

#### (REFERENCE COPY - Not for submission)

FRN

## **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

# **Entity Name**

0021206	545	Kristin Cantrell Family Trust				
Street	• • •	y if non U.	State ("NA" if non-U.	Zip		
Address	S. address)		S. address)	Code	Phone	Email

Address	S. address)	S. address)	Code	Phone	Email
115 WEST MAIN STREET	Frankfort	КҮ	40601	+1 (502) 875-1130	'Kristin Cantrell' <kristin. cantrell@gmail.com&gt;</kristin. 

#### 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):

L	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

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

**Ownership Information** 

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 a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

#### **Ownership Information**

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

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



(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?

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

(e) Is Respondent seeking an attribution exemption for any officer or director with No 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.

Certif	ication

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>Kristin Cantrell Family Trust</b> Name: <b>Judith M. Confer</b> Phone: <b>5028751130</b> 02/01/2018