

Commission

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000045607Submit Date:2018-03-01FRN:0026113068Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:03/01/2018Filing Status:Active

Section I - General Information

FRN **Entity Name** 1. Respondent 0026113068 Newman Family Trust Street City (and Country if non U.S. State ("NA" if non-U.S. Zip Address address) address) Email Code Phone 9115 Windermere FL +1 (407) 522-34786 kirstygomez@gmail. 1031 Tintori com Lane Organization Name 2. Contact Representative **Donald Martin** Donald E Martin, P.C. Zip Street Address City (and Country if non U.S. address) State Code Phone Email 22041 PO Box 8433 VA +1 (704) 642-2344 dempc@prodigy.net Falls Church Not Applicable 3. Application **Filing Fee** (a) Provide the following information about the Respondent: 4. Nature of Respondent Entity required to file a Form 323 because it holds an **Relationship to stations/permits** attributable interest in one or more Licensees Nature of Respondent Other A family 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.

and Station(s)

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

Licensee/Permittee Name	FRN
Cross Country Communications, LLC	0004072427

Fac. ID No.	Call Sign	City	State	Service
48736	WKZA	LAKEWOOD	NY	FM
189508	WLKW-FM	CELORON	NY	FM

Licensee/Permittee Name	FRN	
Newman Media Inc	0003786464	

Fac. ID No.	Call Sign	City	State	Service
2874	WDSR	LAKE CITY	FL	АМ
2877	WNFB	LAKE CITY	FL	FM
201483	W240DU	LAKE CITY	FL	FX

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		
	FRN 0026113068		
	Entity Name Newman Family Trust		

PO Box

Address

	Street 1	9115 Tintori Lane	
	Street 2		
	City	Windermere	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34786	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	ibal 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 that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No

Ownership Information

Ownership Information		
FRN	0026113019	
Name	Kirsty Gomez	
Address	PO Box	
	Street 1	9115 Tintori Lane
	Street 2	
	City	Windermere
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	34786
	Country (if non-U.S. address)	United States
Listing Type	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	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	No		
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.			Yes

(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?	No
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 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 in the newspaper entity solely on the basis of the Commission's Equity Debt Plus 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 No or related to each other as parentchild or as siblings?

If " $\underline{\mathsf{Yes}},$ " provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with
duties wholly unrelated to the Licensee(s)?NoIf "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.No

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: Trustee Exact Legal Title or Name of Respondent: Newman Family Trust Name: Kirsty Gomez Phone: 4075221031 03/01/2018