

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000169337 | Submit Date: 2021-11-17 | FRN: 0028119915

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/17/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0028119915	Carl Parmer Living Trust

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
2801 Southwood Road	Mountain Brook	AL	35223	+1 (205) 322-2987	darryl. grondines@summitmediacorp. com

2. Contact Representative

Name	Organization
Francisco R. Montero, Esq.	Fletcher Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 North 17th Street 11th Floor	Arlington	VA	22209	+1 (703) 812-0400	montero@fhhlaw.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 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/Permittee Name		FRN	
SM-K	QCH, LLC	0027762020	

Fac. ID No.	Call Sign	City	State	Service
50314	KQCH	ОМАНА	NE	FM

Licensee/Permittee Name	FRN
SM-WCYQ, LLC	0027762152

Fac. ID No.	Call Sign	City	State	Service
49923	WCYQ	OAK RIDGE	TN	FM

Licensee/Permittee Name		FRN	
	SM-WAGG, LLC	0022877096	

Fac. ID No.	Call Sign	City	State	Service
48717	WAGG	BIRMINGHAM	AL	AM

Licensee/Permittee Name	FRN	
SM-WKLR, LLC	0022877443	

Fac. ID No.	Call Sign	City	State	Service
71330	WKLR	FORT LEE	VA	FM

Licensee/Permittee Name	FRN
SM-WNOX, LLC	0027762137

Fac. ID No.	Call Sign	City	State	Service
29741	WNOX	KARNS	TN	FM

Licensee/Permittee Name		FRN	
	SM-WVEZ, LLC	0022877393	

Fac. ID No.	Call Sign	City	State	Service
53595	WVEZ	ST. MATTHEWS	KY	FM

Licensee/Permittee Name		FRN	
SM-KIN	NE, LLC	0022877377	

Fac. ID No.	Call Sign	City	State	Service
34553	KINE-FM	HONOLULU	ні	FM

Licensee/Permittee Name	FRN
LIGOTICOOM CHINICOO HAINO	1 1/1/4

SM-WRKA, LLC			0022877	385		
Fac. ID No.	Call Sign	City	Sta	ate Service		
48290	WRKA	LOUISVILLE	K	Y FM		
Licensee/Permittee Name F			FRN	FRN		
SM-KICT, LLC			0027761	0027761774		
Fac. ID No.	Call Sign	City	State	e Service		
63548	KICT-FM	WICHITA	KS	FM		
Licensee/Permittee Na	me		FRN			
SM-KPHW, LLC			0022877	351		
Fac. ID No.	Call Sign	City	Stat	e Service		
27424	KPHW	KANEOHE	Н	FM		

Fac. ID No.	Call Sign	City	State	Service
27424	KPHW	KANEOHE	НІ	FM

Lic	censee/Permittee Name	FRN
SI	M-KRTR-FM, LLC	0022877336

Fac. ID No.	Call Sign	City	State	Service	
50118	KRTR-FM	KAILUA	н	FM	

Licensee/Permittee Name	FRN
SM-KSRZ-FM, LLC	0027762012

Fac. ID No.	Call Sign	City	State	Service
50308	KSRZ	ОМАНА	NE	FM

Licensee/Permittee Name	FRN
SM-KFTI, LLC	0027761808

Fac. ID No.	Call Sign	City	State	Service
72356	KFTI	WICHITA	KS	AM

Licensee/Permittee Name	FRN
SM-KRTR-AM, LLC	0022877294

Fac. ID No.	Call Sign	City	State	Service
13880	KPRP	HONOLULU	НІ	AM

Licensee/Permittee Name	FRN
SM-WHZT, LLC	0022877286

Fac. ID No.	Call Sign	City	State	Service

5971	WHZ	WHZT WILLIAMSTON				S	С	FM		
Licensee/Permittee Nam	Licensee/Permittee Name						FRN			
SM-KKNE, LLC						0022877310				
Fac. ID No. Call Sign				City	/		State	•	Service	
14937	Kł	KNE		WA	AIPAHU		НІ		AM	
Licensee/Permittee Name						FRN				
SM-WZZK, LLC						0022	28772	203		
Fac. ID No.	Call S	Sign		City			s	tate	Servi	ce
48724	WZZI	K-FM		BIRN	MINGHAM		A	AL.	FM	
Licensee/Permittee Name						FRN				
SM-KTTS, LLC							77618	s57		
Fac. ID No.	Call S	Sian		City			S	tate	Servi	ce
62023	KTTS			SPRINGFIELD				иО	FM	
Licences/Desmittee New						EDN				
Licensee/Permittee Nam SM-KEZO-FM, LLC	1 e					FRN 0027762087				
							State Coming			
Fac. ID No. 74105		EZO-FM			City OMAHA		State NE		Service FM	
74100	IX	LZO-i ivi			OWALIA		INL		1 101	
Licensee/Permittee Nam	ne					FRN				
SM-WKHK, LLC						0022	28774	50		
Fac. ID No.	Call Sig	jn C	ity					State	Ser	/ice
319	WKHK	C	COLON	NIAL F	HEIGHTS			VA	FM	
Licensee/Permittee Nam	ne					FRN				
SM-WBHK, LLC						0022877237				
Fac. ID No.	Ca	ıll Sign		City	1		State)	Service	
65227		BHK			RRIOR		AL		FM	
Licensee/Permittee Nam	ne					FRN				
SM-KRVI, LLC							77619	23		

Licensee/Permittee Name	FRN	

MOUNT VERNON

Service

FM

State

МО

City

Call Sign

KRVI

Fac. ID No.

55165

SM-WSFR, LLC	0022877401	

Fac. ID No.	Call Sign	City	State	Service
55499	WSFR	CORYDON	IN	FM

Licensee/Permittee Name	FRN
SM-WQNU, LLC	0022877419

Fac. ID No.	Call Sign	City	State	Service
20332	WQNU	LYNDON	KY	FM

Licensee/Permittee Name	FRN
SM-KSGF-AM, LLC	0027761907

Fac. ID No.	Call Sign	City	State	Service
62024	KSGF	SPRINGFIELD	МО	AM

Licensee/Perr	nittee Name	FRN
SM-KYQQ, LL	С	0027761766

Fac. ID No.	Call Sign	City	State	Service
37121	KYQQ	ARKANSAS CITY	KS	FM

Licensee/Permittee Name	FRN
SM-KFDI, LLC	0027761824

Fac. ID No.	Call Sign	City	State	Service
72357	KFDI-FM	WICHITA	KS	FM

Licensee/Permittee Name	FRN
SM-KSGF-FM, LLC	0027761881

Fac. ID No.	Call Sign	City	State	Service
2924	KSGF-FM	ASH GROVE	МО	FM

Licensee/Permittee Name	FRN
SM-KCCN, LLC	0022877369

Fac. ID No.	Call Sign	City	State	Service
34552	KCCN-FM	HONOLULU	НІ	FM

Licensee/Permittee Name	FRN
SM-WKHT, LLC	0027762145

Fac. ID No. Call Sign City	State Service
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40854	WKHT	K	NOXVILLE		Т	ΓΝ		FM
Licensee/Permittee Name				FRI	N			
SM-WZNN, LLC				002	2287	7195		
Fac. ID No.	Call Sign	City				State		Comico
		City				State		Service
71417	WPYA		RDENDALE			AL		FM
156366	W297BF	BIR	MINGHAM			AL		FX
Licensee/Permittee Name				FRI	N			
SM-WHTI, LLC				002	2287	7435		
Fac. ID No.	Call Sign	(City		Sta	ate	S	Service
27439	WJSR		LAKESIDE		V		Т	=M
Licensee/Permittee Name				FRI	١			
SM-KKCD, LLC				002	2776	62079		
Fac. ID No.	Call Sign		City		State	е	Se	ervice
74103	KKCD		ОМАНА		NE		FI	М
Licensee/Permittee Name				FRI	FRN			
SM-WJMZ, LLC				002	2287	7278		
Fac. ID No.	Call Sign		City			State		Service
1303	WJMZ-FM		ANDERSON			SC		FM
Licensee/Permittee Name				FRI				
SM-KSPW, LLC						61873		
OW NOT W, LLO				002		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Fac. ID No.	Call Sign		City		Stat	te	Se	ervice
10119	KSPW		SPARTA		МО)	F	M
Licensee/Permittee Name				FRI	١			
SM-WWST, LLC				002	2776	62103		
Fac. ID No.	Call Sign	City				State		Service
29727	WWST		VIERVILLE			TN		FM
Licensee/Permittee Name				FRI	N			
SM-KXSP, LLC				002	2776	61956		
Fac. ID No.	Call Sign		City		State	e	Se	ervice
50313	KXSP		ОМАНА		NE		Α	M

Licensee/Permittee Name	FRN
SM-WBHJ, LLC	0022877211

Fac. ID No.	Call Sign	City	State	Service
730	WBHJ	MIDFIELD	AL	FM
150836	W222BK	BIRMINGHAM	AL	FX

Licensee/Permittee Name	FRN
SM-WBPT, LLC	0022877245

Fac. ID No.	Call Sign	City	State	Service	
5355	WBPT	HOMEWOOD	AL	FM	

Licensee/Permittee Name	FRN
SM-WURV, LLC	0022877468

Fac. ID No.	Call Sign	City	State	Service
37230	WURV	RICHMOND	VA	FM

Licensee/Permittee Name	FRN
SM-WENN, LLC	0022877252

Fac. ID No.	Call Sign	City	State	Service	
6411	WENN	BIRMINGHAM	AL	AM	

Licensee/Permittee Name	FRN
SM-KFXJ, LLC	0027761782

Fac. ID No.	Call Sign	City	State	Service
37133	KFXJ	AUGUSTA	KS	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.

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.

Ownership Information			
FRN	0028119915	0028119915	
Entity Name	Carl Parmer Living Trust	Carl Parmer Living Trust	
Address	PO Box		
	Street 1	Street 1 2801 Southwood Road	
	Street 2		
	City	Mountain Brook	
	State ("NA" if non-U.S. address)	AL	
	Zip/Postal Code	35223	
	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%	
Does interest holder have a	an attributable interest in one creport?	or more broadcast stations	No

Ownership Information		
FRN	0019404011	
Name	H. Carl Parmer	
Address	PO Box	
	Street 1	2700 Corporate Drive
	Street 2	Suite 115
	City	Birmingham

	State ("NA" if non-U.S. address)	AL	
	Zip/Postal Code	35242	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee		
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	100.0%	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 creport?	r more broadcast stations	No
• • •	nat any interests, including equi his filing are non-attributable.	ty, financial, or voting	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.

No

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 or related to each other as parentchild or as siblings?

No

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 "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.

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: Trustee Exact Legal Title or Name of Respondent: Carl Parmer Living Trust Name: Carl Parmer Phone: 2053222987 11/17/2021