

### Federal Communications Commission (REFERENCE COPY - Not for submission)

FRN

0021302096

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

File Number: 0000175009 Submit Date: 2021-12-01 FRN: 0021302062 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Superceded Status Date: 02/24/2022 Filing Status: InActive

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

### 1. Respondent

## **Entity Name** Katherine B. Lockwood Irrevocable Trust

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
220 Salters Creek Road	Hampton	VA	23661	+1 (757) 722-9736	dhanna@lockwoodbroadcast. 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	27601	+1 (919) 839- 0300	cramsey@brookspierce. com

# 3. Application

Not Applicable

# **Filing Fee**

### 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 Respondent is a Trust					

(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.

### 5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN							
Panama City TV LLC				0028	0028123172			
		City			Ctata		Comico	
Fac. ID No.	Call Sign	City			State		Service	
2942	WPGX	PANAMA CITY			FL		DTV	
Licensee/Permittee Name		FRN						
Tidewater TV LLC				0022	2836373			
Fac. ID No.	Call Sign	City			State	Ş	Service	
76324	WSKY-TV		MANTEO		NC		DTV	
Licensee/Permittee Name				FRN				
Augusta TV LLC				0028	3123180			
Fac. ID No.	Call Sign	Cit	ty		State	ę	Service	
3228	WFXG	A	JGUSTA		GA		DTV	
Licensee/Permittee Name FRN								
Marble City TV LLC				0028123164				
Fac. ID No.	Call Sign	City		State			Service	
19200	WTNZ	KN	OXVILLE		TN		DTV	
Licensee/Permittee Name				FRN				
Knoxville TV LLC		0025276742						
Fac. ID No.	Coll Sign	0:44			State		Sometice	
	Call Sign	City	HITA		State KS		Service	
65522	KAKE				KS		DTV	
65523	KLBY	COL					DTV	
65527	KHDS-LD	SAL			KS		LPD	
65534	KGBD-LD	GRE	EAT BEND		KS		LPD	
65535	KUPK	GAR	RDEN CITY		KS		DTV	
Licensee/Permittee Name	,			FRN				
Dothan TV LLC				0028123198				
Fac. ID No.	Call Sign		City	Ş	State	S	ervice	
32851	WDFX-TV		OZARK		AL		DTV	
	I							

FRN

Licensee/Permittee Name

Charlottesville TV	LLC		002827892	27	
Fac. ID No.	Call Sign	City		State	Service
363	WCAV	CHARLOTTESVILLE		VA	DTV
4687	WVAW-LD	CHARLOTTESVILLE		VA	LPD
Licensee/Permitt	ee Name		FRN		
Tennessee TV, L	LC		002861886	6	
Fac. ID No.	Call Sign	City	Sta	te S	Service
83931	WKNX-TV	KNOXVILLE	TN		DTV
	ents that hold authorization r instruments set forth in 47	Solution States (LMAs) and attributed states attributed state	vision, AM, and/or Igh (c) for the facil	ity or facilities	s listed on th
contracts and other	attributable Lecal Markatia		ilable Juli Il Jales i	syreements (	JOAS) MUS

Not Applicable.

2. Ownership Interests

1. 47 C.F.R. Section 73.3613

and Other Documents

(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	0021302096				
Entity Name	Katherine B. Lockwood Irrevocable Trust				
Address	PO Box				
	Street 1	220 Salters Creek Road			
	Street 2				
	City	Hampton			

	State ("NA" if non-U.S. address)	VA				
	Zip/Postal Code	23661				
	Country (if non-U.S. address)	U.S. 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	an attributable interest in one c	or more broadcast stations	No			

that do not appear on this report?

### **Ownership Information**

FRN	0019264316	0019264316				
Name	Pamela B. Lawson					
Address	PO Box					
	Street 1	220 Salters Creek Road				
	Street 2					
	City	Hampton				
	State ("NA" if non-U.S. address)	VA				
	Zip/Postal Code	23661				
	Country (if non-U.S. address)	United States				
Listing Type	Other Interest Holder					
<b>Positional Interests</b> (check all that apply)	Other - Trustee					
Citizenship, Gender,	Citizenship	Citizenship US				
Ethnicity, and Race Information (Natural	Gender	Female				
Persons Only)	Ethnicity	Not Hispanic or Latino				
	Race	White				
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No			
from 0.0 to 100.0)	Equity	100.0%				
	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?	Yes
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.	Yes

lf	"No,"	submit	as a	an	exhibit	an	explanation.
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(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?	No
If "Vac " provide information describing the interact(a) using	
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.	
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.	

(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)?	No
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.	

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>Trustee</b> Exact Legal Title or Name of Respondent: <b>Katherine B. Lockwood Irrevocable Trust</b> Name: <b>Pamela B. Lawson</b> Phone: <b>7577229736</b> 12/01/2021