

(REFERENCE COPY - Not for submission)

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

File Number: 0000053116 Submit Date: 2018-04-20 FRN: 0027415116

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

04/20/2018 Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN	Entity Name
0027415116	New Life Studios, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 844	Jamestown	TN	38556	+1 (931) 879- 9924	ccody@newlife105.

### 2. Contact Representative

Name		Organization	
	A. Wray Fitch, III.	Gammon &Grange, P.C.	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
8280 Greensboro Drive Suite 140	McLean	VA	22102	+1 (703) 761-5013	awf@gg-law.com

### 3. Application Filing Fee

Not Applicable

## 4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Not-for-profit corporation	

(b) Provide the following information about this report:				
Purpose	Transfer of control or assignment of license/permit			
"As of" date	04/11/2018			
	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) /Permittees(s)

### and Station(s) /Permit(s)

Licensee/Permittee Name	FRN
New Life Studios, Inc.	0027415116

Fac. ID No.	Call Sign	City	State	Service
30297	WCLC	JAMESTOWN	TN	AM
30298	WCLC-FM	JAMESTOWN	TN	FM

#### **Section II – Non-Biennial Ownership Information**

1. 47 C.F.R. Section 73.3613 and Other Documents Licensee/Permittee Respondents 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/Permittee Respondents should select "Not Applicable" in response to this question.

Document Information				
Description of contract or instrument	Articles of Incorporation			
Parties to contract or instrument	New Life Studios, Inc.; State of Tennessee			
Date of execution	03/2010			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation			

Document Information		
Description of contract or instrument	Bylaws	
Parties to contract or instrument	New Life Studios, Inc.	
Date of execution	03/2011	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Bylaws	

#### 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) or Permittee(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) or Permittee(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	0027415116			
Entity Name	New Life Studios, Inc.	New Life Studios, Inc.		
Address	РО Вох			
	Street 1			
	Street 2			
	City	Jamestown		
	State ("NA" if non-U.S. address)	TN		
	Zip/Postal Code	38556		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations  Yes that do not appear on this report?				

Ownership Information					
FRN	0020006920	0020006920			
Name	Baley F. Allred, III.	Baley F. Allred, III.			
Address	PO Box 844				
	Street 1				
	Street 2				
	City	Jamestown			
	State ("NA" if non-U.S. address)	TN			
	Zip/Postal Code	38556			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Officer, Director  Voting 20.0% Jointly Held? No				
Interest Percentages (enter percentage values from 0.0 to 100.0)					

Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information			
FRN	0020006896		
Name	Brenda L. Allred		
Address	РО Вох	844	
	Street 1		
	Street 2		
	City	Jamestown	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	38556	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this r	an attributable interest in one creport?	r more broadcast stations	Yes

Ownership Information			
FRN	9990134587	9990134587	
Name	Paul Martin	Paul Martin	
Address	РО Вох	РО Вох	
	Street 1	503 Appian Way	
	Street 2		
	City	Chattanooga	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37415	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Director		

Interest Percentages (enter percentage values	Voting	20.0% Jointly Held? No	
from 0.0 to 100.0)	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?		Yes	

Ownership Information			
FRN	9990134588		
Name	Randy Jones		
Address	PO Box		
	Street 1	315 E. Woodlawn Avenue	
	Street 2		
	City	Jamestown	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	38556	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations	Yes

Ownership Information		
FRN	9990134589	
Name	Ralph Sexton, Jr.	
Address	PO Box	
	Street 1	96 Paramount Drive
	Street 2	
	City	Leicester
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28748
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes
• •	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	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 "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.

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 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 or related to each other as parentchild or as siblings?

Yes

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

Family Relationships			
FRN	0020006920	Name	Baley F Allred , III .
FRN	0020006896	Name	Brenda L Allred

Relationship	Spouses	
--------------	---------	--

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

No

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.

#### 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: <b>President</b> Exact Legal Title or Name of Respondent: <b>New Life Studios, Inc.</b> Name: <b>Baley F. Allred , III.</b> Phone: <b>9318799924</b> 04/20/2018