

FRN

0001743129

Not Applicable

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

**Entity Name** 

 File Number:
 0000046026
 Submit Date:
 2018-03-01
 FRN:
 0020019436

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 03/01/2018

 Filing Status:
 Active
 Status:
 Received
 Status Date:
 03/01/2018

## **Section I - General Information**

## 1. Respondent

GREENWOOD BROADCASTING CO., INC.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
c/o Beverly Poston One Television Place	Charlotte	NC	28205	+1 (704) 372- 4434	bposton@bahakel. com

## 2. Contact Representative

Name	Organization
M. Anne Swanson	Wilkinson Barker Knauer, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW Suite 800N	Washington	DC	20036	+1 (202) 383- 3342	aswanson@wbklaw. com

## 3. Application Filing Fee

4.	Nature of
Re	espondent

(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	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 F					
WDOD OF CHATTANOOGA, INC.			0001771591	0001771591	
		<b>•</b>			
Fac. ID No.	Call Sign	City	State	Service	
71351	WDOD-FM	CHATTANOOGA	TN	FM	
Licensee/Permittee Name					
South Carolina Broadcasting Partners			0003819182		
Fac. ID No.	Call Sign	City	State	Service	
60963	WOLO-TV	COLUMBIA	SC	DTV	

## 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	(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.				
			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 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	0001743129			
	Entity Name	GREENWOOD BROADCASTING CO., INC.			
	Address	PO Box			
		Street 1	c/o Beverly Poston		

	Street 2	One Television Place			
	City	Charlotte			
	State ("NA" if non-U.S. address)	NC			
	Zip/Postal Code	28205			
	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 an attributable interest in one or more broadcast stations No that do not appear on this report?					

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Ownership	Information
	muulon

FRN	0019312560				
Name	James G. Babb				
Address	PO Box				
	Street 1	One Television Place			
	Street 2				
	City	Charlotte	Charlotte		
	State ("NA" if non-U.S. address)	NC			
	Zip/Postal Code	28205			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
<b>Positional Interests</b> (check all that apply)	Officer, Director	Officer, 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%	
s interest holder have an	more broadcast stations	Yes	

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

Ownership Information				
FRN	0019312636	0019312636		
Name	Beverly B. Poston	Beverly B. Poston		
Address	PO Box			
	Street 1	One Television Place		
	Street 2			
	City	Charlotte		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28205		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Officer, Director			
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 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 o report?	r more broadcast stations	Yes	

#### **Ownership Information**

FRN	0019313550	
Name	John H. Hutchinson	
Address	PO Box	
	Street 1	One Television Place
	Street 2	
	City	Charlotte

	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28205	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
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 o	or more broadcast stations	Yes

that do not appear on this report?

**Ownership Information** FRN 0019313717 Russell J. Schwartz Name Address **PO Box** Street 1 **One Television Place** Street 2 City Charlotte State ("NA" if non-U.S. NC address) 28205 Zip/Postal Code Country (if non-U.S. **United States** address) Other Interest Holder Listing Type **Positional Interests** Officer (check all that apply) Citizenship, Gender, US Citizenship Ethnicity, and Race Gender Male Information (Natural Persons Only) Ethnicity Not Hispanic or Latino White Race Jointly Held? Interest Percentages Voting 0.0% (enter percentage values 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		Yes	

FRN	0005008289		
Entity Name	Bahakel Communications, Ltd.		
Address	PO Box		
	Street 1	c/o Beverly Poston	
	Street 2	One Television Place	
	City	Charlotte	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28205	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Stockholder		
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	100.0%	Jointly Held? No
	Equity	100.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations Yes 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

#### **Ownership Information**

that do not appear on this report?



(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: President         Name: Beverly B Poston Phone: 7043724434       Name: Beverly B Poston Phone: 7043724434			
	Certification	and that to the best of my knowledge and belief, all statements in this report are	Exact Legal Title or Name of Respondent: Greenwood Broadcasting Co. Inc. Name: Beverly B Poston Phone: 7043724434