

FRN

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

File Number:0000073320Submit Date:2019-05-28FRN:0003734209Purpose:Commercial Broadcast Stations Non-Biennial Ownership ReportStatus:ReceivedStatus Date:05/28/2019Filing Status:ActiveStatus:Status:Status:

### **Section I - General Information**

### 1. Respondent

Entity Name

0019874494		Judith Marie Conf	er Irrevocable Trust			
Street Address	City (and Coun address)	try if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2105 Bud Ct.	Ft. Mill		SC	29715	+1 (443) 562- 3949	kerbifer@aol. com

### 2. Contact Representative

Name	Organization
Kerby Confer	Judith Marie Confer Irrevocable Trust

			Zip		
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email
2105 Bud Ct.	Ft. Mill	SC	29715	+1 (443) 562-3949	kerbifer@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	Transfer of control or assignment of license/permit		
"As of" date	05/26/2019		
	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.		

### and Station(s) /Permit(s)

Licensee/Permittee N	lame		FRN		
FM Radio Licenses, LLC 0003734209					
Fac. ID No.	Call Sign	City		State	Service
16458	WDEL	WILMINGTON		DE	АМ

16459 WST	TW	WILMINGTON	DE	FM
51136 WDE	EL-FM	CANTON	NJ	FM
52768 WFA	AI	SALEM	NJ	AM
53482 WAF	FL	MILFORD	DE	FM
53483 WYL	US	MILFORD	DE	AM
53487 WXI	DE	LEWES	DE	FM
53488 WXC	CY	HAVRE DE GRACE	MD	FM
53490 WAV	VD	OCEAN PINES	MD	FM
58763 WNC	CL	MILFORD	DE	FM

### Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents Licensee/Permittee Respondents 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/Permittee Respondents 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.

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) or Permittee(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) or Permittee(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.

wnership Information				
FRN	0019874494			
Entity Name	ty Name Judith Marie Confer Irrevocable Trust			
Address	PO Box			

	Street 1	2105 Bud Ct.	
	Street 2		
	City	Ft. Mill	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29715	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have ar	attributable interest in one or	more broadcast stations	Yes

that do not appear on this report?

Ownership Information				
FRN	0019231745	0019231745		
Name	Kerby E. Confer			
Address	PO Box			
	Street 1	2105 Bud Ct.		
	Street 2			
	City	Ft. Mill		
	State ("NA" if non-U.S. address)	SC		
	Zip/Postal Code	29715		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Trustee			
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No	
from 0.0 to 100.0)	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	

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	

(c) Does the Respondent or any reported interest holder	No
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?	
If "Yes," 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.	
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 Click Here.	
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.	
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.	

(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)?	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,	
		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: <b>Trustee</b> Exact Legal Title or Name of Respondent: <b>Judith Marie Confer Irrevocable Trust</b> Name: <b>Kerby Confer</b> Phone: <b>4435623949</b> 05/26/2019