



(REFERENCE COPY - Not for submission)

Notification of Consummation

File Number: **0000193445** | Submit Date: **06/16/2022** | Lead Call Sign: **WSM** | FRN: **0032209611**
Service: **Full Power AM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **06/21/2022** |
Filing Status: **Active**

General Information

| Section | Question | Response |
|-------------|--|----------|
| Attachments | Are attachments (other than associated schedules) being filed with this application? | No |

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---------------------|---|-------------------|-------------------|---------------------------|
| GRAND OLE OPRY, LLC | ONE GAYLORD DRIVE NASHVILLE, TN 37214 United States | +1 (615) 316-6000 | slynn@rymanhp.com | Limited Liability Company |

Contact Representatives Information (1)

| Contact Name | Address | Phone | Email | Contact Type |
|----------------------------------|--|-------------------|------------------|----------------------|
| Kathleen Kirby Wiley Rein LLP | 2050 M Street, NW WASHINGTON, DC 20036 United States | +1 (202) 719-3360 | kkirby@wiley.law | Legal Representative |

Consummation Notification Details

Details

| Date of Consummation | FRN of Licensee Post-consummation |
|----------------------|-----------------------------------|
| 2022-06-16 | 0032209611 |

Consume the Following Authorizations:

Select all the authorizations in the table below that will **not be consummated**

| Call Sign | Facility ID | File Number | Will Not Consume |
|-----------|-------------|-------------|------------------|
| WSM | 74066 | 0000189328 | |

Certification

| Section | Question | Response |
|--------------------------|---|--|
| Authorized Party to Sign | WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND /OR FORFEITURE (U.S. Code, Title 47, §503). | |
| | I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above. | Scott Lynn <i>Vice President and Secretary</i> 06/16/2022 |

Attachments

Information not provided.

