

FRN

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

File Number: 0000096059Submit Date: 2020-01-09FRN: 0024218109Purpose: Commercial Broadcast Stations Non-Biennial Ownership ReportStatus: ReceivedStatus Date:01/09/2020Filing Status: Active

Section I - General Information

1. Respondent

Entity Name

0024218109 Kerby Eugene Co		onfer Irrevocable Trust				
Street Address	City (and Coun address)	try if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2105 Bud Ct.	Fr. Mill		SC	29715	+1 (443) 562- 3949	kerbifer@aol. com

2. Contact Representative

Name	Organization
Kerby E. Confer	Kerby Eugene Confer Irrevocable Trust

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2105 Bud Ct.	Ft. Mill	SC	29715	+1 (443) 562-3949	kerbifer@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	Other Trust		

(b) Provide the following information about this report:	(b) Provide the following information about this report:			
Purpose	Transfer of control or assignment of license/permit			
"As of" date	01/01/2020			
	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	FRN			
FM Radio Licenses, LLC			0003734209	
Fac. ID No.	Call Sign	City	State	Service
36874	WLBR	LEBANON	PA	АМ
36878	WQIC	LEBANON	PA	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other 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. 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/Permittee Respondents 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) or Permittee(s) for which the report is being submitted. Entities that are part of an organizational 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 a Please see the Instructions for c	-	each interest holder reported in response to this question. e concerning this requirement.
	Ownership Information		
	FRN	0024218109	
	Entity Name	Kerby Eugene Confer Irrevoca	able Trust
	Address	PO Box	
		Street 1	2105 Bud Ct.
		Street 2	
		City	Fr. Mill
		State ("NA" if non-U.S. address)	SC
		Zip/Postal Code	29715
		Country (if non-U.S. address)	United States

Respondent

Listing Type

Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values	Voting	0.0% Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	Yes		

Ownership Information

FRN	0021428362			
Name	Kristin Cantrell			
Address	PO Box			
	Street 1	115 West Main Street		
	Street 2			
	City	Frankfort		
	State ("NA" if non-U.S. address)	КҮ		
	Zip/Postal Code	40601		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Co-Trustee			
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	50.0%		
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes	

Ownership Information

FRN	0021208202	
Name	Judith M. Confer	
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)	Other - Co-Trustee			
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	50.0%		
Does interest holder have a that do not appear on this r	an attributable interest in one o report?	r more broadcast stations	Yes	
., .	at any interests, including equinis filing are non-attributable. An explanation.	ty, financial, or voting	Yes	
hold an attributable interes the same market as any sta filed, as defined in 47 C.F.R If " <u>Yes</u> ," provide information of EITHER the subform OR the	describing the interest(s), using spreadsheet option below. mber (50 or more) of entries to	No		
NOTE: Spreadsheets must b Spreadsheet format with the specified in the documentation use the spreadsheet option to (including templates to start w	appropriate structure that is on. For instructions on how to o complete this question			
If using the subform, leave th (Equity Debt Plus) field blank that interest holder has an att newspaper entity solely on th Equity Debt Plus attribution s 73.3555, Note 2(i). If using an into the percentage of total as for an interest holder unless the attributable interest in the new basis of the Commission's Ed standard.	t for an interest holder unless tributable interest in the be basis of the Commission's standard, 47 C.F.R. Section in XML Spreadsheet, enter "NA" ssets (Equity Debt Plus) field that interest holder has an wspaper entity solely on the			
for each interest holder repor	ructions for detailed information			

(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)?NoIf "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 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: Co-Trustee Exact Legal Title or Name of Respondent: Kerby Eugene Confer Irrevocable Trust Name: Judith Confer Phone: 4435623949 01/09/2020