

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000224696 | Submit Date: 2023-11-03 | FRN: 0002898989

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/07/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0002898989	Pathfinder Communications Corporation

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
245 Edison Road Suite 250	Mishawaka	IN	46546	+1 (888) 333- 3318	jdille@federatedmedia. com

2. Contact Representative

Name	Organization
Nancy A. Ory	Lerman Senter PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2001 L Street, NW Suite 400	Washington	DC	20036	+1 (202) 416- 6791	NORY@LERMANSENTER.

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	9	95	\$855.00
				Total	\$855.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	3	Licensee
Nature of Respondent		For-profit corporation

(b) Provide the following information about this report:		
Purpose	Biennial	
"As of" date	10/01/2023	
	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) and Station(s)

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

Licensee/Permittee Name	FRN
Pathfinder Communications Corporation	0002898989

Fac. ID No.	Call Sign	City	State	Service
18662	WFWI	FORT WAYNE	IN	FM
28205	WOWO	FORT WAYNE	IN	AM
48911	WTRC-FM	NILES	МІ	FM
51723	WBYT	ELKHART	IN	FM
51724	WKJG	FORT WAYNE	IN	AM
51726	WMEE	FORT WAYNE	IN	FM
51728	WTRC	ELKHART	IN	AM
55659	WBYR	WOODBURN	IN	FM
63773	WAOR	LIGONIER	IN	FM

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	INDIANA SECRETARY OF STATE		
Date of execution	08/1970		
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	INDIANA SECRETARY OF STATE		
Date of execution	08/1970		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: BYLAWS		

Document Information		
Description of contract or instrument	SHAREHOLDERS AGREEMENT	
Parties to contract or instrument	AMONG SHAREHOLDERS	
Date of execution	10/1984	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: SHAREHOLDERS AGREEMENT	

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	0002898989	
Entity Name	Pathfinder Communications Corporation	

Address	PO Box		
	Street 1	245 Edison Road Suite 250	
	Street 2		
	City	Mishawaka	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46546	
	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	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 that do not appear on this r	an attributable interest in one o	or more broadcast stations	No

Ownership Information				
FRN	0019343177	0019343177		
Name	John, III F. Dille	John, III F. Dille		
Address	PO Box			
	Street 1	245 EDISON ROAD		
	Street 2	SUITE 250		
	City	MISHAWAKA		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	46545		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholde	Officer, Director, Stockholder		
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	50.0%	Jointly Held? No	
	Equity	5.0%		
	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?		Yes		

Ownership Information				
FRN	0019343144			
Name	John, IV F. Dille	John, IV F. Dille		
Address	PO Box			
	Street 1	245 EDISON ROAD		
	Street 2	SUITE 250		
	City	MISHAWAKA		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	46545		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder			
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	Voting	13.0% Jointly Held?		
from 0.0 to 100.0)	Equity	27.0%		
	Total assets (Equity Debt Plus)	t 0.0%		
Does interest holder have a	an attributable interest in one or report?	r more broadcast stations	Yes	

Ownership Information		
FRN	0019343110	
Name	Sarah D. Erlacher	
Address	PO Box Street 1 245 EDISON ROAD	
Street 2 SUITE 250		SUITE 250
	City	MISHAWAKA

	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46545	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	09.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	24.0%	
	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	Yes

Ownership Information				
FRN	0019343052	0019343052		
Name	Alec C. Dille	Alec C. Dille		
Address	PO Box			
	Street 1	245 EDISON ROAD		
	Street 2	SUITE 250		
	City	City MISHAWAKA		
	State ("NA" if non-U.S. IN address) Zip/Postal Code 46545			
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder	Stockholder		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino	Not Hispanic or Latino	
	Race White			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting 29.0% Jointly Held?		_	

	Equity	43.0%	
	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?		Yes	
(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

(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?

Yes

If "Yes," provide the following information for each such the relationship.

Family Relationships				
FRN	0019343052	Name	Alec C Dille	
FRN	0019343110	Name	Sarah D Erlacher	
Relationship	Siblings			

Family Relationships				
FRN	0019343144	Name	John, IV F Dille	
FRN	0019343052	Name	Alec C Dille	
Relationship	Siblings			

Family Relationships			
FRN	0019343177	Name	John, III F Dille
FRN	0019343052	Name	Alec C Dille
Relationship	Parent/Child		

Family Relationships			
FRN	0019343110	Name	Sarah D Erlacher
FRN	0019343144	Name	John, IV F Dille
Relationship	Siblings		

Family Relationships			
FRN	0019343177	Name	John, III F Dille
FRN	0019343110	Name	Sarah D Erlacher
Relationship	Parent/Child		

Family Relationships			
FRN	0019343177	Name	John, III F Dille
FRN	0019343144	Name	John, IV F Dille

Relationship	Parent/Child

(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.	

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.

File Name	Uploaded By	Attachment Type	Description
Pathfinder Communications Corporation Organizational Chart.pdf	Applicant	Ownership Chart	Organizational Chart

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: Pathfinder Communications Corporation Name: John F. Dille , III. Phone: 8883336133 11/03/2023