

(REFERENCE COPY - Not for submission)

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

File Number: 0000073712 | Submit Date: 2019-05-30 | FRN: 0000010967

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

05/30/2019 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0000010967	LETCHER COUNTY BROADCASTING, INC.	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 202	Jenkins	KY	41527- 0202	+1 (606) 634- 1022	kincergc@icloud.

2. Contact Representative

Name	Organization
Larry D. Perry, Esq.	Attorney

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
11464 Saga Ln Suite 400	Knoxville	TN	37931	+1 (865) 927-8474	larryperry@att.net

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a	(a) Provide the following information about the Respondent:		
ı	Relationship to stations/permits	Licensee	
ı	Nature of Respondent	For-profit corporation	

(b) Provide the following information about this report:		
Purpose	Report filed by Permittee in conjunction with Permittee's application for a station license	
"As of" date	05/29/2019	
	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	
LETCHER COUNTY BROADCASTING, INC.	0000010967	

Fac. ID No.	Call Sign	City	State	Service
18155	WGCK-FM	COEBURN	VA	FM
141969	W278BK	JENKINS	KY	FX

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	State of Kentucky	
Date of execution	06/1993	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation	

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	0000010967 LETCHER COUNTY BROADCASTING, INC.		
Entity Name			
Address	PO Box 202		
	Street 1		
	Street 2		

	City	Jenkins	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	41527-0202	
	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 that do not appear on this	an attributable interest in one o	or more broadcast stations	No

Ownership Information				
FRN	9990135825	9990135825		
Name	Ernestine Kincer	Ernestine Kincer		
Address	PO Box			
	Street 1	486 Lakeside Drive		
	Street 2			
	City	Jenkins		
	State ("NA" if non-U.S. address)	KY		
	Zip/Postal Code	41537		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director, Stockholder			
(enter percentage values No		Jointly Held? No		
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	51.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information				
FRN	9990135826			
Name	G C Kincer			
Address	РО Вох			
	Street 1	486 Lakeside Drive		

Street 2		
City	Jenkins	
State ("NA" if non-U.S. address)	KY	
Zip/Postal Code	41537	
Country (if non-U.S. address)	United States	
Other Interest Holder		
Officer, Director, Stockholder		
Voting	49.0%	Jointly Held? No
Total assets (Equity Debt Plus)	49.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		
nat any interests, including equi	tv. financial. or votinα	Yes
	City State ("NA" if non-U.S. address) Zip/Postal Code Country (if non-U.S. address) Other Interest Holder Officer, Director, Stockholder Voting Total assets (Equity Debt Plus) an attributable interest in one or report?	City Jenkins State ("NA" if non-U.S. address) Zip/Postal Code 41537 Country (if non-U.S. address) Other Interest Holder Officer, Director, Stockholder Voting 49.0% Total assets (Equity Debt Plus) an attributable interest in one or more broadcast stations

(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

Yes

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

Family Relationships					
FRN	9990135825	Name	Ernestine Kincer		
FRN	9990135826	Name	G C Kincer		
Relationship	Spouses				

(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: Corporate Officer Exact Legal Title or Name of Respondent: Vice President Name: G C Kincer Phone: 6066341022