

(REFERENCE COPY - Not for submission)

FRN

Not Applicable

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000044333 Submit Date: 2018-02-27 FRN: 0019516178 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/27/2018 Filing Status: Active

Section I - General Information

1. Respondent

Entity Name

0019516178 Horizon Broad		dcasting Company, LLC				
Street Address	City (and Count address)	ry if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
5057 Turnpike Feeder Road	Fort Pierce		FL	34951	+1 (772) 467- 4329	marissa@repplawfirm. com

2. Contact Representative

Name	Organization
Marissa G. Repp, Esq.	Repp Law Firm

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1629 K Street, NW Suite 300	Washington	DC	20006- 1631	+1 (202) 656- 1619	MARISSA@REPPLAWFIRM. COM

3. Application **Filing Fee**

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	Limited liability company	

(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):

				FRN		
WHLG FM, LLC			0020743639			
Call Sign	City		State	Service		
WHLG	PORT ST. LUCIE		FL	FM		
		FRN				
		0020633566				
all Sign C	lity		State	Service		
WSBH S	SATELLITE BEACH		FL	FM		
		FRN				
WJZT Communications, LLC			094758			
Call Sign	City	S	tate	Service		
WTSM	WOODVILLE	F	۶L	FM		
	WHLG all Sign C VSBH S C Call Sign	WHLG PORT ST. LUCIE all Sign City VSBH SATELLITE BEACH C Call Sign City	WHLG PORT ST. LUCIE FRN 0020633 all Sign City VSBH SATELLITE BEACH FRN C 00154 Call Sign City S	WHLGPORT ST. LUCIEFLINTERSING STELLITE BEACHINTERSIGNCall SignCityETYCityState		

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.			
		sets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an ondent solely on the basis of the 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.			
separate ownership reports. In suc		izational structure that includes holding companies or other forms of indirect ownership must file uch a structure do not report, or file a separate report for, any interest holder that does not have ensee(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 que Please see the Instructions for detailed information and guidance concerning this requirement.			
	Ownership Information			
	FRN	0019516178		

Entity Name	Horizon Broadcasting Compa	Horizon Broadcasting Company, LLC	
Address	PO Box		
	Street 1	5057 Turnpike Feeder Road	
	Street 2		
	City Fort Pierce		
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34951	
	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 that do not appear on this	an attributable interest in one c report?	r more broadcast stations	Yes

Ownership Information				
FRN	0023074230	0023074230		
Name	Hillary N. Smith			
Address	PO Box			
	Street 1	5057 Turnpike Feeder Road		
	Street 2			
	City	Fort Pierce		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	34951		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
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	1.0%	Jointly Held? No
	Equity	1.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this r	an attributable interest in one o report?	r more broadcast stations	Yes

Ownership Information				
FRN	0023074222	0023074222		
Name	Tyler Espling			
Address	PO Box			
	Street 1	5057 Turnpike Feeder Road		
	Street 2			
	City	Fort Pierce		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	34951		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
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	1.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	1.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one c report?	r more broadcast stations	Yes	

Ownership Information			
FRN	0015095987		
Name	Ernest A. Petrone		
Address	PO Box		
	Street 1	5057 Turnpike Feeder Road	

	Street 2		
	City	Fort Pierce	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34951	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Other	r - Trustee of LLC Member	
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	1.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	1.0%	
	Total assets (Equity Debt Plus)		

ownership information		
FRN	0020010542	
Name	Karen S. Espling	
Address	PO Box	
	Street 1	5057 Turnpike Feeder Road
	Street 2	
	City Fort Pierce	
	State ("NA" if non-U.S. FL address)	
	Zip/Postal Code 34951	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	LC/LLC/PLLC Member	
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	1.0%	Jointly Held? No
	Equity	1.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

FRN	0023074172			
Name	Heather A. Smith Wassell			
Address	PO Box			
	Street 1	5057 Turnpike Feeder Road		
	Street 2			
	City	Fort Pierce		
	State ("NA" if non-U.S. address)			
	Zip/Postal Code			
	Country (if non-U.S.United Statesaddress)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
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	1.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	1.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes	

Ownership Information		
FRN	0021229950	
Name	Brenda K. Smith	
Address	PO Box	
	Street 1	5057 Turnpike Feeder Road
	Street 2	

	City	Fort Pierce	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34951	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
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	18.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	18.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one or report?	or more broadcast stations	Yes

Ownership Information			
FRN	0021311469		
Name	Myrtice S. Lester		
Address	PO Box		
	Street 1	5057 Turnpike Feeder Road	
	Street 2		
	City Fort Pierce		
	State ("NA" if non-U.S. FL address)		
	Zip/Postal Code	34951	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee of LLC Member		
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)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes	

Ownership Information	Ownershi	Informati	on
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Name	Kathy S. Petrone			
Address	PO Box			
	Street 1	5057 Turnpike Feeder Road		
	Street 2			
	City	Fort Pierce		
State ("NA" if non-U.S. FL address)				
	Zip/Postal Code 34951 Country (if non-U.S. address) United States			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Other - Trustee of LLC Member			
Citizenship, Gender,	Citizenship	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
nterest Percentages	Voting	1.0%	Jointly Held? No	
rom 0.0 to 100.0)	Equity	1.0%	·	
	Total assets (Equity Debt Plus)			

Ownership Information			
FRN	0020918439		
Name	Christopher D. Smith		
Address	PO Box		
	Street 1	5057 Turnpike Feeder Road	
	Street 2		

	City	Fort Pierce	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34951	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Other	per, Other - Manager; Trustee of LLC Member	
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	1.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	1.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes

FRN	0020010369	0020010369		
	0020010369			
Entity Name	Christopher D. Smith Banking Trust			
Address	PO Box			
	Street 1	5057 Turnpike Feed	er Road	
	Street 2			
	City	Fort Pierce		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	34951	34951	
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
Interest Percentages (enter percentage values	Voting	9.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	9.0%		

	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations		Yes	

that do not appear on this report?

FRN	0020001400			
Name	Vernon D. Smith	Vernon D. Smith		
Address	PO Box			
	Street 1	5057 Turnpike Feeder Road		
	Street 2			
	City	Fort Pierce		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	34951		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
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	47.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	47.0%		
	Total assets (Equity Debt Plus)			

FRN	0020010443		
Entity Name	Karen Smith Espling Banking Trust		
Address	PO Box		
	Street 1	5057 Turnpike Feeder Road	
	Street 2		
	City	Fort Pierce	
	State ("NA" if non-U.S. address)	FL	

	Zip/Postal Code	34951	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	9.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	9.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have ar that do not appear on this re	attributable interest in one or port?	more broadcast stations	Yes

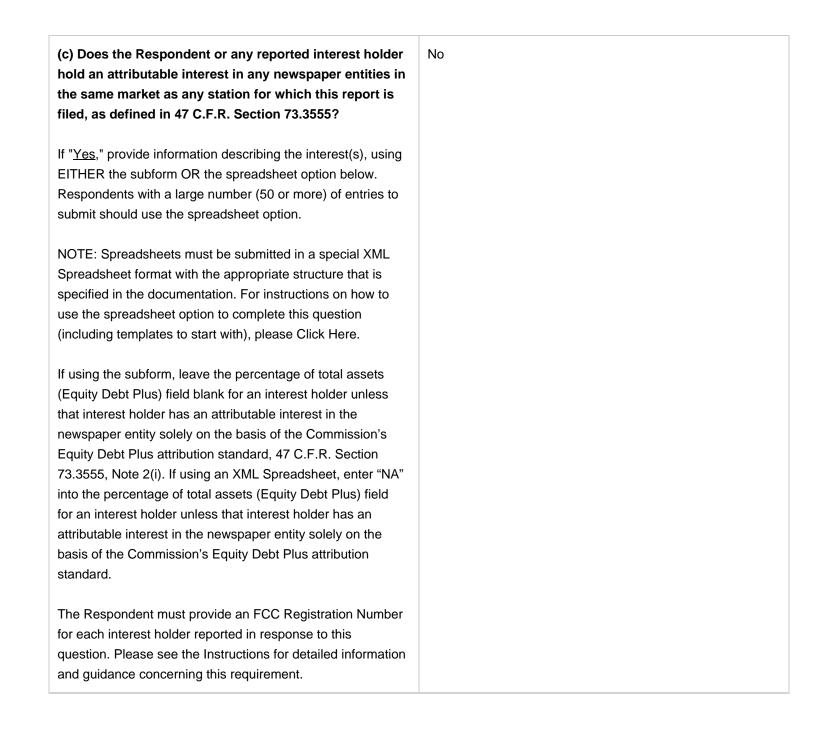
Ownership Information				
FRN	0020010419	0020010419		
Entity Name	Kathy Smith Petrone Banking Trust			
Address	PO Box			
	Street 1	5057 Turnpike Feeder Road		
	Street 2			
	City	Fort Pierce		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	34951		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
Interest Percentages (enter percentage values	Voting	9.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	9.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one report?	or more broadcast stations	Yes	

Ownership Information

FRN	2130003565
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Name	John L. Minton		
Address	PO Box		
	Street 1	5057 Turnpike Feeder Road	
	Street 2		
	City	Fort Pierce	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34951	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee of LLC Member		
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)		
	an attributable interest in one o	r more broadcast stations	Yes

interests, not reported in this filing are non-attributable. 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 Yes or related to each other as parentchild or as siblings?

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

Family Relationships

FRN	0021229950	Name	Brenda K Smith
FRN	0020010542	Name	Karen S Espling
Relationship	Parent/Child		

Family Relationships

FRN	0021229950	Name	Brenda K Smith
FRN	0021313671	Name	Kathy S Petrone
Relationship	Parent/Child		

Family Relationships

FRN	0020918439	Name	Christopher D Smith
FRN	0023074230	Name	Hillary N Smith
Relationship	Parent/Child		

Family Relationships				
FRN	0021229950	Name	Brenda K Smith	
FRN	0020918439	Name	Christopher D Smith	
Relationship	Parent/Child			

Family Relationships

FRN	0020001400	Name	Vernon D Smith
FRN	0021313671	Name	Kathy S Petrone
Relationship	Parent/Child		

Family Relationships

FRN	0021313671	Name	Kathy S Petrone	
FRN	0020010542	Name	Karen S Espling	
Relationship	Siblings			

Family Relationships

FRN	0020918439	Name	Christopher D Smith		
FRN	0023074172	Name	Heather A Smith Wassell		
Relationship	Parent/Child				

Family Relationships

FRN	0020001400	Name	Vernon D Smith
FRN	0020010542	Name	Karen S Espling
Relationship	Parent/Child		

Family Relationships

FRN	0020010542	Name	Karen S Espling
FRN	0023074222	Name	Tyler Espling
Relationship	Parent/Child		

Family Relationships

FRN	0020918439	Name	Christopher D Smith	
FRN	0020010542	Name	Karen S Espling	
Relationship	Siblings			

Family Relationships

FRN	0020001400	Name	Vernon D Smith
FRN	0021229950	Name	Brenda K Smith
Relationship	Spouses		

FRN	0020001400	Name	Vernon D Smith
FRN	0020918439	Name	Christopher D Smith
Relationship	Parent/Child		

Family Relationships

FRN	0021313671	Name	Kathy S Petrone	
FRN	0015095987	Name	Ernest A Petrone	
Relationship	Spouses			

Family Relationships

FRN	0020001400	Name	Vernon D Smith
FRN	0021311469	Name	Myrtice S Lester
Relationship	Siblings		

Family Relationships

EDN	0000074470	Nome		
FRN	0023074172	Name	Heather A Smith Wassell	
FRN	0023074230	Name	Hillary N Smith	
Relationship	Siblings			

Family Relationships

FRN	0020918439	Name	Christopher D Smith
FRN	0021313671	Name	Kathy S Petrone
Relationship	Siblings		

(e) Is Respondent seeking an attribution exemption for any officer or director withNoduties wholly unrelated to the Licensee(s)?No

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.

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,	
	/OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR	

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: Manager Exact Legal Title or Name of Respondent: Horizon Broadcasting Company, LLC Name: Christopher D Smith Phone: 7724674329 02/27/2018
		02/27/2018