

(REFERENCE COPY - Not for submission)

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

File Number: **0000225474** Submit Date: **2023-11-08** FRN: **0001770163** 

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/09/2023

Filing Status: Active

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

### 1. Respondent

FRN	Entity Name
0001770163	Holston Valley Broadcasting Corporation

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
222 Commerce Street	Kingsport	TN	37660	+1 (423) 246- 9578	davidw@wtfm.

## 2. Contact Representative

Name		Organization	
	Dennis J. Kelly	Law Office of Dennis J. Kelly	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
30628 Detroit Road, Box 278	Westlake	ОН	44145	+1 (202) 293- 2300	dkellyfcclaw1@comcast. net

## 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	MAT	1	95	\$95.00
		MAR	6	95	\$570.00
				Total	\$665.00

## 4. Nature of Respondent

# (a) Provide the following information about the Respondent: Relationship to stations/permits 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
Holston Valley Broadcasting Corporation	0001770163

Fac. ID No.	Call Sign	City	State	Service
14721	WVEK-FM	WEBER CITY	VA	FM
27489	WTFM	KINGSPORT	TN	FM
27490	WOPI-CD	BRISTOL, VA/KINGSPORT	TN	DCA
27495	WKPT	KINGSPORT	TN	AM
27498	WKTP	JONESBOROUGH	TN	AM
27501	WKPZ-CD	KINGSPORT	TN	DCA
27502	WKPT-CD	KINGSPORT	TN	DCA
27503	WKIN-CD	WEBER CY,VA-KPT,TN	VA	DCA
27504	WKPT-TV	KINGSPORT	TN	DTV
31405	WOPI	BRISTOL	TN	AM
47076	WRZK	COLONIAL HEIGHTS	TN	FM
77676	WAPW-CD	ABINGDON, ETC.	VA	DCA
77677	WAPK-CD	BRISTOL VA/KINGSPORT	TN	DCA

### 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	State of Tennessee	
Date of execution	03/1966	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate	

## 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	Ownership Information			
FRN	0001770163	0001770163		
Entity Name	Holston Valley Broadcasting C	Holston Valley Broadcasting Corporation		
Address	РО Вох			
	Street 1	222 Commerce Street		
	Street 2			
	City	Kingsport		
	State ("NA" if non-U.S. address)	TN		
	Zip/Postal Code	37660		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			

Positional Interests (check all that apply)	Respondent	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 or more broadcast stations that do not appear on this report?			No	

Ownership Information			
FRN	0020021044		
Entity Name	Glenwood Communications (	Glenwood Communications Corporation	
Address	PO Box		
	Street 1	222 Commerce Street	
	Street 2		
	City	Kingsport	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37660-4319	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	Interest holder is not a Tribal nation or Tribal entity	
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)	100.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No

Ownership Information		
FRN	9990109564	
Name	Miranda Davis	
Address	РО Вох	
	Street 1	222 Commerce Street
	Street 2	

	City	Kingsport	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37660-4319	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
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	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 or more broadcast stations No that do not appear on this report?		No	

Ownership Information			
FRN	9990127917	9990127917	
Name	Tiffany Hickman		
Address	PO Box		
	Street 1	222 Commerce Street	
	Street 2		
	City	Kingsport	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37660-4319	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer	Officer	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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	9990088529		
Name	Bob Neil	Bob Neil	
Address	PO Box		
	Street 1	9719 Vista Falls Dr.	
	Street 2		
	City	Golden Oak	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32836	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director, Other - Chairman of the Board		
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	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 that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	0020016598	
Name	Paula Snodgrass	
Address	PO Box	
	Street 1	222 Commerce Street
	Street 2	

	City	Kingsport	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37660-4319	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
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	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 that do not appear on this	an attributable interest in one c	r more broadcast stations	No

Ownership Information			
FRN	0020016507	0020016507	
Name	N. David Widener	N. David Widener	
Address	РО Вох		
	Street 1	222 Commerce Street	
	Street 2		
	City	Kingsport	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37660-4319	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Director	Officer, Director	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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	

FRN	9990109572		
Name	Jahra David		
	John Boyd		
Address	РО Вох		
	Street 1	2328 Ocean Park Blvd, Apt B	
	Street 2		
	City	Santa Monica	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90405-5167	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990109580	
Name	Kathryn Boyd	
Address	PO Box	
	Street 1	2215 Wakonda Way
	Street 2	

	City	Monument		
	State ("NA" if non-U.S. address)	СО		
	Zip/Postal Code	80132-9633		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Director			
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	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 that do not appear on this	an attributable interest in one o	or more broadcast stations	No	

Ownership Information			
FRN	9990147675	9990147675	
Name	William C. Boyd	William C. Boyd	
Address	PO Box		
	Street 1	Post Office Box 1254	
	Street 2		
	City	Wellington	
	State ("NA" if non-U.S. address)	СО	
	Zip/Postal Code	80549	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director	Director	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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
• • •	nat any interests, including equi his 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?

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

Family Relationships			
FRN	9990109572	Name	John Boyd
FRN	9990109580	Name	Kathryn Boyd
Relationship	Siblings		

(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
WKPTOrganizational Structure 10-01-2023.pdf	Applicant	Ownership Chart	Organizational Structure

### **Section III - Certification**

Certification	Section	Question	Response
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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>President</b> Exact Legal Title or Name of Respondent: <b>Holston Valley Broadcasting Corporation</b> Name: <b>Nathan David Widener</b> Phone: <b>4232469578</b> 11/08/2023