

Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number:0000101473Submit Date:2020-01-29FRN:0006771836Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:01/29/2020Filing Status:Active

Section I - General Information

1. Respondent

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 17	Harleysville	PA	19438	+1 (215) 721- 2141	cloughery@wordfm. org

Four Rivers Community Broadcasting Corporation

2. Contact Representative

Name	Organization
Brad C. Deutsch	Foster Garvey PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac St. NW Suite 200 Suite 200	Washington	DC	20007	+1 (202) 298- 1793	brad.deutsch@foster. com

3. Application Filing Fee

Not Applicable

FRN

0006771836

4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits Licensee				
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No		

(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)

Licensee/Permitte	FRN			
Four Rivers Community Broadcasting Corporation			0006771836	
Fac. ID No.	Call Sign	City	Sta	ite Service
7844	WBZC	PEMBERTON	NJ	FM
7922	WBYO	SELLERSVILLE	PA	FM
22181	WBYX	STROUDSBURG	PA	FM
25002	WPAZ	POTTSTOWN	PA	AM
36983	WLHI	SCHNECKSVILLE	PA	FM
66520	WZXM	HARRISBURG	PA	FM
78759	WBYH	HAWLEY	PA	FM
91617	WZZD	WARWICK	PA	FM
91726	WYTL	WYOMISSING	PA	FM
91954	WZZH	HONESDALE	PA	A FM
93044	WZXQ	CHAMBERSBURG	PA	A FM
122334	WZXH	HAGERSTOWN	M	D FM
173888	WZXN	NEWBURG	PA	A FM
173893	WZXY	SPRING GROVE	PA	FM
173919	WZMV	MOHRSVILLE	PA	FM
174572	WZXB	BECHTELSVILLE	PA	FM
174592	WZXE	EAST NOTTINGHAM	PA	FM
174767	WEVW	ELYSBURG	PA	FM

Section II – Biennial Ownership Information

Description of contract or instrument

1. 47 C.F.R. Section 73.3613 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information				
Description of contract or instrument	Articles of Incorporation			
Parties to contract or instrument	Commonwealth of Pennsylvania			
Date of execution	09/1994			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation			
Document Information				

Bylaws

Parties to contract or instrument	Four Rivers Community Broadcasting Corporation
Date of execution	01/1995
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Bylaws

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, members of the governing board (or other governing entity), stockholders, 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.

Dwnership Information				
FRN	0006771836			
Entity Name	Four Rivers Community Broadcasting Corporation			
Address	PO Box			
	Street 1	PO Box 17		
	Street 2			
	City	Harleysville		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	19438		
	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	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

Ownership Information

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

No

Ownership Information			
FRN	9990121399		
Name	David W. Baker		
Address	PO Box		
	Street 1	2904 Little Rd.	
	Street 2		
	City	Perkiomenville	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	18074	
	Country (if non-U.S.United Statesaddress)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Broadcaster		
By Whom Appointed or Elected	Board of Trustees		
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	20.0%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information

FRN	9990121402		
Name	Dennis C. Grafton		
Address	PO Box		
	Street 1	607 Route 113	
	Street 2		
	City	Sellersville	

	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	18960		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Board MemberMember of Governing Board (or other governing entity)			
Principal Profession or Occupation	Businessman			
By Whom Appointed or Elected	Board of Trustees			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

FRN	0018384487	
Name	Charles W. Loughery	
Address	PO Box	
	Street 1	532 Ridge Rd.
	Street 2	
	City Telford	
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	18969
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Board MemberMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Broadcaster	
By Whom Appointed or Elected	Board of Trustees	

Citizenship, Gender, Ethnicity, and Race	Citizenship	US	
Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	r more broadcast stations Yes		

Ownership Information

RN	9990121401	9990121401		
lame	Charles C. Loughery			
Address	PO Box			
	Street 1	34101 Elm Court		
	Street 2			
	City	Lawrence Township		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	08648		
	Country (if non-U.S. address)	United States		
_isting Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Board MemberMember of Governing Board (or other governing entity)			
Principal Profession or Occupation	Attorney at Law			
By Whom Appointed or Elected	Board of Trustees			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race nformation (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
nterest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

Ownership Information				
FRN	9990121403			
Name	Lawrence H. Loughery			
Address	PO Box			
	Street 1	532 Ridge Rd.		
	Street 2			
	City	Telford		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	18969		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - Officer			
Principal Profession or Occupation	Broadcaster			
By Whom Appointed or Elected	Board of Trustees			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No	

Ownership Information		
FRN	9990121400	
Name	Nancy K Loughery	
Address	PO Box	
	Street 1	532 Ridge Rd.
	Street 2	
	City	Telford
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	18969

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		Country (if non-U.S. address)	United States	
	Listing Type	Other Interest Holder		
	Positional Interests (check all that apply)	Officer, Other - Board MemberMember of Governing Board (or other governing entity)		
	Principal Profession or Occupation	Bookkeeper		
	By Whom Appointed or Board of Trustees Elected Board of Trustees			
	Citizenship, Gender,	Citizenship	US	
	Ethnicity, and Race Information (Natural	Gender	Male	
	Persons Only)	Ethnicity	Not Hispanic or Latino	
		Race	White	
	Interest Percentages	Voting	20.0%	
	(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
		Total assets (Equity Debt Plus)	0.0%	
	Does interest holder have a that do not appear on this r	in attributable interest in one or report?	more broadcast stations	No
	(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) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?			
	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.			
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.			
	Licensee, Four Rivers Community Broadcasting Corporation, has no parent entity.			
		Section III - Certification	on	
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: President Exact Legal Title or Name of Respondent: Four Rivers Community Broadcasting Corporation Name: Charles W Loughery Phone: 2157212141 01/29/2020