



(REFERENCE COPY - Not for submission)  
Notification of Consummation

File Number: **0000199040** | Submit Date: **08/31/2022** | Lead Call Sign: **WLHK** | FRN: **0006584247**  
Service: **Full Power FM** | Purpose: **Notification of Consummation** | Status: **Accepted** | Status Date: **09/01/2022** |  
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            |
|--|--|-------------------|--------------------|---------------------------|
| <b>Radio One of Indiana, LLC</b><br>Doing Business As: Urban One, Inc. | Sonya M. Hall-Harris<br>1010 Wayne Avenue<br>14th Floor<br>Silver Spring, MD<br>20910<br>United States | +1 (301) 266-8476 | sharris@urban1.com | Limited Liability Company |

Contact Representatives Information (2)

| Contact Name   | Address  | Phone             | Email                     | Contact Type             |
|--|--|-------------------|---------------------------|--------------------------|
| <b>Sonya Hall-Harris</b><br><i>Senior Corporate Paralegal</i><br>Urban One, Inc. | Sonya Hall-Harris<br>1010 Wayne Avenue, 14th Floor<br>Silver Spring, MD 20910<br>United States | +1 (301) 266-8476 | sharris@urban1.com        | Legal Representative     |
| <b>Greg Strickland</b><br><i>Corporate Engineer</i><br>Urban One, Inc.           | Greg Strickland<br>1010 Wayne Avenue, 14th Floor<br>Silver Spring, MD 20910<br>United States   | +1 (323) 333-2329 | gstrickland@radio-one.com | Technical Representative |

Consummation Notification Details

Details

| Date of Consummation | FRN of Licensee Post-consummation |
|----------------------|-----------------------------------|
| 2022-08-31           | 0006584247                        |

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 |
|-----------|-------------|-------------|------------------|
| WLHK      | 19522       | 0000193795  |                  |
| WIBC      | 19524       | 0000193796  |                  |
| W228CX    | 150595      | 0000193797  |                  |
| WYXB      | 51432       | 0000193798  |                  |
| W298BB    | 155816      | 0000193799  |                  |

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.  | <b>Sonya Harris</b><br><i>Senior Corporate Paralegal</i><br><br>08/31/2022 |

Attachments

Information not provided.