

Federal Communications Commission (REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000090396Submit Date:2019-11-19FRN:0014313282Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:11/19/2019Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name
0014313282	WZCT

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1111 E. Willow Street	Scottsboro	AL	35768	+1 (256) 574-1330	Wzct5000watts@scottsboro. org

2. Contact Representative

Name	Organization
Greta Carlile	Bonner-Carlile ENTERPRISES,INC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
714 Adams Street	Scottsboro	AL	35768	+1 (256) 609- 4134	Gretagentle45@gmail. 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	Limited liability company		

(b) Provide the following information about this report:

Purpose	Biennial
"As of" date	10/01/2019
	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.

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name			FRN	
WZCT			0014313282	
Fac. ID No.	Call Sign	City	State	Service
6357	WZCT	SCOTTSBORO	AL	AM

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 partner non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening compare 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 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 must f separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not ha 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 d	etailed information and guidance	e concerning this requirement.		
	Ownership Information				
	FRN	0014313282			
	Entity Name	WZCT			
	Address	PO Box			
		Street 1	1111 E. Willow Street		
		Street 2			
		City	Scottsboro		
		State ("NA" if non-U.S. address)	AL		
		Zip/Postal Code	35768		
		Country (if non-U.S. address)	United States		
	Listing Type	Respondent			

Positional Interests (check all that apply)	Respondent Interest holder is not a Tribal nation or Tribal entity			
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 o report?	r more broadcast stations	No	
., .	at any interests, including equi nis filing are non-attributable. an explanation.	ty, financial, or voting	Yes	
the same market as any sta filed, as defined in 47 C.F.F If " <u>Yes</u> ," provide information EITHER the subform OR the	describing the interest(s), using spreadsheet option below. mber (50 or more) of entries to			
NOTE: Spreadsheets must be Spreadsheet format with the specified in the documentation use the spreadsheet option to (including templates to start If using the subform, leave the (Equity Debt Plus) field blanks that interest holder has an at newspaper entity solely on the Equity Debt Plus attribution s	be submitted in a special XML appropriate structure that is on. For instructions on how to o complete this question with), please Click Here. The percentage of total assets a for an interest holder unless tributable interest in the he basis of the Commission's			
(<i>)</i>	ssets (Equity Debt Plus) field that interest holder has an wspaper entity solely on the			
for each interest holder repo	le an FCC Registration Number rted in response to this tructions for detailed information			

and guidance concerning this requirement.

(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
duties wholly unrelated to the Licensee(s)?NoIf "Yes," 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

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, 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: Member Exact Legal Title or Name of Respondent: Bonner-Carlile Enterprises, INC Name: Greta G Carlile Phone: 2566094134 11/19/2019