

	Percentage of total assets (equity debt plus)	0.0 %	
Copy 11.	Name	JOEL W. JOHNSON	
	Address	Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)	
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <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 checked="" 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 checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
	FCC Registration Number	0019320886	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)		<input type="checkbox"/> N/A (entity)	
	Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female	
	Ethnicity	<input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	Race	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	Citizenship	US	
	Percentage of votes	0.0 %	
	Percentage of equity	0.1 %	
	Percentage of total assets (equity debt plus)	0.0 %	
	Name	WILLIAM T. KERR	

Copy 12.	Address	Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <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 checked="" 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 checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
	FCC Registration Number	0019321074
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female
	Ethnicity	<input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
	Race	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races
	Citizenship	US
	Percentage of votes	0.1 %
	Percentage of equity	0.1 %
	Percentage of total assets (equity debt plus)	0.0 %
Copy 13.	Name	PHILIP A. MARINEAU
	Address	Street 1716 LOCUST STREET

	City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)	
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	
Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <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 checked="" 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 checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0019322239	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	<u>Gender</u> <input checked="" type="radio"/> Male <input type="radio"/> Female	
	<u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	<u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	<u>Citizenship</u> US	
Percentage of votes	0.0 %	
Percentage of equity	0.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 14.	Name	ELIZABETH E. TALLETT
	Address	Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)

Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	
Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <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 checked="" 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 type="checkbox"/> Other (please specify):	
FCC Registration Number	0019322403	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity) <u>Gender</u> <input type="radio"/> Male <input checked="" type="radio"/> Female	
	<u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	<u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	<u>Citizenship</u> US	
	Percentage of votes: 0.0 % Percentage of equity: 0.0 % Percentage of total assets (equity debt plus): 0.0 %	
Copy 15.	Name	DIANNA MELL MEREDITH FRAZIER
	Address	Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <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 checked="" 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 checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):										
FCC Registration Number	0019282284										
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity) <u>Gender</u> <input type="radio"/> Male <input checked="" type="radio"/> Female <u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino <u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races <u>Citizenship</u> US										
Percentage of votes	11.5 %										
Percentage of equity	3.3 %										
Percentage of total assets (equity debt plus)	0.0 %										
Copy 16.	<table border="1"> <tr> <td data-bbox="332 1289 570 1331"> Name </td> <td data-bbox="570 1289 1263 1331"> EDWIN T. MEREDITH, IV </td> </tr> <tr> <td data-bbox="332 1331 570 1570"> Address </td> <td data-bbox="570 1331 1263 1570"> Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.) </td> </tr> <tr> <td data-bbox="332 1570 570 1654"> Listing Type </td> <td data-bbox="570 1570 1263 1654"> <input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder </td> </tr> <tr> <td data-bbox="332 1654 570 1772"> Relationship to Licensee </td> <td data-bbox="570 1654 1263 1772"> <input type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest </td> </tr> <tr> <td data-bbox="332 1772 570 1864"> Positional Interest (Check all that apply) </td> <td data-bbox="570 1772 1263 1864"> <input type="checkbox"/> Officer <input type="checkbox"/> Director </td> </tr> </table>	Name	EDWIN T. MEREDITH, IV	Address	Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	Relationship to Licensee	<input type="radio"/> Licensee (or Officer/Director of Licensee) <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
Name	EDWIN T. MEREDITH, IV										
Address	Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)										
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder										
Relationship to Licensee	<input type="radio"/> Licensee (or Officer/Director of Licensee) <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 type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0012841334	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity) <u>Gender</u> <input checked="" type="radio"/> Male <input type="radio"/> Female <u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino <u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races <u>Citizenship</u> US	
Percentage of votes	12.1 %	
Percentage of equity	3.4 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 17.	Name	KATHERINE C. MEREDITH
	Address	Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input type="radio"/> Licensee (or Officer/Director of Licensee) <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 type="checkbox"/> LC/LLC/PLLC Member

	<input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
FCC Registration Number	0019587708
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity) <u>Gender</u> <input type="radio"/> Male <input checked="" type="radio"/> Female
	<u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
	<u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races
	<u>Citizenship</u> US
	Percentage of votes: 35.2 % Percentage of equity: 9.9 % Percentage of total assets (equity debt plus): 0.0 %
Copy 18.	Name: FREDERICK B. HENRY Address: Street 1716 LOCUST STREET City/State: DES MOINES , IOWA Postal/ZIP Code: 50309 - Country (if not U.S.):
	Listing Type: <input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee: <input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <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 checked="" 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): TRUSTEE
FCC Registration Number	0019320795
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)
	<u>Gender</u> <input checked="" type="radio"/> Male <input type="radio"/> Female
	<u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
	<u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races
	<u>Citizenship</u> US
Percentage of votes	3.0 %
Percentage of equity	1.1 %
Percentage of total assets (equity debt plus)	0.0 %
Copy 19.	Name HERBERT BAUM
	Address Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)
	Listing Type <input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee <input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <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 checked="" 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 checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):

	FCC Registration Number	0019319847
	Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity) <u>Gender</u> <input checked="" type="radio"/> Male <input type="radio"/> Female <u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino <u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races <u>Citizenship</u> US
	Percentage of votes	0.0 %
	Percentage of equity	0.1 %
	Percentage of total assets (equity debt plus)	0.0 %
Copy 20.	Name	DAVID LONDONER
	Address	Street 1716 LOCUST STREET City/State DES MOINES , IOWA Postal/ZIP Code 50309 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <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 checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
	FCC Registration Number	0019322106
	Gender, Ethnicity, Race and Citizenship	<input type="checkbox"/> N/A (entity) <u>Gender</u> <input checked="" type="radio"/> Male <input type="radio"/> Female

Information (Natural Persons)	<u>Ethnicity</u>	
	<input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	<u>Race</u>	
	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
<u>Citizenship</u>		
US		
Percentage of votes	0.0 %	
Percentage of equity	0.1 %	
Percentage of total assets (equity debt plus)	0.0 %	

(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.

Yes
 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](#).

Yes
 No

Broadcast Interest Information								
Copy	Name of Interest Holder	Call Sign	Community of license	Facility ID Number	Percentage of Votes	Percentage of Equity	Percentage of total assets (EDP)	Positional Interest (Check all that apply)
1.	MEREDITH CORPORATION	KVVU-TV	City HENDERSON State NEVADA	35870	100.0 %	100.0 %	0.0 %	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable

								Entity <input type="checkbox"/> Other (please specify):
2.	STEPHEN M. LACY	KVVU-TV	City HENDERSON State NEVADA	35870	0 %	0 %	0 %	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (please specify):
3.	JOSEPH H. CERYANEC	KVVU-TV	City HENDERSON State NEVADA	35870	0 %	0 %	0 %	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (please specify):
4.	JOHN S. ZIESER	KVVU-TV	City HENDERSON State NEVADA	35870	0 %	0 %	0 %	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (please specify):
5.	DIANNA MELL MEREDITH FRAZIER	KVVU-TV	City HENDERSON State NEVADA	35870	11.5 %	3.3 %	0 %	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (please specify):

6.	EDWIN T. MEREDITH, IV	KVVU-TV	City HENDERSON State NEVADA	35870	12.1 %	3.4 %	0 %	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (please specify):
7.	KATHERINE C. MEREDITH	KVVU-TV	City HENDERSON State NEVADA	35870	35.2 %	9.9 %	0 %	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (please specify):

[Newspaper Interests Subform]

(d.) Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?
 If "Yes", complete the information describing the relationship.

Yes
 No

Familial Relationships				
Copy	Name	Parent/ Child	Spouse	Siblings
1.	DIANNA MELL MEREDITH FRAZIER AND EDWIN T. MEREDITH, IV	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
2.	KATHERINE C. MEREDITH AND EDWIN T. MEREDITH, IV	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.	KATHERINE C. MEREDITH AND DIANNA MELL MEREDITH FRAZIER	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

(e.) Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee ?
 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.

Yes
 No

[Enter Attribution Exemption Information]

4.	<p>Respondent's Interests Held. Each Respondent other than a Licensee should list the name and FCC Registration Number of all entities in which the Respondent holds a direct attributable ownership interest, where that listed entity has an attributable ownership interest in the Licensee of the stations associated with the Report. Licensees should select "N/A" in response to this question.</p> <p>For any listing that includes the name of a person or entity reported on multiple Ownership Reports, ensure that the FRN information is consistent among all such Ownership Reports. Respondents should coordinate with each other to ensure such consistency.</p> <p>[Enter Respondent Interests Held Information]</p>	<input checked="" type="checkbox"/> N/A
5.	<p>Organizational Chart. LICENSEES ONLY: Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all persons/entities that have attributable interests in the Licensee.</p> <p>Non-Licensee Respondents should select "N/A" in response to this question.</p>	<input type="checkbox"/> N/A [Exhibit 5]

SECTION III - CERTIFICATION

I certify that I am VICE PRESIDENT AND CFO

(Official Title)

of MEREDITH CORPORATION

(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 JOSEPH H. CERYANEC	Date 06/08/2010
Telephone Number of Respondent (Include area code) 5151843000	

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

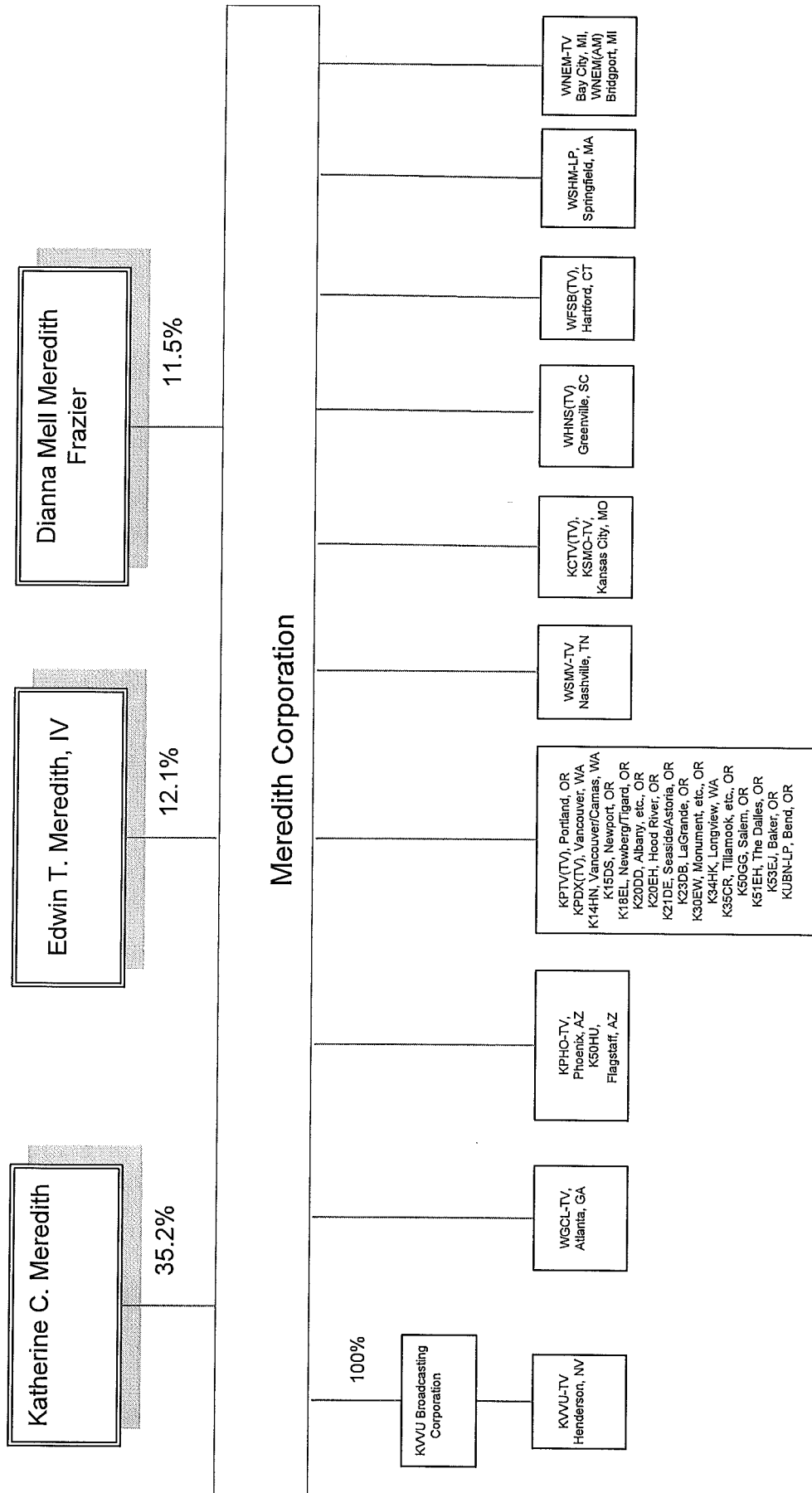
Exhibit 5
Description: EXHIBIT 5

ORGANIZATIONAL CHART

Attachment 5

Description
Organizational Chart

Meredith Ownership





Electronic Form 159

Payment Confirmation

Your transaction has been approved. For your records, please note the following:

REMITTANCE ID NUMBER :	1790909
AUTHORIZATION NUMBER :	064977
AMOUNT PAID :	\$660.00

[PRINT FORM 159](#)

[CLOSE](#)

Customer Service		
FCC Fees	Web Policies / Privacy Policy	FCC Home Page
If you have any questions or concerns please contact your licensing system help desk.		

Remittance ID:1790909 Authorization Number:064977 Successful Authorization -- Date Paid: 6/9/10 FILE COPY ONLY!!

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING (1) LOCKBOX #979089	FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE FORM 159 PAGE NO 1 OF 3	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) Susan E Anderson		(3) TOTAL AMOUNT PAID (dollars and cents) \$660.00
(4) STREET ADDRESS LINE NO. 1 Dow Lohnes PLLC		
(5) STREET ADDRESS LINE NO. 2 1200 New Hampshire Ave NW Ste 800		
(6) CITY Washington		(7) STATE DC
		(8) ZIP CODE 20036
(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) 0015798168		(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 KVVU BROADCASTING CORPORATION		
(14) STREET ADDRESS LINE NO. 1 1716 LOCUST STREET		
(15) STREET ADDRESS LINE NO. 2		
(16) CITY DES MOINES		(17) STATE IA
		(18) ZIP CODE 50309-
(19) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 5152842166		(20) COUNTRY CODE (IF NOT IN U.S.A.) USA
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED		
(21) APPLICANT (FRN) 0010477818		(22) FCC USE ONLY
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET		
(23A) FCC Call Sign/Other ID WNEM	(24A) Payment Type Code(PTC) MAR	(25A) Quantity 1
(26A) Fee Due for (PTC) \$60.00	(27A) Total Fee \$60.00	FCC Use Only
(28A) FCC CODE 1 4600	(29A) FCC CODE 2 CDBS20100609ADG	
(23B) FCC Call Sign/Other ID KCTV	(24B) Payment Type Code(PTC) MAT	(25B) Quantity 1
(26B) Fee Due for (PTC) \$60.00	(27B) Total Fee \$60.00	FCC Use Only
(28B) FCC CODE 1 41230	(29B) FCC CODE 2 CDBS20100609ADC	

APPROVED BY OMB
3060-058

REMITTANCE ADVICE (Continuation Sheet) FEDERAL COMMUNICATIONS COMMISSION FORM 159-C PAGE NO 2 OF 3	SPECIAL USE <hr/> FCC USE ONLY
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**USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT
SECTION BB - ADDITIONAL APPLICANT INFORMATION**

(13) APPLICANT NAME
KVVU BROADCASTING CORPORATION

(14) STREET ADDRESS LINE NO. 1
1716 LOCUST STREET

(15) STREET ADDRESS LINE NO. 2

(16) CITY DES MOINES	(17) STATE IA	(18) ZIP CODE 50309-
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(19) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 5152842166	(20) COUNTRY CODE (IF NOT IN U.S.A.) USA
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FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED

(21) APPLICANT (FRN) 0010477818	(22) FCC USE ONLY
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COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET

(23A) FCC Call Sign/Other ID KPDX	(24A) Payment Type Code(PTC) MAT	(25A) Quantity 1
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(26A) Fee Due for (PTC) \$60.00	(27A) Total Fee \$60.00	FCC Use Only
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(28A) FCC CODE 1 35460	(29A) FCC CODE 2 CDBS20100609ACJ
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(23B) FCC Call Sign/Other ID KPTV	(24B) Payment Type Code(PTC) MAT	(25B) Quantity 1
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(26B) Fee Due for (PTC) \$60.00	(27B) Total Fee \$60.00	FCC Use Only
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(28B) FCC CODE 1 50633	(29B) FCC CODE 2 CDBS20100609ACK
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(23C) FCC Call Sign/Other ID WFSB	(24C) Payment Type Code(PTC) MAT	(25C) Quantity 1
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(26C) Fee Due for (PTC) \$60.00	(27C) Total Fee \$60.00	FCC Use Only
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(28C) FCC CODE 1 53115	(29C) FCC CODE 2 CDBS20100609ACZ
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(23D) FCC Call Sign/Other ID WHNS	(24D) Payment Type Code(PTC) MAT	(25D) Quantity 1
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(26D) Fee Due for (PTC) \$60.00	(27D) Total Fee \$60.00	FCC Use Only
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(28D) FCC CODE 1 72300	(29D) FCC CODE 2 CDBS20100609ADE
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(23E) FCC Call Sign/Other ID KPHO-TV	(24E) Payment Type Code(PTC) MAT	(25E) Quantity 1
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(26E) Fee Due for (PTC) \$60.00	(27E) Total Fee \$60.00	FCC Use Only
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(28E) FCC CODE 1 41223	(29E) FCC CODE 2 CDBS20100609ACH
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(23F) FCC Call Sign/Other ID KSMO-TV	(24F) Payment Type Code(PTC) MAT	(25F) Quantity 1
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(26F) Fee Due for (PTC) \$60.00	(27F) Total Fee \$60.00	FCC Use Only
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(28F) FCC CODE 1 33336	(29F) FCC CODE 2 CDBS20100609ADD
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FCC FORM 159-C July 2005

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REMITTANCE ADVICE (Continuation Sheet) FEDERAL COMMUNICATIONS COMMISSION FORM 159-C PAGE NO 3 OF 3		SPECIAL USE FCC USE ONLY
USE THIS SECTION ONLY FOR EACH ADDITIONAL APPLICANT SECTION BB - ADDITIONAL APPLICANT INFORMATION		
(13) APPLICANT NAME KVVU BROADCASTING CORPORATION		
(14) STREET ADDRESS LINE NO. 1 1716 LOCUST STREET		
(15) STREET ADDRESS LINE NO. 2		
(16) CITY DES MOINES	(17) STATE IA	(18) ZIP CODE 50309-
(19) DAY TIME TELEPHONE NUMBER (INCLUDING AREA CODE) 5152842166	(20) COUNTRY CODE (IF NOT IN U.S.A.) USA	
FCC REGISTRATION NUMBER (FRN) AND TAX IDENTIFICATION NUMBER (TIN) REQUIRED		
(21) APPLICANT (FRN) 0010477818	(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET		
(23A) FCC Call Sign/Other ID WGCL-TV	(24A) Payment Type Code(PTC) MAT	(25A) Quantity 1
(26A) Fee Due for (PTC) \$60.00	(27A) Total Fee \$60.00	FCC Use Only
(28A) FCC CODE 1 72120	(29A) FCC CODE 2 CDBS20100609ACG	
(23B) FCC Call Sign/Other ID WNEM-TV	(24B) Payment Type Code(PTC) MAT	(25B) Quantity 1
(26B) Fee Due for (PTC) \$60.00	(27B) Total Fee \$60.00	FCC Use Only
(28B) FCC CODE 1 41221	(29B) FCC CODE 2 CDBS20100609ADF	
(23C) FCC Call Sign/Other ID WSMV-TV	(24C) Payment Type Code(PTC) MAT	(25C) Quantity 1
(26C) Fee Due for (PTC) \$60.00	(27C) Total Fee \$60.00	FCC Use Only
(28C) FCC CODE 1 41232	(29C) FCC CODE 2 CDBS20100609ADB	
(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	