

#### Federal Communications Commission (REFERENCE COPY - Not for submission)

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

 File Number:
 0000172960
 Submit Date:
 2021-11-29
 FRN:
 0003754538

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 11/30/2021

 Filing Status:
 Active
 Status
 Status Date:
 11/30/2021

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

#### 1. Respondent

# FRN Entity Name 0003754538 PACIFIC BROADCASTING GROUP, INC.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 430	Newton	NC	28658	+1 (828) 464- 4041	dave@957theride. com

#### 2. Contact Representative

Name	Organization		
Anne Goodwin Crump	Fletcher, Heald & Hildreth, P.L.C.		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street Eleventh Floor	Arlington	VA	22209	+1 (703) 812-0426	crump@fhhlaw.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	\$85.00
		·	,	1	Total	\$85.00

# 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	10/01/2021
	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
PACIFIC BROADCASTING GROUP, INC.	0003754538

Fac. ID No.	Call Sign	City	State	Service
51174	WXRC	HICKORY	NC	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	State of North Carolina		
Date of execution	08/1993		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Organizational Document		

#### **Document Information**

Description of contract or instrument	By-Laws
Parties to contract or instrument	Shareholders
Date of execution	08/1993
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Organizational Document

#### 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	0003754538			
Entity Name	PACIFIC BROADCASTING GROUP, INC.			
Address	PO Box	430		
	Street 1			
	Street 2			
	City	Newton		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28658		
	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	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		

#### Ownership Information

	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?

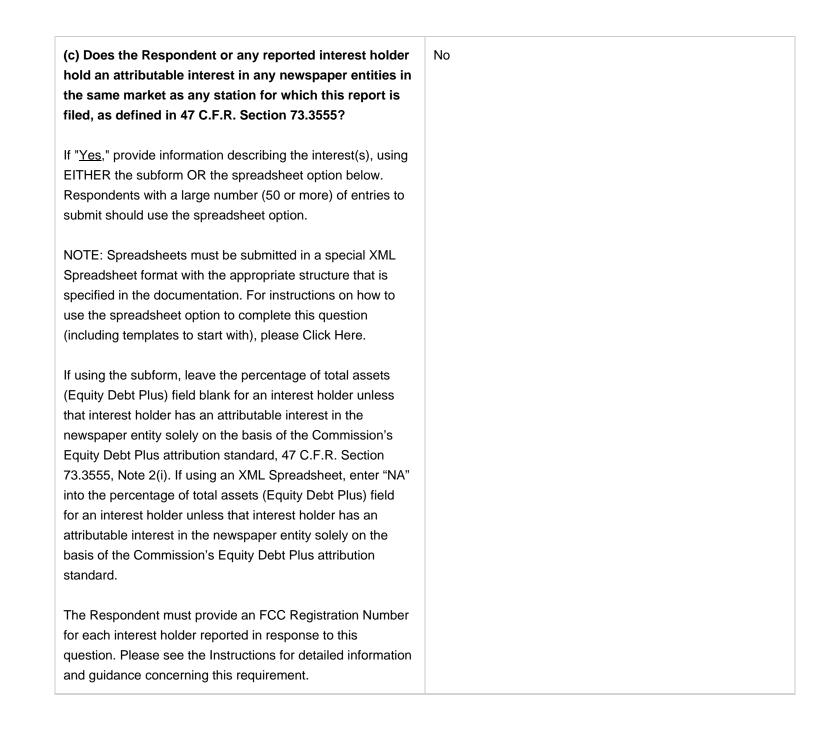
FRN	2130005297		
Name	David B. Lingafelt		
Address	PO Box		
	Street 1	1124 Willow Creek Drive	
	Street 2		
	City	Newton	
	State ("NA" if non-U.S. address)	NC	
Zip/Postal Code 28658		28658	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder		
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	50.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	50.0%	
	Total assets (Equity Debt Plus)		

## **Ownership Information**

FRN	2130005305	
Name	Janet W. Lingafelt	
Address	PO Box	
	Street 1	1124 Willow Creek Drive
	Street 2	
	City	Newton
	State ("NA" if non-U.S. address)	NC

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	Zip/Postal Code	28658	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder		
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	50.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	50.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?		Yes	
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.		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.

Family Relationships	he contraction of the contractio		
FRN	2130005297	Name	David B Lingafelt
FRN	2130005305	Name	Janet W Lingafelt
Relationship	Spouses		

#### Family Relationships

(e) Is Respondent seeking an attribution exemption for any officer or director with	No
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.

3. Orga	anizational
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.

## **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>President</b> Exact Legal Title or Name of Respondent: <b>Pacific Broadcasting Group, Inc.</b> Name: <b>David B. Lingafelt</b> Phone: <b>8284644041</b> 11/29/2021