

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000102666
 Submit Date:
 2020-01-30
 FRN:
 0022836373

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/30/2020

 Filing Status:
 Active
 Status:
 Received
 Status Date:
 01/30/2020

Section I - General Information

1. Respondent

0027243518 Bico	FRN	Entity Name
	0027243518	Bico

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
601 Clyde Street	Wilson	NC	27893	+1 (252) 237- 6108	dww@cbrw. net

2. Contact Representative

-		

Nathan J. Bissette Bico	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
601 South Clyde	Wilson	NC	27893	+1 (252) 237-6108	dww@cbrw.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	General partnership		
(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.

Licensee/Permittee Name		F	RN	
Tidewater TV LLC 0022836373				
Fac. ID No.	Call Sign	City	State	Service
76324	WSKY-TV	MANTEO	NC	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	spondents that hold authorizations for one or more full power television, AM, and/or FM stations should list a I other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on the lition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an SA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee , as well as Licensee Respondents that only hold authorizations for Class A television and/or low power tele uld select "Not Applicable" in response to this question.				
	Not Applicable.					
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.	Answer each question on each natural person, also list each of y other persons or entities with a Section 73.3555. (A "direct" inte	enter detailed information about ownership interests by subform. The first subform listing should be for the Respondent the officers, directors, stockholders, non-insulated partners, a direct attributable interest in the Respondent pursuant to the rest is one that is not held through any intervening companies erest in the Respondent separately.			
		,	nk for an interest holder unless that interest holder has an Commission's Equity Debt Plus attribution standard, 47 C.F.R.			
		ownership structures, list only the see(s) for which the report is bein	nose interests in the Respondent that also represent an ng submitted.			
	separate ownership reports. In s	rganizational structure that includes holding companies or other forms of indirect ownership must file In such a structure do not report, or file a separate report for, any interest holder that does not have 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	0027243518				
	Entity Name	Entity Name Bico				
	Address	PO Box				
		Street 1	601 Clyde Street			
		Street 2				
		City	Wilson			
		State ("NA" if non-U.S. address)	NC			
		Zip/Postal Code	27893			
		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			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
-	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

Ownership Information FRN 0019943497 Name Bradley A. Cox Address **PO Box** Street 1 1105 Tiffany Drive Street 2 City Wilson State ("NA" if non-U.S. NC address) **Zip/Postal Code** 27896 Country (if non-U.S. **United States** address) Listing Type Other Interest Holder **Positional Interests General Partner** (check all that apply) US Citizenship, Gender, Citizenship Ethnicity, and Race Gender Male Information (Natural Persons Only) Not Hispanic or Latino Ethnicity White Race **Interest Percentages** Voting 25.0% **Jointly Held?** (enter percentage values No from 0.0 to 100.0) Equity 25.0% **Total assets (Equity Debt**

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

Plus)

No

Ownership Information

FRN	0019943505
Name	Gay R. Cox

Address	PO Box			
	Street 1	1105 Tiffany Drive		
	Street 2			
	City	Wilson		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	27896		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	General Partner			
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	25.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	25.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	No	

Ownership Information

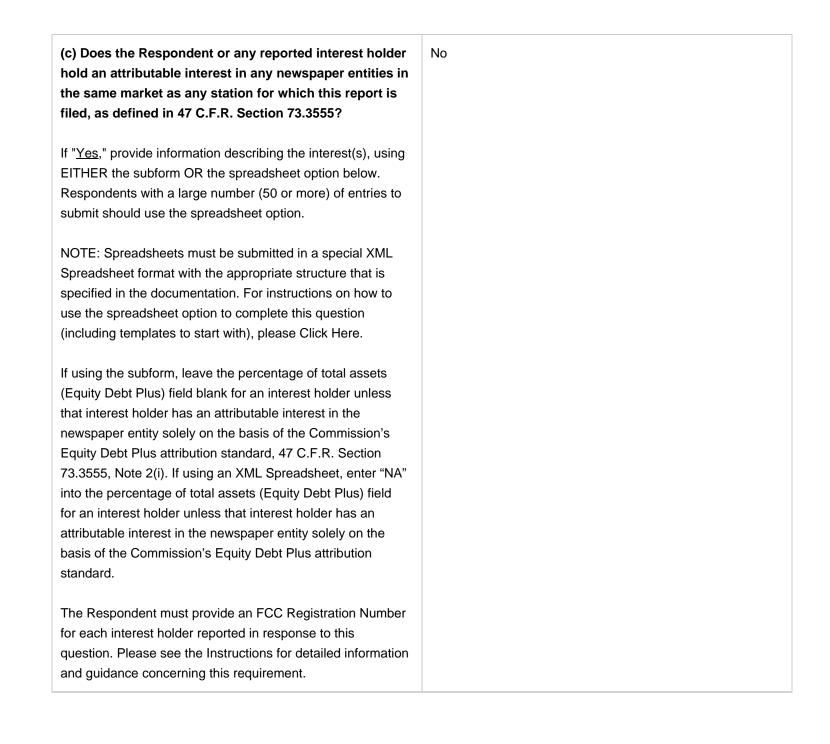
FRN	0019943455	
Name	Nathan J. Bissette	
Address	PO Box	
	Street 1	601 South Clyde
	Street 2	
	City Wilson	
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	27893
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	General Partner	
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	25.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	25.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No		

Ownership Information

FRN	0019943471		
Name	Anne W. Bissette		
Address	PO Box		
	Street 1	601 South Clyde	
	Street 2		
	City	Wilson	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27893	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	General Partner		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	25.0%	Jointly Held? No
	Equity	25.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

interests, not reported in this filing are non-attributable.	
interests, not reported in this ming are non-attributable.	
If "No," submit as an exhibit an explanation.	



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

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

ramity relationships			
FRN	0019943471	Name	Anne W Bissette
FRN	0019943455	Name	Nathan J Bissette
Relationship	Spouses		

Family Relationships

Family Relationships

FRN	0019943505	Name	Gay R Cox
FRN	0019943497	Name	Bradley A Cox
Relationship	Spouses		

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

No

If "<u>Yes</u>," 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: Partner Exact Legal Title or Name of Respondent: Bico Name: Nathan J. Bissette Phone: 2522376108 01/30/2020