

(REFERENCE COPY - Not for submission)

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

File Number: 0000072700 | Submit Date: 2019-05-14 | FRN: 0014579510

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

05/14/2019 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0014579510	Forever South Licenses, LLC	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1919 Scottsville Road	Bowling Green	KY	42104	+1 (270) 843- 3333	chris@forevercom.

2. Contact Representative

Name	Organization
Christine Hillard	Forever Communications, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1919Scottsville Road	Bowling Green	KY	42104	+1 (270) 843-3333	chris@forevercom.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 Limited liability company		

(b) Provide the following information about this report:				
Purpose	Transfer of control or assignment of license/permit			
"As of" date	05/14/2019			
	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
Forever South Licenses, LLC	0014579510

Fac. ID No.	Call Sign	City	State	Service
4805	WRQR	PARIS	TN	AM
4806	WLZK	PARIS	TN	FM
61591	WHDM	MCKENZIE	TN	AM
85416	WMUF	HENRY	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	Certificate of Formation and Limited Liability Company Agreement			
Parties to contract or instrument	Delaware			
Date of execution	01/2006			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Certificate of Formation and Limited Liability Company Agreement			

Document Information				
Description of contract or instrument	Local Programming and Marketing Agreement			
Parties to contract or instrument	Forever Communications, Inc.			
Date of execution	01/2018			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Attributable LMA			

Document Information				
Description of contract or instrument	Amended and Restated Credit Agreement			
Parties to contract or instrument	Tristate Capital Bank			
Date of execution	05/2019			
Date of expiration	04/2026			
Agreement type (check all that apply)	Other Agreement Type: Amended and Restated Credit Agreement			

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	0014579510	0014579510		
Entity Name	Forever South Licenses, LLC	Forever South Licenses, LLC		
Address	РО Вох	PO Box		
	Street 1	1919 Scottsville Road		
	Street 2			
	City	Bowling Green		
	State ("NA" if non-U.S. address)	5)		
	Zip/Postal Code			
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	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 No that do not appear on this report?				

Ownership Information		
FRN	0019269331	
Name	Christine Hillard	
Address	РО Вох	
	Street 1	1919Scotsville Road
	Street 2	

	City	Bowling Green	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	42104	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Interest Percentages (enter percentage values	Voting	10.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	0024218109		
Entity Name	Kerby Eugene Confer Irrevocable Trust		
Address	PO Box		
	Street 1	2105 Bud Ct.	
	Street 2		
	City	Ft. Mill	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29715	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	45.0%	Jointly Held? No
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information		
FRN	0024218083	
Entity Name	Alt Dynasty Trust, Judy Alt Trustee	
Address	РО Вох	
	Street 1	14451 Marina San Pablo Place

	Street 2		
	City	Jacksonville	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32224	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	45.0%	Jointly Held? No
	Total assets (Equity Debt Plus)		
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	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?

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.

No

No

If "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)?

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: Member Exact Legal Title or Name of Respondent: Christine Hillard Name: Christine Hillard Phone: 2708433333