

(REFERENCE COPY - Not for submission)

FRN

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000165271
 Submit Date:
 2021-10-29
 FRN:
 0020040051

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 10/29/2021

 Filing Status:
 Active
 Status:
 Status Date:
 10/29/2021

Section I - General Information

1. Respondent

Entity Name

002004005	51 Gois E	oadcasting Boston LLC			
Street	City (and Country if nor	U. State ("NA" if non-U.S.	•	F	

011001			-ip		
Address	S. address)	address)	Code	Phone	Email
122 GREEN STREET SUITE 2R	WORCESTER	MA	01604	+1 (508) 791-2111	Pgois@goisbroadcasting. com

2. Contact Representative

1	Name	Organization
	ALLAN G. MOSKOWITZ, Esq.	Allan G. Moskowitz, Esq.

Street	City (and Country if non U.S.		Zip		
Address	address)	State	Code	Phone	Email
10845 TUCKAHOE WAY	NORTH POTOMAC	MD	20878	+1 (301) 908- 4165	AMOSKOWITZ@AMOSKOWITZLAW. 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	\$170.00
				- -	Total	\$170.00

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	Validation and resubmission of a previously filed biennial report (certifying no changes from the previously filed biennial report) 0000093403
"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
Gois Broadcasting Boston LLC	0020040051

Fac. ID No.	Call Sign	City	State	Service
6475	WAMG	DEDHAM	МА	AM
24971	WLLH	LAWRENCE	MA	АМ
138346	W235CS	DEDHAM	MA	FX
139030	W236CU	LOWELL	MA	FX

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	Commonwealth of Massachusetts			

Date of execution	12/2009
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Articles of Organization

Document Information		
Description of contract or instrument Irrevocable Trust Agereement		
Parties to contract or instrument	Ivon P. Gois, Nicole E. Gois and Ryan M. Gois	
Date of execution	12/2016	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Trust Agrrement	

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	0020040051	
Entity Name	Gois Broadcasting Boston LLC	
Address	PO Box	
	Street 1	122 GREEN STREET
	Street 2 SUITE 2R	
	City WORCESTER State ("NA" if non-U.S. address) MA	
	Zip/Postal Code	01604
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
	Respondent	

Positional Interests (check all that apply)			
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 a	n attributable interest in one o	r more broadcast stations	No

Ownership Information

that do not appear on this report?

FRN	0020039384		
Name	PAUL GOIS		
Address	PO Box		
	Street 1	122 GREEN STREET	
	Street 2	SUITE 2R	
	City	WORCESTER	
	State ("NA" if non-U.S. address)	MA	
	Zip/Postal Code 01604		
	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 from 0.0 to 100.0)	Voting	050.0%	Jointly Held? No
	Equity	50.0%	
	Total assets (Equity Debt Plus)	50.0%	

Ownership Information

Address	PO Box	
Entity Name	INMR Irrevocable Family Trust	
FRN	0027323526	

	Street 1	15 Llewellyn Way	
	Street 2		
	City	Edgartown	
	State ("NA" if non-U.S. address)	МА	
	Zip/Postal Code	02539	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? Yes
from 0.0 to 100.0)	Equity	50.0%	
	Total assets (Equity Debt50.0%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 interests, not reported in this	any interests, including equit s filing are non-attributable.	y, financial, or voting	Yes

(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	No
filed, as defined in 47 C.F.R. Section 73.3555?	
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.	
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.	

If "No," submit as an exhibit an explanation.

(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 withNoduties 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.

The licensee is owned by individuals.

Section III - 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: Member Exact Legal Title or Name of Respondent: Gois Broadcasting Boston, LLC Name: Paul Gois Phone: 5087912111 10/29/2021

Certification