



(REFERENCE COPY - Not for submission)

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

File Number: 0000075744 | Submit Date: 2019-07-03 | FRN: 0001938083

Purpose: Noncommercial Broadcast Stations Non-Biennial Ownership Report | Status: Received | Status Date: 07/03/2019 | Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0001938083	Triad Family Network Inc

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1249 Trade Street	winston-salem	NC	27101	+1 (336) 777-1008	phil@wbj.org

2. Contact Representative

Name	Organization
Philip T. Watson, Mr.	Triad Family Network, Inc

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1249 Trade Street	winston-salem	NC	27101	+1 (336) 777-1008	phil@wbj.org

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?	No

(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	07/03/2019 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)

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

and Station(s)
/Permit(s)

Licensee/Permittee Name			FRN	
Triad Family Network Inc			0001938083	

Fac. ID No.	Call Sign	City	State	Service
67827	WBFJ-FM	WINSTON-SALEM	NC	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R.
Section 73.3613
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. If the agreement is 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	Triad Family Network, Inc and State of North Carolina
Date of execution	01/1991
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, members of the governing board (or other governing entity), stockholders, 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	0001938083	
Entity Name	Triad Family Network Inc	
Address	PO Box	
	Street 1	1249 Trade Street
	Street 2	
	City	winston-salem

	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	27101
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
Positional Interests (check all that apply)	Respondent	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	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	0001961481	
Entity Name	RCS Communications Group DBA Reisenweaver Communications Inc	
Address	PO Box	
	Street 1	1249 Trade Street
	Street 2	
	City	winston-salem
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	27101
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Chuck Shipton, President of RCS Communications us a Director of Triad Family Network, Inc. and a person with attributable interest	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%
	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	0007388101	
Name	John M. Hill	
Address	PO Box	
	Street 1	1249 Trade Street
	Street 2	
	City	winston-salem

	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	27106
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Director, person with Attributable Interest	
Principal Profession or Occupation	Radio Announcer	
By Whom Appointed or Elected	Board	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%
	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	0026078980	
Name	Donald S. Kinney, Jr.	
Address	PO Box	
	Street 1	1249 Trade Street
	Street 2	
	City	winston-salem
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	27101
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Director, person with Attributable interst	
Principal Profession or Occupation	Accountant	
By Whom Appointed or Elected	Board	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%
	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	0026078873		
Name	Holly Potter		
Address	PO Box		
	Street 1	1249 Trade Street	
	Street 2		
	City	winston-salem	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27101	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Director, person with Attributable Interest		
Principal Profession or Occupation	Care and Support Pastor		
By Whom Appointed or Elected	Board		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	
	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	0019929645		
Name	Jean B. Watson		
Address	PO Box		
	Street 1	1249 Trade Street	
	Street 2		
	City	winston-salem	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27101	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Director, person with Attributable Interest		
Principal Profession or Occupation	homemaker		

By Whom Appointed or Elected	Board		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	
	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	0019929587		
Name	Philip T. Watson		
Address	PO Box		
	Street 1	1249 Trade Street	
	Street 2		
	City	winston-salem	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27101	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Officer-Director, Person with Attributable Interest		
Principal Profession or Occupation	Accountant		
By Whom Appointed or Elected	Board		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	
	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

(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
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(c) 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.	No
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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 LICENSE --OR 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: President Exact Legal Title or Name of Respondent: Triad Family Network, Inc. Name: Philip Thomas Watson Phone: 3367771008 07/03/2019