

(REFERENCE COPY - Not for submission)

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

File Number: 0000124996 | Submit Date: 2020-10-23 | FRN: 0019413855

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

10/23/2020 Filing Status: Active

#### **Section I - General Information**

### 1. Respondent

FRN	Entity Name
0019413855	Ritz, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
4125 Walker Ave.	Greensboro	NC	27407	+1 (336) 581- 3121	njackson@beulah. com

## 2. Contact Representative

Name	Organization
Coe W. Ramsey	Brooks, Pierce et al.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
150 Fayetteville Street Suite 1700	Raleigh	NC	27596	+1 (919) 839- 0300	cramsey@brookspierce. 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	For-profit corporation	

(b) Provide the following information about this report:		
Purpose	Transfer of control or assignment of license/permit	
"As of" date 06/26/2020		
	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.	

5. Licensee(s)
/Permittees(s)
and Station(s)
/Permit(s)

#### Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/Permittee Name	FRN	
Mayo Broadcasting Corporation	0003765195	

Fac. ID No.	Call Sign	City	State	Service
40793	WLOE	EDEN	NC	AM
40794	WMYN	MAYODAN	NC	AM
202449	W223DJ	EDEN	NC	FX
202450	W248DG	MAYODAN	NC	FX

### **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 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) 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 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	0019413855		
Entity Name	Ritz, Inc.	Ritz, Inc.	
Address	РО Вох		
	Street 1	4125 Walker Ave.	
	Street 2		
	City	Greensboro	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27407	

	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
nterest Percentages enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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				
FRN	0029863602	0029863602		
Name	Neal O. Jackson			
Address	PO Box			
	Street 1	907 Caviness Town Road		
	Street 2			
	City	Robbins		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	27325		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer	Officer		
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 an attributable interest in one or more broadcast stations  Yes that do not appear on this report?				

Ownership Information	0029863644		
FRN			
Name	Tracy Jackson		
Address	РО Вох		
	Street 1	907 Caviness Town Road	
	Street 2		
	City	Robbins	
	State ("NA" if non-U.S. address)	NC	

	Zip/Postal Code	27325	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
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 that do not appear on this	an attributable interest in one or report?	or more broadcast stations	Yes

Ownership Information			
FRN	0029863677		
Name	Bernard Purvis		
Address	РО Вох		
	Street 1	2755 Bernard Purvis Road	
	Street 2		
	City	Bennett	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27208	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
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 that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	0029863917	0029863917	
Entity Name	Beulah Baptist of Bennett Inc	Beulah Baptist of Bennett Inc	
Address	PO Box		
	Street 1	8454 Howard Mill Road	
	Street 2		
	City	Bennett	

	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27208	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Owner		
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	100.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No
• • •	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in

No

If "Yes," 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 submit should use the spreadsheet option.

the same market as any station for which this report is

filed, as defined in 47 C.F.R. Section 73.3555?

NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.

If 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 73.3555, 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 standard.

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.

Yes

If " $\underline{\text{Yes}}$ ," provide the following information for each such the relationship.

Family Relationships			
FRN	0029863602	Name	Neal O Jackson
FRN	0029863644	Name	Tracy Jackson
Relationship	Spouses		

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "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.	

### 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>President</b> Exact Legal Title or Name of Respondent: <b>Ritz,</b> Inc. Name: <b>Neal O. Jackson</b> Phone: <b>3365813121</b> 10/23/2020