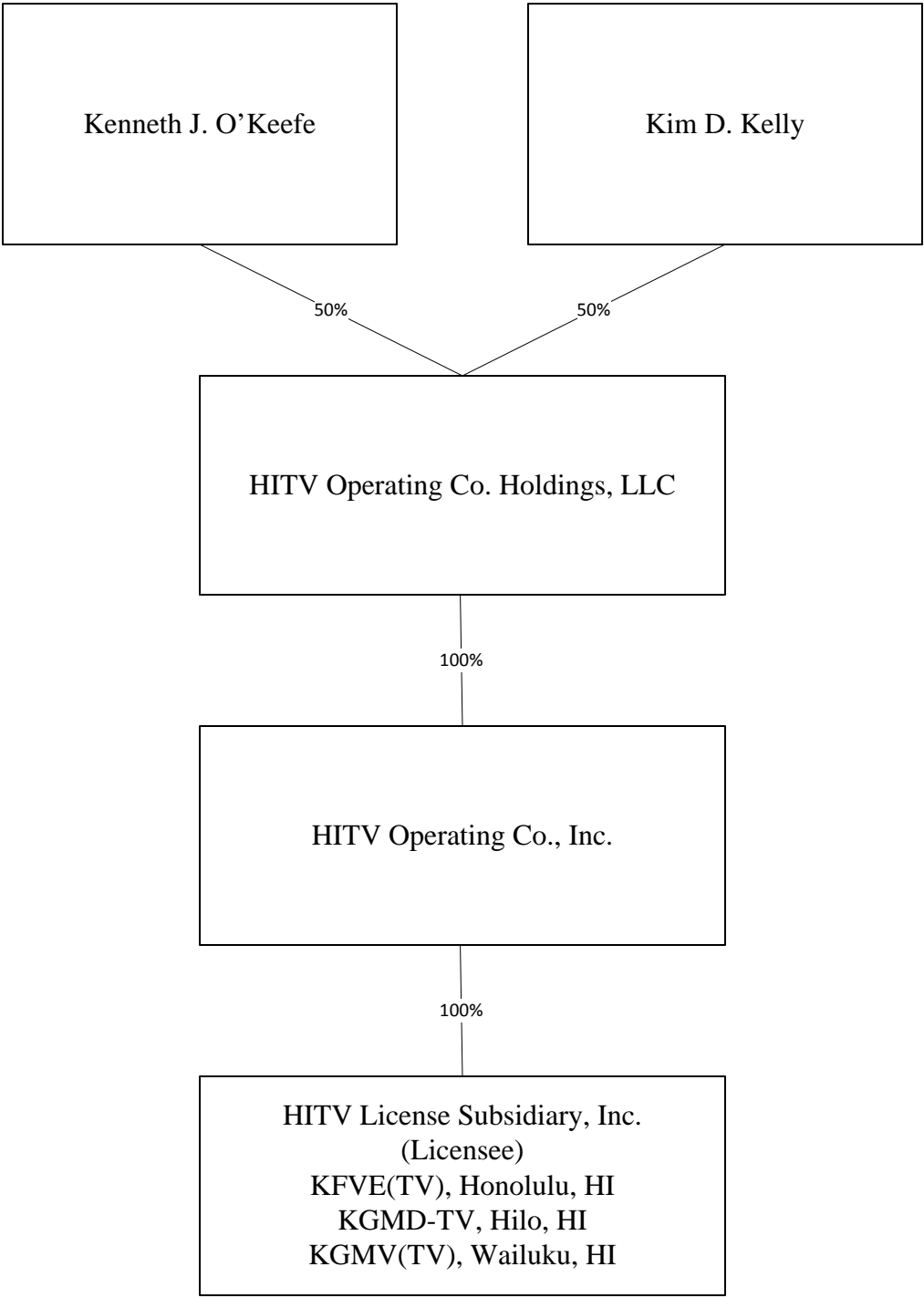
Non-Licensee Respondents should select "N/A" in response to this question.

File Name	Uploaded By	Attachment Type	Description
-----------	-------------	-----------------	-------------

Section III - Certification

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 LICENSE --OR 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: Vice President Exact Legal Title or Name of Respondent: HITV License Subsidiary, Inc. Name: Kim D Kelly Phone: 2125853340 01/24/2018



Agency Tracking ID:PGC3049873 Authorization Number:033602

Successful Authorization -- Date Paid: 1/24/18 FILE COPY ONLY!!

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING (1) LOCKBOX #979089	FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE FORM 159 PAGE NO 1 OF 2	APPROVED BY OMB 3060-059 SPECIAL USE FCC USE ONLY
SECTION A - Payer Information		
(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) Cooley LLP		(3) TOTAL AMOUNT PAID (dollars and cents) \$210.00
(4) STREET ADDRESS LINE NO. 1 1299 Pennsylvania Avenue, NW		
(5) STREET ADDRESS LINE NO. 2 Suite 700		
(6) CITY Washington	(7) STATE DC	(8) ZIP CODE 20004
(9) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 202-7762588		(10) COUNTRY CODE (IF NOT IN U.S.A.) US
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED		
(11) PAYER (FRN) 0024816696		(12) FCC USE ONLY
IF PAYER NAME AND THE APPLICANT NAME ARE DIFFERENT, COMPLETE SECTION B IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C)		
(13) APPLICANT NAME HITV License Subsidiary, Inc.		
(14) STREET ADDRESS LINE NO. 1 131 East 69th Street		
(15) STREET ADDRESS LINE NO. 2 Apt. 7A		
(16) CITY NEW YORK	(17) STATE NY	(18) ZIP CODE 10021
(19) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 212 - 5853340		(20) COUNTRY CODE (IF NOT IN U.S.A.) US
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED		
(21) APPLICANT (FRN) 0016152480		(22) FCC USE ONLY
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET		
(23A) FCC Call Sign/Other ID	(24A) Payment Type Code(PTC) MAT	(25A) Quantity 1
(26A) Fee Due for (PTC) \$70.00	(27A) Total Fee \$70.00	FCC Use Only
(28A) FCC CODE 1 707133	(29A) FCC CODE 2 LMS0000040721	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET		
(23B) FCC Call Sign/Other ID	(24B) Payment Type Code(PTC) MAT	(25B) Quantity 1
(26B) Fee Due for (PTC) \$70.00	(27B) Total Fee \$70.00	FCC Use Only
(28B) FCC CODE 1 707133	(29B) FCC CODE 2 LMS0000040721	

REMITTANCE ADVICE (Continuation Sheet) FEDERAL COMMUNICATIONS COMMISSION FORM 159-C PAGE NO 2 OF 2		APPROVED BY OMB 3060-058	
		SPECIAL USE	
		FCC USE ONLY	

USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT SECTION BB - ADDITIONAL APPLICANT INFORMATION			
(13) APPLICANT NAME HITV License Subsidiary, Inc.			
(14) STREET ADDRESS LINE NO. 1 131 East 69th Street			
(15) STREET ADDRESS LINE NO. 2 Apt. 7A			
(16) CITY NEW YORK		(17) STATE NY	(18) ZIP CODE 10021
(19) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 0016152480		(20) COUNTRY CODE (IF NOT IN U.S.A.) 70.0	
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED			
(21) APPLICANT (FRN) 0016152480		(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) FCC Call Sign/Other ID		(24A) Payment Type Code(PTC) MAT	(25A) Quantity 1
(26A) Fee Due for (PTC) <div style="text-align: right;">\$70.00</div>		(27A) Total Fee <div style="text-align: right;">\$70.00</div>	FCC Use Only
(28A) FCC CODE 1 <div style="text-align: right;">707133</div>		(29A) FCC CODE 2 <div style="text-align: right;">LMS0000040721</div>	
(23B) FCC Call Sign/Other ID		(24B) Payment Type Code(PTC)	(25B) Quantity
(26B) Fee Due for (PTC)		(27B) Total Fee	FCC Use Only
(28B) FCC CODE 1		(29B) FCC CODE 2	
(23C) FCC Call Sign/Other ID		(24C) Payment Type Code(PTC)	(25C) Quantity
(26C) Fee Due for (PTC)		(27C) Total Fee	FCC Use Only
(28C) FCC CODE 1		(29C) FCC CODE 2	
(23D) FCC Call Sign/Other ID		(24D) Payment Type Code(PTC)	(25D) Quantity
(26D) Fee Due for (PTC)		(27D) Total Fee	FCC Use Only
(28D) FCC CODE 1		(29D) FCC CODE 2	
(23E) FCC Call Sign/Other ID		(24E) Payment Type Code(PTC)	(25E) Quantity
(26E) Fee Due for (PTC)		(27E) Total Fee	FCC Use Only
(28E) FCC CODE 1		(29E) FCC CODE 2	
(23F) FCC Call Sign/Other ID		(24F) Payment Type Code(PTC)	(25F) Quantity
(26F) Fee Due for (PTC)		(27F) Total Fee	FCC Use Only
(28F) FCC CODE 1		(29F) FCC CODE 2	