

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0010 (June 2014)	FOR FCC USE ONLY
FCC 323 OWNERSHIP REPORT FOR COMMERCIAL BROADCAST STATIONS		FOR COMMISSION USE ONLY FILE NO.

Section I - General Information

1.	Legal Name of the Respondent MEGA-PHILADELPHIA LLC	Street Address (1) 535 ROUTE 38 E.		
	Street Address (2) SUITE 110	City CHERRY HILL		
	State or Country (if foreign address) NJ	ZIP Code 08002 -		
	Telephone Number (include area code) 6104960138	E-Mail Address (if available)		
	FCC Registration Number:	Call Sign WEMG	Facility ID Number 74073	
2.	Contact Representative F. REID AVETT	Firm or Company Name DUANE MORRIS LLP		
	Street Address (1) 505 9TH STREET, N.W.			
	Street Address (2) STE. 1000			
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20004 -	
	Telephone Number (include area code) 2027765212	E-Mail Address (if available) RAVETT@DUANEMORRIS.COM		
3.	Nature of Respondent (See Instructions for definitions)			
	<input checked="" type="radio"/> Licensee <input type="radio"/> Permittee <input type="radio"/> Entity with an attributable interest			
4.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114):			
	<input type="radio"/> Governmental Entity <input checked="" type="radio"/> Other <input type="radio"/> Other <input type="radio"/> N/A (Fee Required)			
5.	All of the information furnished in this Report is accurate as of 12/15/2016 (Date entered must (1) be Oct. 1 of the filing year when filing a Biennial Ownership Report (or Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-biennial Ownership Report.)			
6.	Purpose: This Report is filed for: (choose one)			
	a. <input type="radio"/> Biennial			
	b. <input type="radio"/> Validation and Resubmission of a previously filed Biennial Report (certifying no change from previous Report)			
	c. <input checked="" type="radio"/> Transfer of Control or Assignment of License/Permit			

d. Report by Permittee filing within 30 days after the grant of a construction permit for a new commercial AM, FM or full power television broadcast station.

e. Update / certification of accuracy of an initial Ownership Report filed by Permittee (filing in conjunction with Permittee's application for a station license)

f. Amendment to a previously filed Ownership Report

If an Amendment, **submit as an Exhibit** a listing by Section and Question Number the portions of the previous Report that are being revised.

File Number: -

[Exhibit 1]

7. Licensee and Station Information. The stations listed below are all licensed to the following person or entity:

Licensee Name	Licensee's FCC Registration Number (FRN)
MEGA-PHILADELPHIA LLC	0026087882

Station List

This Report is filed for the following stations:

Copy	Call Sign	Facility ID Number	Location (City/State)	Class of service
1.	WEMG	74073	CAMDEN , NEW JERSEY	AM Station

8. Respondent is:

Sole Proprietorship Not-for-profit corporation Limited partnership

For-profit corporation General partnership Other

If "Other," describe nature of the Respondent in an Exhibit. [Exhibit 2]

Section II-A - Non-Biennial Ownership Information

1. Contract Information. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only Licensees, Permittees, or Respondents with a majority interest in or that otherwise exercise de facto control over the subject Licensee or Permittee shall respond. Other Respondents should select "Not Applicable" in response to this question.) If the agreement is a local marketing agreement (LMA) or a joint sales agreement (JSA), or if the agreement is a network affiliation agreement, check the appropriate box; otherwise, select "Other" for non-LMA/JSA or network affiliation agreements.

Not Applicable

Contract Information					
Copy	Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration	Agreement Type (check all that apply)
1.	ARTICLES OF FORMATION	ANN MARIE BRUSKI	Month JUNE Year 2016	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
2.	OPERATING AGREEMENT	M.S. ACQUISITIONS & HOLDINGS, LLC	Month JUNE	Month	<input type="checkbox"/> LMA/JSA <input type="checkbox"/> Network

		Year 2016	Year <input checked="" type="checkbox"/> No Expiration Date	Affiliation Agreement <input checked="" type="checkbox"/> Other
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2. Capitalization (Only Licensees , Permittees, or entities with a majority interest in or that otherwise exercises de facto control over the subject Licensee shall respond.)
 Not Applicable
[Enter Capitalization Information]

3. (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, noninsulated partners, members and other persons or entities with a direct attributable interest in the Respondent. (A "direct" interest is one that is not held through any intervening companies or entities.) In the case of vertical or indirect ownership structures, report only those interests in the Respondent that also represent an attributable interest in the Licensee or Permittee for which the Report is being submitted.

List each person or entity with a direct attributable interest in the Respondent separately. 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 separate reports for persons or entities that do not have an attributable interest in the Licensee or Permittee for which the report is being submitted.

Ownership Interests Information											
Copy 1.	<table border="1" style="width: 100%;"> <tr> <td style="width: 20%;">Name</td> <td>MEGA-PHILADELPHIA LLC</td> </tr> <tr> <td>Address</td> <td> Street 535 ROUTE 38 E., STE. 110 City/State CHERRY HILL , NEW JERSEY Postal/ZIP Code 08002 - Country (if not U.S.) </td> </tr> <tr> <td>Listing Type</td> <td> <input checked="" type="radio"/> Respondent <input type="radio"/> Other Interest Holder </td> </tr> <tr> <td>Relationship to Licensee/Permittee</td> <td> <input checked="" type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest </td> </tr> <tr> <td>Positional Interest (Check all that apply)</td> <td> <input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder </td> </tr> </table>	Name	MEGA-PHILADELPHIA LLC	Address	Street 535 ROUTE 38 E., STE. 110 City/State CHERRY HILL , NEW JERSEY Postal/ZIP Code 08002 - Country (if not U.S.)	Listing Type	<input checked="" type="radio"/> Respondent <input type="radio"/> Other Interest Holder	Relationship to Licensee/Permittee	<input checked="" type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder
Name	MEGA-PHILADELPHIA LLC										
Address	Street 535 ROUTE 38 E., STE. 110 City/State CHERRY HILL , NEW JERSEY Postal/ZIP Code 08002 - Country (if not U.S.)										
Listing Type	<input checked="" type="radio"/> Respondent <input type="radio"/> Other Interest Holder										
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Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder										

		<input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input checked="" type="checkbox"/> Other (please specify): LICENSEE
	FCC Registration Number	0026087882
	Percentage of votes	%
	Percentage of total assets (equity debt plus)	%
Copy 2.	Name	M.S. ACQUISITIONS & HOLDINGS, LLC
	Address	Street 525 ROUTE 38 E., STE. 110 City/State CHERRY HILL , NEW JERSEY Postal/ZIP Code 08002 - Country (if not U.S.)
	Listing Type	<input type="checkbox"/> Respondent <input checked="" type="checkbox"/> Other Interest Holder
	Relationship to Licensee/Permittee	<input type="checkbox"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <input type="checkbox"/> Person with attributable interest <input checked="" type="checkbox"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input checked="" type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
	FCC Registration Number	0025597550
	Percentage of votes	100 %
	Percentage of total assets (equity debt plus)	100 %
Copy 3.	Name	MICHAEL SCIORE
	Address	Street 535 ROUTE 38 E., STE. 110 City/State CHERRY HILL , NEW JERSEY

	Postal/ZIP Code 08002 - Country (if not U.S.)	
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	
Relationship to Licensee/Permittee	<input type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <input checked="" type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input checked="" type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	026109215	
Percentage of votes	100 %	
Percentage of total assets (equity debt plus)	100 %	

(b.)	Respondent certifies that any equity and financial interests not reported in response to Question 3(a) are non-attributable. If "No," submit as an Exhibit an explanation.	<input checked="" type="radio"/> Yes <input type="radio"/> No [Exhibit 3]
(c.)	Does the Respondent or any person/entity with an attributable interest in the Respondent also hold an attributable interest in any other broadcast station, or in any newspaper entities in the same market, as defined in 47 C.F.R. Section 73.3555? If "Yes", provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below for the applicable type of interest (broadcast or newspaper). 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 . [Broadcast Interests Subform] [Newspaper Interests Subform]	<input type="radio"/> Yes <input checked="" type="radio"/> No
(d.)		

	<p>Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?</p> <p>If "Yes", complete the information describing the relationship.</p> <p>[Enter Familial Relationships Information]</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>
<p>(e.)</p>	<p>Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee or Permittee ?</p> <p>If "Yes", 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> <p>[Enter Attribution Exemption Information]</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>

SECTION III - CERTIFICATION

I certify that I am MICHAEL SCIORE

(Official Title)

of MEGA-PHILADELPHIA LLC

(Exact legal title or name of Respondent)

and 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.

(Date of the signature below must (1) be no earlier than Oct. 1 of the filing year when filing a Biennial Ownership Report (and no earlier than Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-biennial Ownership Report.)

<p>Signature MICHAEL SCIORE</p>	<p>Date 12/16/2016</p>
<p>Telephone Number of Respondent (Include area code) 6104960138</p>	

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).

Exhibits

Exhibit 2
Description: NATURE OF LICENSEE

THE LICENSEE IS A LIMITED LIABILITY COMPANY.

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0010 (June 2014)	FOR FCC USE ONLY
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Section I - General Information

1.	Legal Name of the Respondent M.S. ACQUISITIONS & HOLDINGS, LLC			
	Street Address (1) 535 ROUTE 38 E.			
	Street Address (2) SUITE 110			
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; padding: 2px;">City CHERRY HILL</td> <td style="width:30%; padding: 2px;">State or Country (if foreign address) NJ</td> <td style="width:30%; padding: 2px;">ZIP Code 08002 -</td> </tr> </table>	City CHERRY HILL	State or Country (if foreign address) NJ	ZIP Code 08002 -
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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; padding: 2px;">Telephone Number (include area code) 6104960138</td> <td style="padding: 2px;">E-Mail Address (if available)</td> </tr> </table>	Telephone Number (include area code) 6104960138	E-Mail Address (if available)	
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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; padding: 2px;">FCC Registration Number:</td> <td style="width:30%; padding: 2px;">Call Sign WEMG</td> <td style="width:30%; padding: 2px;">Facility ID Number 74073</td> </tr> </table>	FCC Registration Number:	Call Sign WEMG	Facility ID Number 74073
FCC Registration Number:	Call Sign WEMG	Facility ID Number 74073		
2.	Contact Representative REID AVETT			
	Firm or Company Name DUANE MORRIS LLP			
	Street Address (1) 505 9TH STREET NW			
	Street Address (2) STE. 1000			
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; padding: 2px;">City WASHINGTON</td> <td style="width:30%; padding: 2px;">State or Country (if foreign address) DC</td> <td style="width:30%; padding: 2px;">ZIP Code 20004 -</td> </tr> </table>	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20004 -
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3.	Nature of Respondent (See Instructions for definitions) <input type="radio"/> Licensee <input type="radio"/> Permittee <input checked="" type="radio"/> Entity with an attributable interest			
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6.	Purpose: This Report is filed for: (choose one)			
	a. <input type="radio"/> Biennial			
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f. Amendment to a previously filed Ownership Report

If an Amendment, **submit as an Exhibit** a listing by Section and Question Number the portions of the previous Report that are being revised.

File Number: -

[Exhibit 1]

7. Licensee and Station Information. The stations listed below are all licensed to the following person or entity:

Licensee Name	Licensee's FCC Registration Number (FRN)
MEGA-PHILADELPHIA LLC	0026087882

FRN Help: CORES Home

Station List

This Report is filed for the following stations:

Copy	Call Sign	Facility ID Number	Location (City/State)	Class of service
1.	WEMG	74073	CAMDEN , NEW JERSEY	AM Station

8. Respondent is:

Sole Proprietorship Not-for-profit corporation Limited partnership

For-profit corporation General partnership Other

If "Other," describe nature of the Respondent in an Exhibit. [Exhibit 2]

Section II-A - Non-Biennial Ownership Information

1. Contract Information. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only Licensees, Permittees, or Respondents with a majority interest in or that otherwise exercise de facto control over the subject Licensee or Permittee shall respond. Other Respondents should select "Not Applicable" in response to this question.) If the agreement is a local marketing agreement (LMA) or a joint sales agreement (JSA), or if the agreement is a network affiliation agreement, check the appropriate box; otherwise, select "Other" for non-LMA/JSA or network affiliation agreements.

Not Applicable

2. Capitalization (Only Licensees , Permittees, or entities with a majority interest in or that otherwise exercises de facto control over the subject Licensee shall respond.)

Not Applicable

[Enter Capitalization Information]

3. (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, noninsulated partners, members and other persons or entities with a direct attributable interest in the Respondent. (A "direct" interest is one that is not held through any intervening companies or entities.) In the

<p>case of vertical or indirect ownership structures, report only those interests in the Respondent that also represent an attributable interest in the Licensee or Permittee for which the Report is being submitted.</p> <p>List each person or entity with a direct attributable interest in the Respondent separately. 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 separate reports for persons or entities that do not have an attributable interest in the Licensee or Permittee for which the report is being submitted.</p>	
<p><i>(Faint text: Name, Address, City, State, Zip, etc.)</i></p>	
<p>(b.) Respondent certifies that any equity and financial interests not reported in response to Question 3(a) are non-attributable.</p> <p>If "No," submit as an Exhibit an explanation.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No [Exhibit 3]</p>
<p>(c.) Does the Respondent or any person/entity with an attributable interest in the Respondent also hold an attributable interest in any other broadcast station, or in any newspaper entities in the same market, as defined in 47 C.F.R. Section 73.3555?</p> <p>If "Yes", provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below for the applicable type of interest (broadcast or newspaper). 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.</p> <p>[Broadcast Interests Subform]</p> <p><i>(Faint text: Broadcast Interest Information)</i></p> <p>[Newspaper Interests Subform]</p> <p><i>(Faint text: Newspaper Interest Information)</i></p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>
<p>(d.) Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>

	<p>If "Yes", complete the information describing the relationship.</p> <p>[Enter Familial Relationships Information]</p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> <p style="text-align: center;">Familial Relationships</p> </div>	
(e.)	<p>Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee or Permittee ?</p> <p>If "Yes", 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> <p>[Enter Attribution Exemption Information]</p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> <p style="text-align: center;">Exemption Information List</p> </div>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>

SECTION III - CERTIFICATION

I certify that I am MICHAEL SCIORE

(Official Title)

of M.S. ACQUISITIONS & HOLDINGS, LLC

(Exact legal title or name of Respondent)

and 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.

(Date of the signature below must (1) be no earlier than Oct. 1 of the filing year when filing a Biennial Ownership Report (and no earlier than Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-biennial Ownership Report.)

Signature MICHAEL SCIORE	Date 12/16/2016
Telephone Number of Respondent (Include area code) 6104960138	

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Exhibits

Exhibit 2

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LICENSEE IS A LIMITED LIABILITY COMPANY.