

(REFERENCE COPY - Not for submission)

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

File Number: 0000221028 | Submit Date: 2023-09-15 | FRN: 0026422311

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

09/15/2023 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0023901663	Laurel Highland Total Communications, Inc	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
101 Laurel Highlands Place	Donegal	PA	15628	+1 (724) 593- 8111	jjkail@lhtc. net

2. Contact Representative

Name	Organization
Aaron P. Shainis	Shainis & Peltzman, Chartered

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1850 M Street NW Suite 240	Washington	DC	20036	+1 (202) 293-0567	aaron@s-plaw.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 09/01/2023		
	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	
LHTC Media of West Virginia, Inc.	0026422311	

Fac. ID No.	Call Sign	City	State	Service
20460	WRLF	FAIRMONT	WV	FM
20461	WBKE	FAIRMONT	WV	AM
21171	WMMN	FAIRMONT	WV	AM
32202	WGYE	MANNINGTON	WV	FM
58621	WHTI	SALEM	WV	FM
68305	WZST	WESTOVER	WV	FM
76086	W280FF	MORGANTOWN	WV	FX
140606	W239CM	MORGANTOWN	WV	FX
200587	W252EF	MORGANTOWN	WV	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		
Entity Name	Laurel Highland Total Communications, Inc	
Address	РО Вох	
	Street 1	101 Laurel Highlands Place

	Street 2		
	City	Donegal	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15628	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
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 creport?	or more broadcast stations	No

Ownership Information				
FRN	9990134240	9990134240		
Name	CONNIE B. BEAM			
Address	PO Box			
	Street 1	101 Laurel Highlands Place		
	Street 2			
	City	Donegal		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	15628		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No	
from 0.0 to 100.0) Total assets (Equity Plus)		0.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information		
FRN	9990134243	
Name	JAMES J. KAIL	
Address	PO Box	

	Street 1	101 Laurel Highlands Place	101 Laurel Highlands Place	
	Street 2			
	City	Donegal		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	15628		
	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 creport?	or more broadcast stations	No	

Ownership Information			
FRN	9990134241		
Name	DENNIS PIPER		
Address	РО Вох		
	Street 1	101 Laurel Highlands Place	
	Street 2		
	City	Donegal	
State ("NA" if non-U.S. pA address) Zip/Postal Code 15628			
		15628	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values	Voting	20.0%	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 that do not appear on this report?			No

Ownership Information	
FRN	9990134238
Name	MORGAN D. WITHROW

Address	РО Вох		
	Street 1	101 Laurel Highlands Place	
	Street 2		
	City	Donegal	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15628	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this r	n attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990144437		
Name	KEVIN T. SAYLOR		
Address	РО Вох		
	Street 1	101 Laurel Highlands Place	
	Street 2		
	City	Donegal	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15628	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values	Voting	20.0%	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 No that do not appear on this report?			No

Ownership Information	p Information	
FRN	9990144438	

Name	WALTER D. SEIGFRIED		
Address	PO Box		
	Street 1	101 Laurel Highlands Place	
	Street 2		
	City	Donegal	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15628	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - INTEREST HOLDER		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	an attributable interest in one creport?	r more broadcast stations	No
• •	at any interests, including equinis filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) 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?

No

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

(d) 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: President Exact Legal Title or Name of Respondent: Laurel Highland Total Communications, Inc. Name: James J Kail Phone: 7245938111