

### (REFERENCE COPY - Not for submission)

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

 File Number:
 0000102592
 Submit Date:
 2020-01-30
 FRN:
 0027415116

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/30/2020

 Filing Status:
 Active
 Status:
 Received
 Status Date:
 01/30/2020

## **Section I - General Information**

## 1. Respondent

FRN	Entity Name
0027415116	New Life Studios, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 844	Jamestown	TN	38556	+1 (931) 879- 9924	ccody@newlife105. com

### 2. Contact Representative

Name	Organization
A. Wray Fitch, III.	Gammon & Grange, P.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
8280 Greensboro Drive Suite 140	McLean	VA	22102	+1 (703) 761-5013	awf@gg-law.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	2	95	\$140.00
				-	Total	\$140.00

# 4. Nature of Respondent

(a) Provide the following information about the Responde	(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Licensee			
Nature of Respondent	Not-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):

Lic	ensee/Permittee Name	FRN
Ne	ew Life Studios, Inc.	0027415116

Fac. ID No.	Call Sign	City	State	Service
30297	WCLC	JAMESTOWN	TN	AM
30298	WCLC-FM	JAMESTOWN	TN	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 Incorporation	
Parties to contract or instrument	New Life Studios, Inc.; State of Tennessee	
Date of execution	03/2010	
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	New Life Studios, Inc.	
Date of execution	03/2011	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Bylaws	

### 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	0027415116			
Entity Name	New Life Studios, Inc.			
Address	PO Box			
	Street 1	PO Box 844		
	Street 2			
	City Jamestown			
	State ("NA" if non-U.S. address)	if non-U.S. TN		
	Zip/Postal Code 38556			
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
<b>Positional Interests</b> (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			

#### Ownership Information

	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
interest holder have an attributable interest in one or more broadcast stations		Yes	

Does interest holder have an attributable interest in one or more broadcast station
that do not appear on this report?

Ownership Information			
FRN	0020006920		
Name	Baley F. Allred, III.		
Address	PO Box	844	
	Street 1		
	Street 2		
	City	Jamestown	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	38556	
	Country (if non-U.S. address)		
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	20.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations</b> Yes			Yes

#### **Ownership Information**

FRN	0020006896	
Name	Brenda L. Allred	
Address	PO Box	844
	Street 1	
	Street 2	
	City	Jamestown

	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	38556	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	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	20.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an	n attributable interest in one o	r more broadcast stations	Yes

that do not appear on this report?

Ownership Information			
FRN	9990134587		
Name	Paul Martin		
Address	PO Box		
	Street 1	503 Appian Way	
	Street 2		
	City	Chattanooga	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37415	
	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	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%	Jointly Held? No

	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
s interest holder have an attributable interest in one or more broadcast stations		Yes	

Does interest holder have an attributable interest in one or more broadcast station
that do not appear on this report?

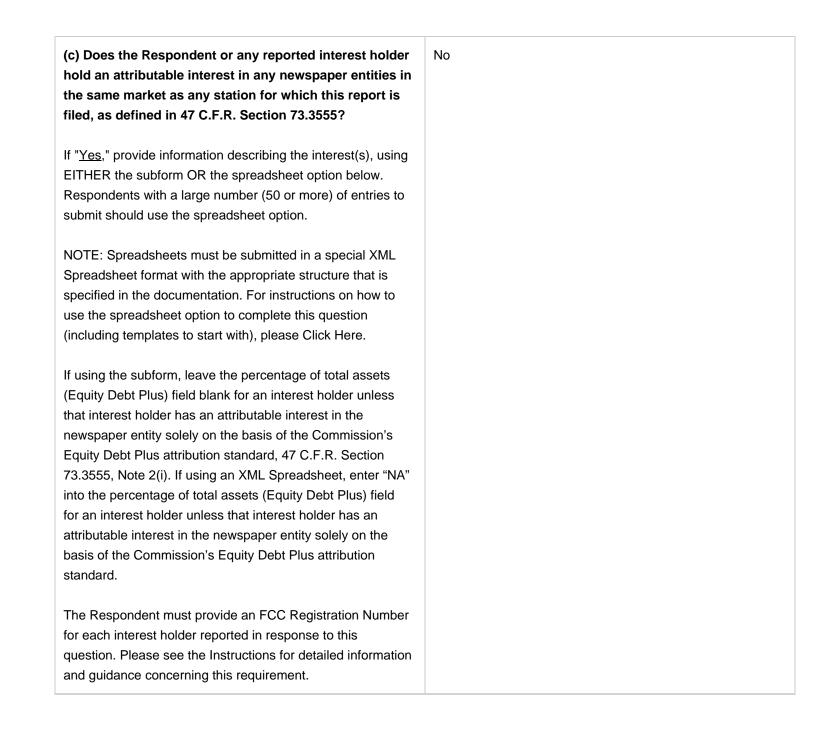
Ownership Information				
FRN	9990134588			
Name	Randy Jones			
Address	PO Box			
	Street 1	315 E. Woodlawn Avenue		
	Street 2			
	City	Jamestown		
	State ("NA" if non-U.S. address)	TN		
	Zip/Postal Code	38556	38556	
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Director			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

#### **Ownership Information**

FRN	9990134589	
Name	Ralph Sexton, Jr.	
Address	PO Box	
	Street 1	96 Paramount Drive
	Street 2	
	City Leicester	

	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28748		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Director	Director		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino	Not Hispanic or Latino	
	Race	White		
Interest Percentages (enter percentage values	Voting	20.0%	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	Yes	
., .	nat any interests, including equi his filing are non-attributable.	ty, financial, or voting	Yes	

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.

FRN	0020006920	Name	Baley F Allred , III .
FRN	0020006896	Name	Brenda L Allred
Relationship	Spouses		

No

## Comily Deletionshine

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

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.

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.

## **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: <b>Secretary/Treasurer</b> Exact Legal Title or Name of Respondent: <b>New</b> <b>Life Studios, Inc.</b> Name: <b>Brenda Allred</b> Phone: <b>9318799924</b> 01/30/2020