

(REFERENCE COPY - Not for submission)

FRN

SUITE 2R

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000093399Submit Date:2019-12-13FRN:0017053471Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:12/19/2019Filing Status:Active

Section I - General Information

1. Respondent

Entity Name

0017053471 Gois Broa		Gois Broado	Icasting of Connecticut, LLC			
Street Address	City (and Count S. address)	ry if non U.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
122 GREEN STREET	WORCESTER		MA	01604	+1 (508) 791-2111	Pgois@goisbroadcasting. com

2. Contact Representative

Name	Organization
ALLAN G. MOSKOWITZ, Esq.	Allan G. Moskowitz, Esq.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
10845 TUCKAHOE WAY	NORTH POTOMAC	MD	20878	+1 (301) 908- 4165	AMOSKOWITZ@AMOSKOWITZLAW. COM

3. Application Filing Fee

Question	Response	
Is this application being submitted without a filing fee?	No	

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	3	95	\$210.00
		·	·	<u>,</u>	Total	\$210.00

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	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
Gois Broadcasting of Connecticut, LLC	0017053471

Fac. ID No.	Call Sign	City	State	Service
1911	WLAT	NEW BRITAIN	СТ	AM
26302	WKND	WINDSOR	СТ	AM
36684	WNEZ	MANCHESTER	СТ	АМ

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.

Document Information		
Description of contract or instrument	Articles of Organization	
Parties to contract or instrument	Commonwealth of Connecticut	
Date of execution	10/2007	
Date of expiration	No expiration date	

Agreement type (check all that apply)	Other Agreement Type: Articles of Organization
Document Information	

Description of contract or instrument	Irrevocable Trust Agreement
Parties to contract or instrument	Ivon P. Gois, Nicole E. Gois, Ryan M. Gois
Date of execution	12/2016
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Trust 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) 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.

wnership Information		
FRN	0017053471	
Entity Name	Gois Broadcasting of Connecticut, LLC	
Address	PO Box	
	Street 1	122 GREEN STREET
	Street 2	SUITE 2R
	City	WORCESTER
	State ("NA" if non-U.S. address)	MA
	Zip/Postal Code	01604
	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	

Ownership Information

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

Ownership Information			
FRN	0020039384		
Name	PAUL GOIS		
Address	PO Box		
	Street 1	122 GREEN STREET	
	Street 2	SUITE 2R	
	City	WORCESTER	
	State ("NA" if non-U.S. address)	MA	
	Zip/Postal Code	01604	
	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,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	50.0%	
	Total assets (Equity Debt Plus)	50.0%	
Does interest holder have that do not appear on this	an attributable interest in one c report?	or more broadcast stations	Yes

Ownership Information		
FRN	0027323526	
Entity Name	INMR Irrevocable Family Trust	
Address	PO Box	
	Street 1	15 Llewellyn Way
	Street 2	
	City	Edgartown

State ("NA" if non-U.S. address)	MA	
Zip/Postal Code	02539	
Country (if non-U.S. address)	United States	
Other Interest Holder		
LC/LLC/PLLC Member		
Interest holder is not a Tribal nation or Tribal entity		
Voting	50.0%	Jointly Held? Yes
Equity	50.0%	
Total assets (Equity Debt Plus)	50.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes
	address)Zip/Postal CodeCountry (if non-U.S. address)Other Interest HolderLC/LLC/PLLC MemberInterest holder is not a TribalVotingEquityTotal assets (Equity Debt Plus)	address)Zip/Postal Code02539Country (if non-U.S. address)United StatesOther Interest HolderUnited StatesLC/LLC/PLLC MemberLC/LLC/PLLC MemberInterest holder is not a Tribal nation or Tribal entityVoting50.0%Equity50.0%Total assets (Equity Debt Plus)50.0%

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

old an attributable interest in any newspaper entities in he same market as any station for which this report is iled, as defined in 47 C.F.R. Section 73.3555?	
"Yes," provide information describing the interest(s), using	
ITHER the subform OR the spreadsheet option below.	
Respondents with a large number (50 or more) of entries to	
ubmit should use the spreadsheet option.	
OTE: Spreadsheets must be submitted in a special XML	
Spreadsheet format with the appropriate structure that is	
pecified in the documentation. For instructions on how to	
se the spreadsheet option to complete this question	
including templates to start with), please Click Here.	
using the subform, leave the percentage of total assets	
Equity Debt Plus) field blank for an interest holder unless	
nat interest holder has an attributable interest in the	
ewspaper entity solely on the basis of the Commission's	
quity Debt Plus attribution standard, 47 C.F.R. Section	
3.3555, Note 2(i). If using an XML Spreadsheet, enter "NA"	
nto the percentage of total assets (Equity Debt Plus) field	
or an interest holder unless that interest holder has an	
ttributable interest in the newspaper entity solely on the	
asis of the Commission's Equity Debt Plus attribution	
tandard.	
he Respondent must provide an FCC Registration Number	
or each interest holder reported in response to this	
uestion. Please see the Instructions for detailed information	

(d) Are any of the individuals listed as an attributable interest holder in the Respondent or related to each other as parentchild or as siblings?	married to each other	N
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	

3. Organizational Chart (Licensees Only) Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

The licensee is owned %0% by Paul Gois and 50% by a Trust owned jointly.

Section III - Certification

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: Gois Broadcasting of Connecticut, LLC Name: Paul Gois Phone: 5087912111 12/13/2019