



(REFERENCE COPY - Not for submission)

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

File Number: **0000041125** | Submit Date: **2018-02-01** | FRN: **0021206529**

Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **02/01/2018**

Filing Status: **Active**

## Section I - General Information

### 1. Respondent

FRN	Entity Name
0021206545	Kristin Cantrell Family Trust

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
115 WEST MAIN STREET	Frankfort	KY	40601	+1 (502) 875-1130	'Kristin Cantrell' <kristin.cantrell@gmail.com>

### 2. Contact Representative

Name	Organization
ALLAN G. MOSKOWITZ, Esq.	Allan G. Moskowitz, Esq.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
10845 TUCKAHOE WAY	NORTH POTOMAC	MD	20878	+1 (301) 908-4165	AMOSKOWITZ@AMOSKOWITZLAW.COM

### 3. Application Filing Fee

Not Applicable

### 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 The Respondent is a 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
Southern Belle, LLC	0021206529

Fac. ID No.	Call Sign	City	State	Service
1037	WSTV-FM	FRANKFORT	KY	FM
8552	WHNA	RIVERSIDE	PA	FM
11981	WPQP	CLEARFIELD	PA	FM
11982	WCPA	CLEARFIELD	PA	AM
21199	WNDA	WELLSBORO	PA	AM
21200	WNBT-FM	WELLSBORO	PA	FM
28131	WHUN	HUNTINGDON	PA	AM
28132	WDBF-FM	MOUNT UNION	PA	FM
30445	WFEQ	PLEASANT GAP	PA	FM
38271	WBHV-FM	STATE COLLEGE	PA	FM
39605	WCFT-FM	BLOOMSBURG	PA	FM
40422	WZBF	BEAVER SPRINGS	PA	FM
40424	WRBG	MIFFLINBURG	PA	FM
42131	WMRF-FM	LEWISTOWN	PA	FM
42134	WLUI	LEWISTOWN	PA	AM
42135	WHUN-FM	HUNTINGDON	PA	FM
54567	WFKY	FRANKFORT	KY	FM
60081	WVKY	SHELBYVILLE	KY	FM
62367	WIBF	MEXICO	PA	FM
63837	WQBG	ELIZABETHVILLE	PA	FM
64572	WZWW	BELLEFONTE	PA	FM
64850	WOWY	UNIVERSITY PARK	PA	FM
67696	WIFT	DU BOIS	PA	FM
74609	WKYW	FRANKFORT	KY	AM
78437	WOGA	MANSFIELD	PA	FM
139876	W249DD	HUNTINGDON	PA	FX
140887	W228DM	MANSFIELD	PA	FX
141466	W226CG	WELLSBORO	PA	FX
145358	W228CL	FRANKFORT	KY	FX
151391	W225CK	LEWISTOWN	PA	FX
165990	WKFT	STRATTANVILLE	PA	FM

170958	WZDB	SYKESVILLE	PA	FM
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## 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		
<b>FRN</b>	0021206545	
<b>Entity Name</b>	Kristin Cantrell Family Trust	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	115 WEST MAIN STREET
	<b>Street 2</b>	
	<b>City</b>	Frankfort
	<b>State ("NA" if non-U.S. address)</b>	KY
	<b>Zip/Postal Code</b>	40601
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Respondent	
<b>Positional Interests</b> (check all that apply)	Respondent	
<b>Tribal Nation or Tribal Entity</b>	Interest holder is not a Tribal nation or Tribal entity	

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

**Ownership Information**

<b>FRN</b>	0021208202		
<b>Name</b>	Judith M. Confer		
<b>Address</b>	<b>PO Box</b>		
	<b>Street 1</b>	115 WEST MAIN STREET	
	<b>Street 2</b>		
	<b>City</b>	Frankfort	
	<b>State ("NA" if non-U.S. address)</b>	KY	
	<b>Zip/Postal Code</b>	40601	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Other - Trustee		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Female	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	100.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	100.0%	
	<b>Total assets (Equity Debt Plus)</b>	0.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes

<b>(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.</b> If "No," submit as an exhibit an explanation.	Yes
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<p><b>(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?</b></p> <p>If "Yes," 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 <a href="#">Click Here</a>.</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>	<p>No</p>
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<p><b>(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?</b></p> <p>If "Yes," provide the following information for each such the relationship.</p>	<p>No</p>
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<p><b>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b></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>No</p>
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**Certification**

Section	Question	Response
<p><b>Authorized Party to Sign</b></p>	<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).</p>	

**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: **Trustee**  
Exact Legal Title or Name of Respondent:  
**Kristin Cantrell Family Trust**  
Name: **Judith M. Confer**  
Phone: **5028751130**

02/01/2018