

#### (REFERENCE COPY - Not for submission)

FRN

## **Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)**

File Number: 0000105843 Submit Date: 2020-02-11 FRN: 0021332739 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/12/2020 Filing Status: Active

## **Section I - General Information**

#### 1. Respondent

#### **Entity Name** 0021332739 Five Forty Broadcasting Company LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
31 Citrus Drive	Sylva	NC	28779	+1 (828) 586- 2221	rburnette@wrgc. com

#### 2. Contact Representative

Name	Organization
Anne G. Crump, Esq.	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812-0400	crump@fhhlaw.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	2	95	\$140.00
		·	•	-	Total	\$140.00

# 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
Five Forty Broadcasting Company LLC	0021332739

Fac. ID No.	Call Sign	City	State	Service
62338	WBHN	BRYSON CITY	NC	AM
73286	WRGC	SYLVA	NC	AM

## 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	State of North Carolina	
Date of execution	11/2011	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Organization	

(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.

FRN	0021332739			
Entity Name	Five Forty Broadcasting Com	Five Forty Broadcasting Company LLC		
Address	PO Box			
	Street 1	31 Citrus Drive		
	Street 2			
	City	Sylva		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28779		
	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	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	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	or more broadcast stations	No	

**Ownership Information** 

Ownership Information		
FRN	0021708706	
Name	ROY W. BURNETTE	

Address	PO Box			
	Street 1	928 Rufus Robinson Road		
	Street 2			
	City	Sylva		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28779		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Other	C/PLLC Member, Other - Managing 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	80.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	80.0%		
	Total assets (Equity Debt Plus)			

#### **Ownership Information**

FRN	0021708755		
Name	JANICE BURNETTE		
Address	PO Box		
	Street 1	928 Rufus Robinson Road	
	Street 2		
	City Sylva		
	State ("NA" if non-U.S.NCaddress)		
	Zip/Postal Code 28779   Country (if non-U.S. address) United States		
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, LC/LLC/PLLC Member		
Citizenship, Gender,	Citizenship US   Gender Female		
Ethnicity, and Race Information (Natural			

Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	5.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	5.0%		
	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	0021708789			
Name	MELVIN BURNETTE	MELVIN BURNETTE		
Address	PO Box			
	Street 1	125 Fountain Springs Road		
	Street 2			
	City	Holly Springs		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	27540		
	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	5.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	5.0%		
	Total assets (Equity Debt Plus)			

that do not appear on this report?

## **Ownership Information**

FRN	0021708805	
Name	ANITA B. WARE	
Address	PO Box	

	Street 1	4153 Queens Grant Road			
	Street 2				
	City	Jamestown			
State ("NA" if non-U.S. No address)		NC	NC		
	Zip/Postal Code 27282				
	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	Female			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	White			
Interest Percentages (enter percentage values	Voting	5.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	5.0%			
Total assets (Equity I Plus)					
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 0021708961 Karen McCracken Name Address **PO Box** Street 1 341 Red Barn Hollow Street 2 City Almond State ("NA" if non-U.S. NC address) **Zip/Postal Code** 28702 Country (if non-U.S. **United States** address) Listing Type Other Interest Holder Officer, LC/LLC/PLLC Member **Positional Interests** (check all that apply) US Citizenship, Gender, Citizenship Ethnicity, and Race Gender Female Information (Natural Persons Only) Not Hispanic or Latino Ethnicity

Race	White			
Voting	5.0% Jointly Held? No			
Equity	5.0%			
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		
	/oting Equity Fotal assets (Equity Debt Plus) Etributable interest in one or rt?	Yoting   5.0%     Equity   5.0%     Cotal assets (Equity Debt Plus)   5.0%     Etributable interest in one or more broadcast stations		

(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.	

h t	c) Does the Respondent or any reported interest holder hold 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?	No
F	T <sup>*</sup> " <u>Yes</u> ," 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 ubmit should use the spreadsheet option.	
s u	NOTE: 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 use the spreadsheet option to complete this question including templates to start with), please Click Here.	
() ti E 7 ir fo a b	i 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 (3.3555, 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 tandard.	
fe q	The Respondent must provide an FCC Registration Number or each interest holder reported in response to this juestion. Please see the Instructions for detailed information and guidance concerning this requirement.	

(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.

## Family Relationships

FRN	0021708706	Name	ROY W BURNETTE
FRN	0021708755	Name	JANICE BURNETTE

Relationship	Spouses

#### Family Relationships

·			
FRN	0021708706	Name	ROY W BURNETTE
FRN	0021708961	Name	Karen McCracken
Relationship	Parent/Child		

#### Family Relationships

FRN	0021708805	Name	ANITA B WARE
FRN	0021708961	Name	Karen McCracken
Relationship	Siblings		

## Family Relationships

FRN	0021708755	Name	JANICE BURNETTE
FRN	0021708961	Name	Karen McCracken
Relationship	Parent/Child		

#### Family Relationships

FRN	0021708789	Name	MELVIN BURNETTE
FRN	0021708961	Name	Karen McCracken
Relationship	Siblings		

## Family Relationships

FRN	0021708706	Name	ROY W BURNETTE
FRN	0021708789	Name	MELVIN BURNETTE
Relationship	Parent/Child	,	

## Family Relationships

FRN	0021708755	Name	JANICE BURNETTE
FRN	0021708789	Name	MELVIN BURNETTE
Relationship	Parent/Child		

## Family Relationships

FRN	0021708706	Name	ROY W BURNETTE	
FRN	0021708805	Name	ANITA B WARE	
Relationship	Parent/Child			

### Family Relationships

FRN	0021708755	Name	JANICE BURNETTE
FRN	0021708805	Name	ANITA B WARE
Relationship	Parent/Child		

Family Relationships			
FRN	0021708789	Name	MELVIN BURNETTE
FRN	0021708805	Name	ANITA B WARE
Relationship	Siblings		

No

(e) 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 does not have any parent entities in its ownership structure -- no flowchart is required.

## **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: <b>Managing Member</b> Exact Legal Title or Name of Respondent: <b>Five</b> <b>Forty Broadcasting Company, LLC</b> Name: <b>Roy W. Burnette</b> Phone: <b>8285862221</b> 02/11/2020