Response

No



(REFERENCE COPY - Not for submission)

FRN

0021440367

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000164096
 Submit Date:
 2021-10-18
 FRN:
 0021440367

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 10/25/2021

 Filing Status:
 Active
 Status:
 Status Date:
 10/25/2021

Section I - General Information

1. Respondent

Christian Television Network of South Carolina, Inc.

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 6922	Clearwater	FL	33758	+1 (727) 535- 5622	soneal@ctntv. net

2. Contact Representative

Name	Organization		
Joseph C. Chautin III	HARDY, CAREY, CHAUTIN & BALKIN, LLP		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1080 WEST CAUSEWAY APPROACH	Mandeville	LA	70471	+1 (985) 629- 0777	jchautin@hardycarey. com

3. Application Filing Fee

Question

Is this application being submitted without a filing fee?

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
					Total	

4. Nature of Respondent

(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	10/01/2021	
	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/Permitte	FRN	FRN		
Christian Televisio	002	0021440367		
Fac. ID No.	Call Sign	City	State	Service
55203	WLCN-CD	CHARLESTON	SC	DCA

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.

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) 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.

RN	0021440367				
Entity Name	Christian Television Network of South Carolina, Inc.				
Address	PO Box	6922			
	Street 1				
	Street 2				
	City	Clearwater			
	State ("NA" if non-U.S. address)	FL			
	Zip/Postal Code	33758			
	Country (if non-U.S. address)	United States			
Listing Type	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	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	0.0%			
	Total assets (Equity Debt Plus)	0.0%			

Ownership Information

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FRN	0019245711				
Name	Jimmy Smith				
Address	PO Box				
	Street 1	PO BOX 2430			
	Street 2				
	City	CLEVELAND			
	State ("NA" if non-U.S. address)	TN			
	Zip/Postal Code	37320-2430			
	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	16.6%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an that do not appear on this re	more broadcast stations	Yes		

Ownership Information						
FRN	0019245695					
Name	Wayne Wetzel					
Address	PO Box					
	Street 1	6922 142ND AVE N.				
	Street 2					
	City	Largo				
	State ("NA" if non-U.S. address)	FL				
	Zip/Postal Code	33771				
	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	16.6%	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 c	r more broadcast stations	Yes			

Ownership Information								
FRN	0019245729	0019245729						
Name	Virginia Oliver	Virginia Oliver						
Address	PO Box	PO Box						
	Street 1	6150 101ST AVE						
	Street 2							
	City	PINNELLAS PARK						
	State ("NA" if non-U.S. address)	FL						
	Zip/Postal Code	33782						
	Country (if non-U.S. address)	United States						
Listing Type	Other Interest Holder	Other Interest Holder						
Positional Interests (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	16.6%	Jointly Held? No					
from 0.0 to 100.0)	Equity	0.0%						
	Total assets (Equity Debt Plus)	0.0%						
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report? No							

Ownership Information		
FRN	0019161231	
Name	Robert D'Andrea	
Address	PO Box 6922	
	Street 1	
	Street 2	
	City	Clearwater
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33758
	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 Persons Only)	Gender	Male	
	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 attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes

FRN	0027788355	0027788355	
Name	Phil Driscoll		
Address	PO Box		
	Street 1	856 Mason Road	
	Street 2		
	City	Monroe	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	45050	
	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 Persons Only)	Gender	Male	
	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%	

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

(b) Respondent certifies that any interests, including equity, financial, or voting

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in	No
the same market as any station for which this report is	
filed, as defined in 47 C.F.R. Section 73.3555?	
If " <u>Yes</u> ," 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.	

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.

Licensee has no parent entity.

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: President Exact Legal Title or Name of Respondent: Christian Television Network of South Carolina, Inc. Name: Robert D'Andrea Phone: 7275355622 10/18/2021