

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

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 0000046378
 Submit Date:
 2018-03-01
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 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 03/01/2018

 Filing Status:
 Active
 Status:
 Active
 Status Date:
 03/01/2018

Section I - General Information

1. Respondent

FRN	Entity Name
0019812197	Samara A Sgarlat Trust

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
356 Sedgwick Court	Naples	FL	34108	+1 (570) 970- 5600	susanconnors76@gmail. com

2. Contact Representative

Name	Organization
Frank R. Jazzo, Esq.	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812-0400	jazzo@fhhlaw.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 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.

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name FRN						
New Age Media of Gainesville License, LLC					0015435	5407
Fac. ID No.	Call Sign	City		S	tate	Service
7726	WYME-CD	GAI	NESVILLE	F	ĒL	DCA
7727	WGFL	HIG	H SPRINGS	F	ĒL	DTV
47483	DWMYG-LP	LAK	E CITY	F	۶L	LPA
Licensee/Permittee	Name				FRN	
New Age Media of T	ennessee License, LLC				0015435	5381
Fac. ID No.	Call Sign	City		S	tate	Service
52078	WPDP-CD	CLEVE	LAND	Т	N	DCA
71353	WDSI-TV	CHAT	ANOOGA	т	N	DTV
Licensee/Permittee	Name				FRN	
New Age Media of P	ennsylvania License, LLC	;			0015435357	
Fac. ID No.	Call Sign	City		S	tate	Service
52075	WQMY	WILLIAN	ISPORT	F	PA	DTV
52077	W24DB-D	CLARKS	SUMMIT	F	PA	DCA
73375	WOLF-TV	HAZLET	ON	F	PA	DTV
Licensee/Permittee	Name				FRN	
New Age Media of T	allahassee License, LLC				001543	5399

Fac. ID No.	Call Sign	City	State	Service
23486	WTLH	BAINBRIDGE	GA	DTV
23487	WBVJ-CD	VALDOSTA	GA	DCA
48763	WBFL-CD	VALDOSTA	GA	DCA

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 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				
FRN	0019812197	0019812197		
Entity Name	Samara A Sgarlat Trust	Samara A Sgarlat Trust		
Address	PO Box			
	Street 1	356 Sedgwick Court		
	Street 2			
	City	Naples		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	34108		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	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?	or more broadcast stations	No	

Ownership Information

Ownership Information

FRN	0019350156	
Name	Brian J. Parente PO Box	
Address		

	Street 1	1181 Highway 315		
	Street 2			
	City	Wilkes-Barre		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	18702		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests Other - Co-Trustee (check all that apply) Other - Co-Trustee				
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	33.3%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

that do not appear on this report?

Ownership Information		
FRN	0019374891	
Name	Charles L. Parente	
Address	PO Box	
	Street 1	1181 Highway 315
	Street 2	
	City	Wilkes-Barre
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	18702
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Co-Trustee	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino

	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information				
FRN	0015434061			
Name	John Parente			
Address	PO Box	ix		
	Street 1	1181 Highway 315		
	Street 2			
	City	Wilkes-Barre		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	18702		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Co-Trustee			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No	
	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No	

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

(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?

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.

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.

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) 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.

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.

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

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

FRN	0015434061	Name	John Parente
FRN	0019350156	Name	Brian J Parente
Relationship	Siblings		

Family Relationships

Family Relationships

FRN	0019374891	Name	Charles L Parente
FRN	0015434061	Name	John Parente
Relationship	Siblings		

Family Relationships

FRN	0019374891	Name	Charles L Parente
FRN	0019350156	Name	Brian J Parente
Relationship	Siblings		

(e) Is Respondent seeking an attribution exemption for any officer or director with 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.

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 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: Co-Trustee Exact Legal Title or Name of Respondent: Samara A. Sgarlat Trust Name: Brian J. Parente Phone: 5709705600 03/01/2018

No