

(REFERENCE COPY - Not for submission)

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

File Number: 0000097116 | Submit Date: 2020-01-14 | FRN: 0003747680

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/14/2020

Filing Status: Active

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

### 1. Respondent

FRN	Entity Name
0003747680	Mark Media, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 607	Burnsville	NC	28714	+1 (828) 682- 6221	rks@wkyk.

### 2. Contact Representative

Name	Organization
Coe W. Ramsey	Brooks, Pierce et al.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
150 Fayetteville Street Suite 1700	Raleigh	NC	27601	+1 (919) 839- 0300	cramsey@brookspierce. 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	For-profit corporation

(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.		

### 5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN	
Mark Media, Inc.	0003747680	

Fac. ID No.	Call Sign	City	State	Service
40247	WKYK	BURNSVILLE	NC	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.

Document Information		
Description of contract or instrument	Articles of Incorporation	
Parties to contract or instrument	N/A	
Date of execution	06/1966	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation	

#### **Document Information**

Description of contract or instrument	Bylaws
Parties to contract or instrument	Shareholders
Date of execution	06/1966
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Bylaws

Document Information	
Description of contract or instrument	Amendment to Articles of Incorporation
Parties to contract or instrument	N/A
Date of execution	12/1972
Date of expiration	No expiration date
Agreement type (check all that apply)	Other  Agreement Type: Amendment to Articles of Incorporation

### 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		
FRN	0003747680	
Entity Name	Mark Media, Inc.	
Address	PO Box 607	
	Street 1	
	Street 2	
	City	Burnsville
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28714
	Country (if non-U.S. address)	United States

Listing Type	Respondent	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 that do not appear on this	an attributable interest in one creport?	or more broadcast stations	No	

Ownership Information			
FRN	0019427228		
Entity Name	Revocable Living Trust of J. Ardell Sink		
Address	РО Вох	607	
	Street 1		
	Street 2		
	City	Burnsville	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28714	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Stockholder		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal ı	Interest holder is not a Tribal nation or Tribal entity	
Interest Percentages (enter percentage values	Voting	75.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	75.0%	
	Total assets (Equity Debt Plus)	75.0%	
Does interest holder have a that do not appear on this r	n attributable interest in one o eport?	r more broadcast stations	Yes

Ownership Information		
FRN	0019427244	
Entity Name	Revocable Living trust of Remelle Sink	
Address	РО Вох	607
	Street 1	

	Street 2		
	City	Burnsville	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28714	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (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	Voting	25.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	25.0%	
	Total assets (Equity Debt Plus)	25.0%	
Does interest holder have a	an attributable interest in one o	or more broadcast stations	Yes

Ownership Information			
FRN	0019917913		
Name	J. Ardell Sink		
Address	РО Вох	607	
	Street 1		
	Street 2		
	City	Burnsville	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28714	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	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 from 0.0 to 100.0)	Voting	0.0% Jointly Held?	

	Equity	0.0%	
	Total assets (Equity Debt Plus)	%	
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	Yes

Ownership Information				
FRN	0019917871	0019917871		
Name	Remelle Sink			
Address	PO Box 607			
	Street 1			
	Street 2			
	City	Burnsville		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28714	28714	
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director	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	Voting	0.0% Jointly Held?		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	Yes	

Ownership Information			
FRN	0019431873		
Name	Michael Sink	Michael Sink	
Address	Address PO Box 744	744	
	Street 1		
	Street 2		
	City	Burnsville	

	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28714	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	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)	%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	Yes

FRN	0019431907			
Name	Holly Hall			
Address	PO Box			
	Street 1	28 Wildcat Mountain I	Drive	
	Street 2			
	City	Burnsville		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28714		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Director			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female	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% ebt %	
	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	0019431790			
Name	Marsa Jarrett			
Address	PO Box			
	Street 1	320 Holly Tree Lane		
	Street 2			
	City	Simpsonville		
	State ("NA" if non-U.S. SC address)			
	Zip/Postal Code	29681		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	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	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	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	
(b) Respondent certifies that interests, not reported in this If "No," submit as an exhibit as	Yes			

(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?

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.

No

(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?

Yes

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

Family Relationships				
FRN	0019917871	Name	Remelle Sink	
FRN	0019431873	Name	Michael Sink	
Relationship	Parent/Child			

Family Relationships				
FRN	0019917913	Name	J. Ardell Sink	
FRN	0019431790	Name	Marsa Jarrett	
Relationship	Parent/Child			

Family Relationships			
FRN	0019917871	Name	Remelle Sink
FRN	0019431907	Name	Holly Hall
Relationship	Parent/Child		

Family Relationships			
FRN	0019917913	Name	J. Ardell Sink
FRN	0019917871	Name	Remelle Sink
Relationship	Spouses		

Family Relationships			
FRN	0019431907	Name	Holly Hall
FRN	0019431873	Name	Michael Sink
Relationship	Siblings		

Family Relationships				
FRN	0019917871	Name	Remelle Sink	
FRN	0019431790	Name	Marsa Jarrett	
Relationship	Parent/Child			

Family Relationships			
FRN	0019431873	Name	Michael Sink
FRN	0019431790	Name	Marsa Jarrett
Relationship	Siblings		

Family Relationships				
FRN	0019917913	Name	J. Ardell Sink	
FRN	0019431873	Name	Michael Sink	
Relationship	Parent/Child			

Family Relationships			
FRN	0019431907	Name	Holly Hall
FRN	0019431790	Name	Marsa Jarrett
Relationship	Siblings		

Family Relationships			
FRN	0019917913	Name	J. Ardell Sink
FRN	0019431907	Name	Holly Hall
Relationship	Parent/Child		

(e) Is Respondent seeking an attribution exemption for any officer or director with
duties wholly unrelated to the Licensee(s)?

No

If "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.

# 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
Mark Media Organizational Chart.pdf	Applicant	Ownership Chart	Organizational Chart

### **Section III - Certification**

#### 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: Vice President Exact Legal Title or Name of Respondent: Mark Media, Inc. Name: Remelle K. Sink Phone: 8286826221