



(REFERENCE COPY - Not for submission)

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

File Number: **0000166515** | Submit Date: **2021-11-05** | FRN: **0005869664**  
Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **11/05/2021**  
Filing Status: **Active**

Section I - General Information

1. Respondent

FRN		Entity Name			
0005869664		Word Broadcasting Network, Inc.			

  

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
6900 BILLTOWN ROAD	LOUISVILLE	KY	40299	+1 (502) 964- 2121	tom@wbna21. com

2. Contact  
Representative

Name		Organization			
ANTHONY T. LEPORE, ESQ.		RADIOTVLAW ASSOCIATES, LLC			

  

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4101 ALBEMARLE ST NW #324	WASHINGTON	DC	20016- 2151	+1 (202) 681- 2201	anthony@radiotvlaw. net

3. Application  
Filing Fee

Question	Response
Is this application being submitted without a filing fee?	Yes
If this application is being submitted without a filing fee, Indicate reason for fee exemption.	Other <b>Provide Explanation:</b> LICENSEE IS A NOT FOR PROFIT CORPORATION AND DOES NOT REMIT FILING FEES.

4. Nature of  
Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
Nature of Respondent	Not-for-profit corporation

  

(b) Provide the following information about this report:	
Purpose	Biennial

"As of" date	10/01/2021  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.
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5. Licensee(s)  
and Station(s)

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

Licensee/Permittee Name	FRN
Word Broadcasting Network, Inc.	0005869664

Fac. ID No.	Call Sign	City	State	Service
17746	KBPX-LD	HOUSTON	TX	LPD
61015	WBNM-LD	LOUISVILLE	KY	LPT
61026	WJDE-CD	NASHVILLE	TN	DCA
63935	WXVW	JEFFERSONVILLE	IN	AM
73692	WBNA	LOUISVILLE	KY	DTV
141238	W241CK	JEFFERSONVILLE	IN	FX
167758	WCSN-LD	COLUMBUS	OH	LPD

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 INCORPORATION
Parties to contract or instrument	COMMONWEALTH OF KENTUCKY
Date of execution	05/1978
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> Articles of Incorporation

Document Information	
Description of contract or instrument	BY-LAWS
Parties to contract or instrument	SELF
Date of execution	05/1978
Date of expiration	No expiration date

<b>Agreement type</b> (check all that apply)	Other <b>Agreement Type:</b> Corporate Bylaws
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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) 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.

Ownership Information			
FRN	0005869664		
Entity Name	Word Broadcasting Network, Inc.		
Address	PO Box		
	Street 1	6900 BILLTOWN ROAD	
	Street 2		
	City	LOUISVILLE	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40299	
	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 from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No
Ownership Information			

FRN	0019218973		
Name	Robert W. Rodgers		
Address	PO Box		
	Street 1	15721 BRIDLEGATE DRIVE	
	Street 2		
	City	LOUISVILLE	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40219	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	Jointly Held? No
	Equity	14.3%	
	Total assets (Equity Debt Plus)	14.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information			
FRN	0019218981		
Name	Margaret E. Rodgers		
Address	PO Box		
	Street 1	15721 BRIDLEGATE DRIVE	
	Street 2		
	City	LOUISVILLE	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40219	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	Jointly Held? No
	Equity	14.3%	
	Total assets (Equity Debt Plus)	14.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0019219120		
Name	Cleddie Keith		
Address	PO Box		
	Street 1	1544 TROPHY COURT	
	Street 2		
	City	FLORENCE	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	41042	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	Jointly Held? No
	Equity	14.3%	
	Total assets (Equity Debt Plus)	14.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information	
FRN	0019219112

Name	Rachel Rodgers		
Address	PO Box		
	Street 1	10522 MONTICELLO FOREST CIRCLE	
	Street 2		
	City	LOUISVILLE	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40299	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	Jointly Held? No
	Equity	14.3%	
	Total assets (Equity Debt Plus)	14.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0019219195		
Name	Jacqueline Yockey		
Address	PO Box		
	Street 1	14419 Willow Grove Circle	
	Street 2		
	City	LOUISVILLE	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40245	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	14.3%	Jointly Held? No
	Equity	14.3%	
	Total assets (Equity Debt Plus)	14.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	9990118285		
Name	CHARLES A. BREWSTER, SR.		
Address	PO Box		
	Street 1	5666 FIRESTONE DRIVE	
	Street 2		
	City	PACE	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32571	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	Jointly Held? No
	Equity	14.3%	
	Total assets (Equity Debt Plus)	14.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information	
FRN	9990118286
Name	WALTER G. HALLAM

Address	PO Box		
	Street 1	6305 SANTO PARK	
	Street 2		
	City	DICKINSON	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77539	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	Jointly Held? No
	Equity	14.3%	
	Total assets (Equity Debt Plus)	14.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			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

<p><b>(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?</b></p> <p>If "<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 submit should use the spreadsheet option.</p> <p>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 <a href="#">Click Here</a>.</p> <p>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.</p> <p>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.</p>	No
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<p><b>(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?</b></p> <p>If "<u>Yes</u>," provide the following information for each such the relationship.</p>	Yes
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Family Relationships			
FRN	0019218973	Name	Robert W Rodgers
FRN	0019219112	Name	Rachel Rodgers
Relationship	Parent/Child		

Family Relationships			
FRN	0019218973	Name	Robert W Rodgers
FRN	0019218981	Name	Margaret E Rodgers
Relationship	Spouses		

Family Relationships			
FRN	0019218981	Name	Margaret E Rodgers
FRN	0019219112	Name	Rachel Rodgers
Relationship	Parent/Child		

<p><b>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b></p> <p>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.</p>	No
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### 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 HAS NO PARENT ENTITY

### 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 LICENSE --OR 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>WORD BROADCASTING NETWORK, INC.</b> Name: <b>ROBERT RODGERS</b> Phone: <b>5029642121</b>  11/05/2021