

Federal (REFERENCE COPY - Not for submission) Communications Operations

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000040950Submit Date: 2018-01-30FRN: 0019232222Purpose: Commercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 01/30/2018Filing Status: ActiveStatus: ActiveStatus Date: 01/30/2018

Section I - General Information

1. Respondent

 FRN
 Entity Name

 0019232222
 Judy S Alt Irrevocable Trust

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
14451 Marina San Pablo Place	Jacksonville	FL	32224	+1 (678) 296- 6469	altradio@aol. com

2. Contact Representative

Name	Organization
Donald J. Alt	Judy S. Alt Irrevocable Trust

			Zip		
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email
14451 Marina San Pablo Place	Jacksonville	FL	32224	+1 (678) 296-6469	altradio@aol.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	10/01/2017
	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
FM Radio Licenses, LLC	0003734209

Fac. ID No.	Call Sign	City	State	Service
1057	WFGE	STATE COLLEGE	PA	FM
3038	WYLY	BELLAIRE	ОН	AM
3039	WBGI-FM	BELLAIRE	ОН	FM
3956	WMAJ-FM	CENTRE HALL	PA	FM
4996	WUKL	BETHLEHEM	WV	FM
6025	WBUS	BOALSBURG	PA	FM
11668	WCEI-FM	EASTON	MD	FM
12918	WUZZ	SAEGERTOWN	PA	FM
13710	WOHI	EAST LIVERPOOL	ОН	AM
13711	WOGI	MOON TOWNSHIP	PA	FM
14774	WINX-FM	ST. MICHAELS	MD	FM
15327	WNTJ	JOHNSTOWN	PA	AM
15328	WKYE	JOHNSTOWN	PA	FM
21421	WGYI	OIL CITY	PA	FM
24940	WGYY	MEADVILLE	PA	FM
24942	WMGW	MEADVILLE	PA	AM
24997	WJST	NEW CASTLE	PA	AM
24999	WKPL	ELLWOOD CITY	PA	FM
33828	WPKL	UNIONTOWN	PA	FM
38265	WFGY	ALTOONA	PA	FM
38269	WFBG	ALTOONA	PA	AM
47089	WVAM	ALTOONA	PA	AM
47090	WWOT	ALTOONA	PA	FM
48923	WQWK	STATE COLLEGE	PA	AM
48926	WAPY	STATE COLLEGE	PA	FM
49026	WCCL	CENTRAL CITY	PA	FM
49777	WFRA	FRANKLIN	PA	AM
49789	WHMJ	FRANKLIN	PA	FM
54607	WHVR	HANOVER	PA	AM
54608	WYCR	YORK-HANOVER	PA	FM
56363	WLKH	SOMERSET	PA	FM

56364	WNTI	SOMERSET	PA	AM
56641	WRQY	MOUNDSVILLE	WV	FM
58312	WALY	BELLWOOD	PA	FM
64845	WRKW	EBENSBURG	PA	FM
64848	WJHT	JOHNSTOWN	PA	FM
64849	WRSC	STATE COLLEGE	PA	AM
65408	WLYI	BURGETTSTOWN	PA	FM
65709	WOGG	OLIVER	PA	FM
67131	WGTY	GETTYSBURG	PA	FM
67132	WGET	GETTYSBURG	PA	AM
71246	WKST	NEW CASTLE	PA	AM
71868	WFRB	FROSTBURG	MD	АМ
71869	WFRB-FM	FROSTBURG	MD	FM
72316	WRKY-FM	HOLLIDAYSBURG	PA	FM
72965	WFGI-FM	JOHNSTOWN	PA	FM
74082	WTBO	CUMBERLAND	MD	AM
74083	WRQE	CUMBERLAND	MD	FM
74089	WTIV	TITUSVILLE	PA	АМ
74469	WYLE	GROVE CITY	PA	FM
76254	WXMJ	CAMBRIDGE SPRINGS	PA	FM
88380	WUUZ	COOPERSTOWN	PA	FM

Licensee/Permittee Name	FRN
Burbach of DE, LLC	0003748704

Fac. ID No.	Call Sign	City	State	Service
15254	WGGE	PARKERSBURG	WV	FM
15255	WADC	PARKERSBURG	WV	AM
22677	WHBR-FM	PARKERSBURG	WV	FM
22678	WVNT	PARKERSBURG	WV	AM
32202	WGYE	MANNINGTON	WV	FM
41082	WRZZ	PARKERSBURG	WV	FM
52015	WXIL	ELIZABETH	WV	FM
58621	WHTI	SALEM	WV	FM
67102	WXKX	CLARKSBURG	WV	AM
67103	WGIE	CLARKSBURG	WV	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.				
2. Ownership Interests	enter detailed information about ownership interests by subform. The first subform listing should be for the Respondent the officers, directors, stockholders, non-insulated partners, a direct attributable interest in the Respondent pursuant to the rest is one that is not held through any intervening companies erest in the Respondent separately.				
			nk for an interest holder unless that interest holder has an Commission's Equity Debt Plus attribution standard, 47 C.F.R.		
	In the case of vertical or indirect attributable interest in the Licens		nose interests in the Respondent that also represent an ng submitted.		
	Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership mu separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not an attributable interest in the Licensee(s) for which the report is being submitted.				
	Please see the Instructions for f	urther detail concerning interests	s that must be reported in response to this question.		
	The Respondent must provide a Please see the Instructions for c	-	each interest holder reported in response to this question. e concerning this requirement.		
	Ownership Information				
	FRN	0019232222			
	Entity Name	Judy S Alt Irrevocable Trust			
	Address	PO Box			
		Street 1	14451 Marina San Pablo Place		
		Street 2			
		City	Jacksonville		
State ("NA" if non-U.S. FL address)					
		Zip/Postal Code	32224		

Country (if non-U.S.

address)

Respondent

Respondent

Voting

Equity

Listing Type

Entity

Positional Interests

(check all that apply)

Tribal Nation or Tribal

Interest Percentages

from 0.0 to 100.0)

(enter percentage values

United States

0.0%

0.0%

Jointly Held?

No

Interest holder is not a Tribal nation or Tribal entity

	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an a	No		

that do not appear on this report?

Ownership Information				
FRN	0019231695	0019231695		
Name	Donald J. Alt			
Address	PO Box			
	Street 1	14451 Marina San Pablo Place		
	Street 2			
	City	Jacksonville		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	32224		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Trustee			
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	100.0%		
	Total assets (Equity Debt Plus)	100.0%		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes	
	at any interests, including equi his filing are non-attributable.	ty, financial, or voting	Yes	

If "No," submit as an exhibit an explanation.



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

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

(e) Is Respondent seeking an attribution exemption for any officer or director with No 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.

Certif	ication

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: Trustee Exact Legal Title or Name of Respondent: Judy Slicho Alt Irrevocable Trust Name: Donald J Alt Phone: 6782966469 01/30/2018