



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial  
Ownership Report (FCC Form 323)

File Number: 0000044327 | 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

FRN		Entity Name			
0015094758		WJZT Communications, LLC			

Street Address	City (and Country if non U.S. address)	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

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	MAR	1	95	\$70.00
				Total	\$70.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
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):

Licensee/Permittee Name	FRN
WJZT Communications, LLC	0015094758

Fac. ID No.	Call Sign	City	State	Service
89051	WTSM	WOODVILLE	FL	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.

Document Information	
Description of contract or instrument	Articles of Organization of WJZT Communications, LLC
Parties to contract or instrument	WJZT Communications, LLC and State of Florida
Date of execution	03/2006
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Articles of Organization

Document Information
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<b>Description of contract or instrument</b>	Restated Limited Liability Company Operating Agreement
<b>Parties to contract or instrument</b>	Members of WJZT Communications, LLC
<b>Date of execution</b>	03/2010
<b>Date of expiration</b>	No expiration date
<b>Agreement type</b> (check all that apply)	Other <b>Agreement Type:</b> Restated Limited Liability Company Operating Agreement

Document Information	
<b>Description of contract or instrument</b>	Amendment to the Operating Agreement of WJZT Communications, LLC
<b>Parties to contract or instrument</b>	Members of WJZT Communications, LLC
<b>Date of execution</b>	08/2013
<b>Date of expiration</b>	No expiration date
<b>Agreement type</b> (check all that apply)	Other <b>Agreement Type:</b> Amendment to the Operating Agreement

## 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		
<b>FRN</b>	0015094758	
<b>Entity Name</b>	WJZT Communications, LLC	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	5057 Turnpike Feeder Road
	<b>Street 2</b>	
	<b>City</b>	Fort Pierce
	<b>State ("NA" if non-U.S. address)</b>	FL
	<b>Zip/Postal Code</b>	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 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	0020001400		
Name	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, Other - Manager		
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	47.0%	Jointly Held? No
	Equity	47.0%	
	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	0019516178		
Entity Name	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	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 from 0.0 to 100.0)	Voting	45.0%	Jointly Held? No
	Equity	45.0%	
	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			
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, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	

	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	1.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	1.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes

<b>Ownership Information</b>			
<b>FRN</b>	0020918439		
<b>Name</b>	Christopher D. Smith		
<b>Address</b>	<b>PO Box</b>		
	<b>Street 1</b>	5057 Turnpike Feeder Road	
	<b>Street 2</b>		
	<b>City</b>	Fort Pierce	
	<b>State ("NA" if non-U.S. address)</b>	FL	
	<b>Zip/Postal Code</b>	34951	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member, Other - Manager		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	1.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	1.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes

<b>Ownership Information</b>		
<b>FRN</b>	0021313671	
<b>Name</b>	Kathy S. Petrone	
<b>Address</b>	<b>PO Box</b>	

	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, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	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

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. 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, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	

	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	1.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	1.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes

<b>Ownership Information</b>			
<b>FRN</b>	0015095987		
<b>Name</b>	Ernest A. Petrone		
<b>Address</b>	<b>PO Box</b>		
	<b>Street 1</b>	5057 Turnpike Feeder Road	
	<b>Street 2</b>		
	<b>City</b>	Fort Pierce	
	<b>State ("NA" if non-U.S. address)</b>	FL	
	<b>Zip/Postal Code</b>	34951	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	1.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	1.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes

<b>Ownership Information</b>			
<b>FRN</b>	0023074172		
<b>Name</b>	Heather A. Smith Wassell		
<b>Address</b>	<b>PO Box</b>		
	<b>Street 1</b>	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, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	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

Ownership Information			
FRN	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, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	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

Ownership Information			
FRN	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, 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	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

Ownership Information		
FRN	2130003565	
Name	John L. Minton	
Address	PO Box	
	Street 1	5057 Turnpike Feeder Road
	Street 2	

	<b>City</b>	Fort Pierce	
	<b>State ("NA" if non-U.S. address)</b>	FL	
	<b>Zip/Postal Code</b>	34951	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Other - Trustee of LLC Member		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes
<b>(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.</b> If "No," submit as an exhibit an explanation.			Yes

<p><b>(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?</b></p> <p>If "<u>Yes</u>," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.</p> <p>NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please <a href="#">Click Here</a>.</p> <p>If using the subform, 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 newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.</p> <p>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.</p>	No
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<p><b>(d) 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?</b></p> <p>If "<u>Yes</u>," provide the following information for each such the relationship.</p>	Yes
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Family Relationships			
FRN	0020918439	Name	Christopher D Smith
FRN	0023074230	Name	Hillary N Smith
Relationship	Parent/Child		

Family Relationships			
FRN	0020918439	Name	Christopher D Smith
FRN	0023074172	Name	Heather A Smith Wassell
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	0020010542	Name	Karen S Espling
Relationship	Siblings		

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

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

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

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

Family Relationships			
FRN	0023074172	Name	Heather A Smith Wassell
FRN	0023074230	Name	Hillary N Smith
Relationship	Siblings		

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

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

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

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

<p><b>(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b></p> <p>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.</p>	No
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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
<a href="#">Horizon - WJZT 2017 Organizational Chart.pdf</a>	Applicant	Ownership Chart	WJZT Communications, LLC Organizational Chart

Section III - Certification

Certification

Section	Question	Response
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<b>Authorized Party to Sign</b>	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).	
<b>Certification</b>	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>Manager</b> Exact Legal Title or Name of Respondent: <b>WJZT Communications, LLC</b> Name: <b>Christopher D Smith</b> Phone: <b>7724674329</b>  02/27/2018