

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: 0000216449 | Submit Date: 2023-06-09 | FRN: 0005804406

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

06/09/2023 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0005804406	FAMILY BROADCASTING CORPORATION	

Street Address	City (and Country if non U.S. address)	State ("NA" if non- U.S. address)	Zip Code	Phone	Email
61300 Ironwood Rd	South Bend	IN	46614	+1 (574) 291-8200	chalt@familybroadcastingcorporation.

2. Contact Representative

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

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

Not Applicable

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	Transfer of control or assignment of license/permit			
"As of" date	06/07/2023			
	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.			

/Permittees(s) and Station(s) /Permit(s)

Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/Permittee Name	FRN	
FAMILY BROADCASTING CORPORATION	0005804406	

Fac. ID No.	Call Sign	City	State	Service
6335	WHPZ	BREMEN	IN	FM
37149	WHME	SOUTH BEND	IN	FM
69804	WHPD	DOWAGIAC	MI	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents Licensee/Permittee Respondents 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/Permittee Respondents should select "Not Applicable" in response to this question.

Document Information				
Description of contract or instrument	AMENDED AND RESTATED CODE OF BY-LAWS			
Parties to contract or instrument	OFFICERS AND DIRECTORS			
Date of execution	05/2007			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Entity Organization			

Document Information				
Description of contract or instrument	AMENDED AND RESTATED ARTICLES OF INCORPORATION			
Parties to contract or instrument	STATE OF INDIANA			
Date of execution	05/2007			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Entity Formation			

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) or Permittee(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) or Permittee(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	0005804406	0005804406			
Entity Name	FAMILY BROADCASTING C	FAMILY BROADCASTING CORPORATION			
Address	PO Box				
	Street 1	61300 Ironwood Rd			
	Street 2				
	City	South Bend			
State ("NA" if non-laddress)		IN			
	Zip/Postal Code	46614			
	Country (if non-U.S. United States address)				
Listing Type	Respondent				
Positional Interests (check all that apply)	Respondent				
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0) Total assets (Equity Debt 0.0% Plus)		0.0%			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?					

Ownership Information			
FRN	0027151786		
Name	Andrew Sumrall		
Address	РО Вох		
	Street 1	61300 IRONWOOD ROAD	
	Street 2		
	City	SOUTH BEND	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46614	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3% Jointly Held?	
	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?		Yes	

Ownership Information			
FRN	0019221696		
Name	Angela Grabowski		
Address	PO Box		
	Street 1	61300 IRONWOOD ROAD	
	Street 2		
	City	SOUTH BEND	
	State ("NA" if non-U.S. address)	IN	
Zip/Postal Code 46614			
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values	Voting	33.3%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one creport?	or more broadcast stations	Yes

Ownership Information			
FRN	0033876962		
Name	Adam Sumrall		
Address	PO Box Street 1 61300 IRONWOOD ROAD Street 2 City SOUTH BEND State ("NA" if non-U.S. address)		
	Zip/Postal Code	46614	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		

Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes
	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) 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?

If "Yes," provide the following information for each such the relationship.

Family Relationships			
FRN	0027151786	Name	Andrew Sumrall
FRN	0033876962	Name	Adam Sumrall
Relationship	Siblings		

Family Relationships			
FRN	0033876962	Name	Adam Sumrall
FRN	0019221696	Name	Angela Grabowski
Relationship	Siblings		

Family Relationships			
FRN	0027151786	Name	Andrew Sumrall
FRN	0019221696	Name	Angela Grabowski
Relationship	Siblings		

(d) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

No

Yes

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: President Exact Legal Title or Name of Respondent: Family Broadcasting Corporation Name: Andrew Sumrall Phone: 5742918200 06/09/2023