

(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number: **0000172862** Submit Date: **2021-11-29** FRN: **0006771836**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/29/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0006771836	Four Rivers Community Broadcasting Corporation

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 17 1186 Sumneytown Pike	Harleysville	PA	19438	+1 (215) 721- 2141	cloughery@wordfm. org

2. Contact Representative

Name		Organization	
	Brad C. Deutsch	Foster Garvey PC	

Street	City (and Country if non U.S.		Zip		
Address	address)	State	Code	Phone	Email
1000 Potomac St. NW Suite 200 Suite 200	Washington	DC	20007	+1 (202) 298- 1793	brad.deutsch@foster. com

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Licensee			
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No		

(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
Four Rivers Community Broadcasting Corporation	0006771836

Fac. ID No.	Call Sign	City	State	Service
7844	WBZC	PEMBERTON	NJ	FM
7922	WBYO	SELLERSVILLE	PA	FM
22181	WBYX	STROUDSBURG	PA	FM
25002	WPAZ	POTTSTOWN	PA	AM
36983	WLHI	SCHNECKSVILLE	PA	FM
66520	WZXM	HARRISBURG	PA	FM
73347	WNPV	LANSDALE	PA	AM
78759	WBYH	HAWLEY	PA	FM
91617	WZZD	WARWICK	PA	FM
91726	WYTL	WYOMISSING	PA	FM
91954	WZZH	HONESDALE	PA	FM
93044	WZXQ	CHAMBERSBURG	PA	FM
122334	WZXH	HAGERSTOWN	MD	FM
173888	WZXN	NEWBURG	PA	FM
173893	WZXY	SPRING GROVE	PA	FM
173919	WZMV	MOHRSVILLE	PA	FM
174572	WZXB	BECHTELSVILLE	PA	FM
174592	WZXE	EAST NOTTINGHAM	PA	FM
174767	WEVW	ELYSBURG	PA	FM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents 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 Pennsylvania			
Date of execution	09/1994			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation			

Document Information				
Description of contract or instrument	Bylaws			
Parties to contract or instrument	Four Rivers Community Broadcasting Corporation			
Date of execution	01/1995			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Bylaws			

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, members of the governing board (or other governing entity), stockholders, 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	0006771836	0006771836		
Entity Name	Four Rivers Community Broad	casting Corporation		
Address	РО Вох	17		
	Street 1	1186 Sumneytown Pike		
	Street 2			
	City	Harleysville		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	19438		
	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	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		

Total assets (Equi	ty Debt 0.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or more broadcast station	s No

Ownership Information		
FRN	9990121399	
Name	David W. Baker	
Address	PO Box	
	Street 1	2904 Little Rd.
	Street 2	
	City	Perkiomenville
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	18074
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Broadcaster	
By Whom Appointed or Elected	Board of Trustees	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	14.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have at that do not appear on this re	n attributable interest in one of eport?	r more broadcast stations No

Ownership Information			
FRN	9990121402	9990121402	
Name	Dennis C. Grafton		
Address	РО Вох		
	Street 1	607 Route 113	
	Street 2		

	City	Sellersville	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	18960	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Board MemberMember	er of Governing Board (or other	governing entity)
Principal Profession or Occupation	Businessman		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values 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 c	or more broadcast stations	No

Ownership Information		
FRN	0018384487	
Name	Charles W. Loughery	
Address	PO Box	
	Street 1	532 Ridge Rd.
	Street 2	
	City Telford State ("NA" if non-U.S. PA address) Zip/Postal Code 18969	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Board MemberMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Broadcaster	

By Whom Appointed or Elected	Board of Trustees	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	14.3%
(enter percentage values 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 creport?	or more broadcast stations Yes

Ownership Information			
FRN	9990121401		
Name	Charles C. Loughery	Charles C. Loughery	
Address	РО Вох		
	Street 1	111 Walnut Lane	
	Street 2		
	City	Yardley	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	19067	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Other - Board MemberMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney at Law		
By Whom Appointed or Elected	Board of Trustees	Board of Trustees	
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values 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 or more broadcast stations	
that do not appear on this report?	

No

Ownership Information			
FRN	9990121403		
Name	Lawrence H. Loughery	Lawrence H. Loughery	
Address	РО Вох		
	Street 1	1091 Magazine Rd	
	Street 2		
	City	Green Lane	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	18054	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Officer		
Principal Profession or Occupation	Broadcaster		
By Whom Appointed or Elected	Board of Trustees	Board of Trustees	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values 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 or more broadcast stations No hat do not appear on this report?		

Ownership Information			
FRN	9990121400	9990121400	
Name	Nancy K Loughery	Nancy K Loughery	
Address	РО Вох	PO Box	
	Street 1	532 Ridge Rd.	
	Street 2	Street 2	
	City	Telford	

	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	18969	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Board Membe	erMember of Governing Board (o	or other governing entity)
Principal Profession or Occupation	Bookkeeper		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values 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		
FRN	9990147712	
Name	Alfred H. Richter	
Address	РО Вох	
	Street 1	1134 Rickert Rd.
	Street 2	
	City	Perkasie
	State ("NA" if non-U.S. PA address) Zip/Postal Code 18944	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Businessman	
By Whom Appointed or Elected	Board of Trustees	

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%
	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?		or more broadcast stations No

Ownership Information				
FRN	9990147715			
Name	Jane F. Krupp			
Address	РО Вох			
	Street 1	926 Woessner Rd.		
	Street 2			
	City	Harleysville		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	19438		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retired Teacher			
By Whom Appointed or Elected	Board of Trustees			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	14.3%		
(enter percentage values 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 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
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(c) 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.	

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 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: President Exact Legal Title or Name of Respondent: Four Rivers Community Broadcasting Corporation Name: Charles W. Loughery Phone: 2157212141 11/29/2021