



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial
Ownership Report (FCC Form 323)

File Number: 0000227506 | Submit Date: 2023-11-22 | FRN: 0021825054

Purpose: Commercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 11/22/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0020893962		Harrison Irrevocable Trust			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
126 Daniel Street Suite 200	Portsmouth	NH	03801	+1 (603) 431-0000	colby@gamesterlaw.com

2. Contact Representative

Name		Organization			
Kathleen Victory		Fletcher Heald & Hildreth, PLC			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812-0473	victory@fhhlaw.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	Other Trust

(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
WBIN Media Co., Inc.	0021825054

Fac. ID No.	Call Sign	City	State	Service
11664	WNNH	HENNIKER	NH	FM
17801	WXLF	HARTFORD	VT	FM
23253	WBYY	SOMERSWORTH	NH	FM
23254	WTSN	DOVER	NH	AM
23329	WFNQ	NASHUA	NH	FM
24949	WTHT	AUBURN	ME	FM
41105	WBYA	ISLESBORO	ME	FM
49564	WBQX	THOMASTON	ME	FM
54908	WNHW	BELMONT	NH	FM
54909	WJYY	CONCORD	NH	FM
54910	WTPL	HILLSBORO	NH	FM
65675	WFNK	LEWISTON	ME	FM
67270	WEMJ	LACONIA	NH	AM
69493	WZLF	BELLOWS FALLS	VT	FM
69854	WBQQ	KENNEBUNK	ME	FM
73215	WLNH-FM	LACONIA	NH	FM
73885	WHXR	SCARBOROUGH	ME	FM
83636	W297BS	LACONIA	NH	FX
138295	W251CF	DOVER	NH	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.

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) 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	0020893962		
Entity Name	Harrison Irrevocable Trust		
Address	PO Box		
	Street 1	126 Daniel Street	
	Street 2	Suite 200	
	City	Portsmouth	
	State ("NA" if non-U.S. address)	NH	
	Zip/Postal Code	03801	
	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 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	0034519454	
Name	Colby Gamester, Esq.	
Address	PO Box	
	Street 1	144 Washington Street
	Street 2	
	City	Portsmouth

	State ("NA" if non-U.S. address)	NH	
	Zip/Postal Code	03801	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee, Harrison Irrevocable Trust		
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	100.0%	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	0020893913		
Name	William H. Binnie		
Address	PO Box		
	Street 1	126 Daniel St	
	Street 2	Suite 200	
	City	Portsmouth	
	State ("NA" if non-U.S. address)	NH	
	Zip/Postal Code	03801	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trust Protector		
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	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

(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) 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 " <u>Yes</u> ," provide the following information for each such the relationship.	No
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(d) Is Respondent seeking an attribution exemption for any officer or director with duties 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.	No
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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 LICENSE --OR 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: Trust Protector Exact Legal Title or Name of Respondent: Harrison Irrevocable Trust Name: William H. Binnie Phone: 6034310000 11/22/2023