Approved by OMB (Office of Management and Budget) 3060-0010
September 2019

Federal Communications Commission

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000090682** | Submit Date: **2019-11-21** | FRN: **0008719163**

Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **11/21/2019**

Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0008719163	FM Licenses, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
One Forever Drive	Hollidaysburg	PA	16648	+1 (814) 941-9800	ldeppen@aol.com

2. Contact Representative

Name	Organization
Lynn A. Deppen	Forever Media, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
One Forever Drive	Hollidaysburg	PA	16648	+1 (814) 941-9800	ldeppen@aol.com

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	Limited liability company

(b) Provide the following information about this report:	
Purpose	Biennial
"As of" date	10/01/2019 **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)

and Station(s)

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

Licensee/Permittee Name	FRN
FM Radio Licenses, LLC	0003734209

Fac. ID No.	Call Sign	City	State	Service
1057	WFGE	STATE COLLEGE	PA	FM
3038	WLIE	BELLAIRE	OH	AM
3039	WBGI-FM	BELLAIRE	OH	FM
3956	WBUS	CENTRE HALL	PA	FM
4996	WUKL	BETHLEHEM	WV	FM
6025	WMAJ	BOALSBURG	PA	FM
11668	WCEI-FM	EASTON	MD	FM
12918	WRQI	SAEGERTOWN	PA	FM
13710	WOHI	EAST LIVERPOOL	OH	AM
13711	WOGI	EAST LIVERPOOL	OH	FM
14774	WINX-FM	ST. MICHAELS	MD	FM
15327	WNTJ	JOHNSTOWN	PA	AM
15328	WKYE	JOHNSTOWN	PA	FM
16458	WDEL	WILMINGTON	DE	AM
16459	WSTW	WILMINGTON	DE	FM
21421	WGYI	OIL CITY	PA	FM
24940	WGYY	MEADVILLE	PA	FM
24942	WMGW	MEADVILLE	PA	AM
24997	WUZZ	NEW CASTLE	PA	AM
24999	WKPL	ELLWOOD CITY	PA	FM
33828	WPKL	UNIONTOWN	PA	FM
38265	WFGY	ALTOONA	PA	FM
38269	WFBG	ALTOONA	PA	AM
47089	WTNA	ALTOONA	PA	AM
47090	WWOT	ALTOONA	PA	FM
48923	WQWK	STATE COLLEGE	PA	AM
48926	WAPY	STATE COLLEGE	PA	FM
49026	WCCL	CENTRAL CITY	PA	FM
49777	WFRA	FRANKLIN	PA	AM
49789	WHMJ	FRANKLIN	PA	FM
51136	WDEL-FM	CANTON	NJ	FM
52768	WVJJ	SALEM	NJ	AM

53482	WAFL	MILFORD	DE	FM
53483	WNCL	MILFORD	DE	AM
53487	WXDE	LEWES	DE	FM
53488	WXCY	HAVRE DE GRACE	MD	FM
53490	WAVD	OCEAN PINES	MD	FM
54607	WHVR	HANOVER	PA	AM
54608	WYCR	YORK-HANOVER	PA	FM
56363	WLKH	SOMERSET	PA	FM
56364	WNTI	SOMERSET	PA	AM
56641	WRQY	MOUNDSVILLE	WV	FM
58312	WALY	BELLWOOD	PA	FM
58763	WCHK-FM	MILFORD	DE	FM
64845	WRKW	EBENSBURG	PA	FM
64848	WJHT	JOHNSTOWN	PA	FM
64849	WRSC	STATE COLLEGE	PA	AM
65408	WLYI	BURGETTSTOWN	PA	FM
65709	WOGG	OLIVER	PA	FM
67131	WGTY	GETTYSBURG	PA	FM
67132	WGET	GETTYSBURG	PA	AM
71246	WKST	NEW CASTLE	PA	AM
71868	WFRB	FROSTBURG	MD	AM
71869	WFRB-FM	FROSTBURG	MD	FM
72316	WRKY-FM	HOLLIDAYSBURG	PA	FM
72965	WFGI-FM	JOHNSTOWN	PA	FM
74082	WTBO	CUMBERLAND	MD	AM
74083	WRQE	CUMBERLAND	MD	FM
74089	WTIV	TITUSVILLE	PA	AM
74469	WYLE	GROVE CITY	PA	FM
76254	WXMJ	CAMBRIDGE SPRINGS	PA	FM
88380	WRQW	COOPERSTOWN	PA	FM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations 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 Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select “Not Applicable” in response to this question.

Not Applicable.

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) 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) 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	0008719163		
Entity Name	FM Licenses, LLC		
Address	**PO Box**		
	Street 1	One Forever Drive	
	Street 2		
	City	Hollidaysburg	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	16648	
	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 from 0.0 to 100.0)	**Voting**	0.0%	**Jointly Held?** No
	Equity	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?			No

Ownership Information	
FRN	0024955494

Entity Name	Carol B. Logan Living Trust		
Address	**PO Box**		
	Street 1	2347 Arbor Lake Court	
	Street 2		
	City	Henderson	
	State ("NA" if non-U.S. address)	NV	
	Zip/Postal Code	89044	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	**Voting**	10.0%	**Jointly Held?** No
	Equity	10.0%	
	Total assets (Equity Debt Plus)	10.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information		
FRN	0003385283	
Name	LYNN A. DEPPEN	
Address	**PO Box**	
	Street 1	1370 Washington Pike
	Street 2	Suite 406
	City	Bridgeville
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15017
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	LC/LLC/PLLC Member	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	**Citizenship**	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino

	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	**Voting**	10.0%	**Jointly Held?** No
	Equity	10.0%	
	Total assets (Equity Debt Plus)	10.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0019874494		
Entity Name	Judith Marie 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		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	**Voting**	18.0%	**Jointly Held?** No
	Equity	18.0%	
	Total assets (Equity Debt Plus)	18.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information			
FRN	0019232222		
Entity Name	Judy S Alt Irrevocable Trust		
Address	**PO Box**		
	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		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	**Voting**	34.0%	**Jointly Held?** No
	Equity	34.0%	
	Total assets (Equity Debt Plus)	34.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information			
FRN	0024218083		
Entity Name	Alt Dynasty Trust		
Address	**PO Box**		
	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		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	**Voting**	6.0%	**Jointly Held?** No
	Equity	6.0%	
	Total assets (Equity Debt Plus)	6.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information			
FRN	0024218109		
Entity Name	Kerby Eugene Confer Irrevocable Trust		
Address	**PO Box**		
	Street 1	2105 Bud Ct.	
	Street 2		
	City	Ft. Mills	
	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		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	**Voting**	22.0%	**Jointly Held?** No
	Equity	22.0%	
	Total assets (Equity Debt Plus)	22.0%	
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

(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

(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? If "Yes," provide the following information for each such the relationship.	No

(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.	No

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: **Member** Exact Legal Title or Name of Respondent: **FM Licenses, LLC** Name: **Lynn Deppen** Phone: **4122211629** 11/21/2019