

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

File Number: 0000113037Submit Date: 2020-05-01FRN: 0028107852Purpose: Commercial Broadcast Stations Non-Biennial Ownership ReportStatus: ReceivedStatus Date:05/01/2020Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0028107852	TWILIGHT BROADCASTING

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
113 Penny Lane	New Freedom	ΡΑ	17349	+1 (717) 877- 6087	rlowe63778@aol. com

2. Contact Representative

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Name	Organization
Scott Cinnamon	Law Offices of Scott C. Cinnamon, PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1250 Connecticut Ave. #700-144	Washington	DC	20036	+1 (202) 216- 5798	scott@cinnamonlaw. com

3. Application Filing Fee

Not Applicable

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	Transfer of control or assignment of license/permit
"As of" date	04/30/2020
	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.

/Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee	e Name		FRN	
TWILIGHT BROAD	CASTING		0028107852	
Fac. ID No.	Call Sign	City	State	Service
43879	WPHB	PHILIPSBURG	PA	AM
201316	W281CB	PHILIPSBURG	PA	FX

Section II – Non-Biennial Ownership Information

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

1.47 C.F.R.

and Other

Documents

Section 73.3613

(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.

Ownership Information		
FRN	0028107852	
Entity Name	TWILIGHT BROADCASTING	
Address	PO Box	
	Street 1	113 Penny Lane
	Street 2	
	City	New Freedom
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	17349
	Country (if non-U.S. address)	United States
Listing Type	Respondent	

Ownership Information

Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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?		Yes	

Ownership Information

FRN	9990136462			
Name	Robert Lowe			
Address	PO Box			
	Street 1	113 Penny Lane		
	Street 2			
	City	New Freedom		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	17349		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director, Stockholder			
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	100.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No	
(h) Deenendent certifies that any interacts including equity financial equating				

(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.	



(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 No duties wholly unrelated to the Licensee(s)?

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.

Certif	ication

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: President Exact Legal Title or Name of Respondent: Twilight Broadcasting, Inc. Name: Robert Lowe Phone: 7178776087 05/01/2020