

(REFERENCE COPY - Not for submission)

FRN

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000080812Submit Date:2019-09-03FRN:0023255110Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:09/03/2019Filing Status:Active

Section I - General Information

1. Respondent

Entity Name

0024107500	Mary Julia Lirette Accumulation Trust

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
525 Blackburn Drive	Augusta	GA	30907	+1 (706) 855-8506	swoodworth@edingerlaw. net

2. Contact Representative

Name	Organization
Scott Woodworth	Edinger Associates PLLC

Street	City (and Country if non U.S.		Zip		
Address	address)	State	Code	Phone	Email
1725 I Street, NW Suite 300	Washington	DC	20006	+1 (202) 747- 1694	swoodworth@edingerlaw. net

3. Application Filing Fee

Not Applicable

4. Nature of

Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees		
Nature of Respondent	Other 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.

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

Licensee/Permittee Name			FRN	
SagamoreHill of Columbus GA, LLC			0023255110	
Fac. ID No.	Call Sign	City	State	Service
37179	WLTZ	COLUMBUS	GA	DTV

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	contracts and other instruments report. In addition, attributable L disclosed by the licensee of the attributable JSA, or a network a Respondents, as well as Licens	set forth in 47 C.F.R. Section 73 ocal Marketing Agreements (LM brokering station on its ownersh ffiliation agreement, check the a	full power television, AM, and/or FM stations should list all 3.3613(a) through (c) for the facility or facilities listed on this IAs) and attributable Joint Sales Agreements (JSAs) must be hip report. If the agreement is an attributable LMA, an ppropriate box. Otherwise, select "Other." Non-Licensee authorizations for Class A television and/or low power television tion.
2. Ownership Interests	 generating a series of subforms itself. If the Respondent is not a non-insulated members, and an standards set forth in 47 C.F.R. or entities.) List each interest ho Leave the percentage of total as attributable interest in the Response Section 73.3555, Note 2(i). In the case of vertical or indirect attributable interest in the License Entities that are part of an organ separate ownership reports. In separate ownership reports. In separate ownership reports in the License an attributable interest in the License and th	Answer each question on each natural person, also list each of y other persons or entities with a Section 73.3555. (A "direct" inte- older with a direct attributable inte- sets (Equity Debt Plus) field bla ondent solely on the basis of the t ownership structures, list only the see(s) for which the report is bei nizational structure that includes such a structure do not report, or censee(s) for which the report is urther detail concerning interests	holding companies or other forms of indirect ownership must file r file a separate report for, any interest holder that does not have being submitted. s that must be reported in response to this question. each interest holder reported in response to this question.
	Ownership Information		
	FRN	0024107500	
	Entity Name	Mary Julia Lirette Accumulatio	n Trust
	Address	PO Box	
		Street 1	525 Blackburn Drive
		Street 2	
		City	Augusta
		State ("NA" if non-U.S. address)	GA
		Zip/Postal Code	30907
		Country (if non-U.S. address)	United States

Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	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 an that do not appear on this re	n attributable interest in one o port?	r more broadcast stations	No	

Ownership Information				
FRN	0024107468			
Name	Julia L. Lirette			
Address PO Box				
	Street 1	525 Blackburn Drive		
	Street 2			
	City	Augusta		
	State ("NA" if non-U.S. address)	GA		
	Zip/Postal Code 30907			
	Country (if non-U.S.United Statesaddress)			
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 ar that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	No	

(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.If "No," submit as an exhibit an explanation.

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in	No
the same market as any station for which this report is	
filed, as defined in 47 C.F.R. Section 73.3555?	
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 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 No or related to each other as parentchild or as siblings?

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)?	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: Trustee Exact Legal Title or Name of Respondent: Trustee Name: Julie Lirette Phone: 7068558506 09/03/2019