

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000222409 | Submit Date: 2023-10-10 | FRN: 0027047661

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 10/10/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0027047661	Hope Broadcasting, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 216	Dalton	GA	30722- 0216	+1 (706) 673- 2222	Deborah@wttiradio.

2. Contact Representative

Name	Organization
Deborah Boyd	Hope Broadcasting, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 216	Dalton	GA	30722	+1 (706) 673-2222	deborah@wttiradio.com

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respond	ent:
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	For-profit corporation

(b) Provide the following information about this report:		
Purpose	Biennial	
"As of" date	10/01/2023	
	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.	

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN	
Hope Broadcasting, Inc.	0027047661	

Fac. ID No.	Call Sign	City	State	Service
53957	WTTI	DALTON	GA	AM
152240	W227DG	DALTON	GA	FX

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	0027047661	0027047661	
Entity Name	Hope Broadcasting, Inc.	Hope Broadcasting, Inc.	
Address	РО Вох	216	
	Street 1		
	Street 2		
	City	Dalton	
	State ("NA" if non-U.S. address)	GA	
	Zip/Postal Code	30722-0216	
	Country (if non-U.S. address)	United States	

Listing Type	Respondent				
Positional Interests (check all that apply)	Respondent	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 Total a: Plus)	Equity	0.0%			
	Total assets (Equity Debt Plus)	t 0.0%			
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	No		

Ownership Information				
FRN	2130023621	2130023621		
Name	Deborah Boyd	Deborah Boyd		
Address	PO Box			
	Street 1	1304 Old Ringgold Rd		
	Street 2			
	City	Ringgold	Ringgold	
	State ("NA" if non-U.S. address)	GA		
	Zip/Postal Code	30736-0216	30736-0216	
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Officer, 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	51.0%	Jointly Held? Yes	
from 0.0 to 100.0)	Equity	51.0%		
	Total assets (Equity Debt Plus)	51.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?				

Ownership Information	
FRN	2130023639

Name	James H. Boyd, Jr.			
Address	PO Box			
	Street 1	1304 Old Ringgold Rd		
	Street 2			
	City	Ringgold		
	State ("NA" if non-U.S. address)	GA		
	Zip/Postal Code	30736		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Officer, Stockholder			
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US		
	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	39.0%	Jointly Held? Yes	
	Equity	39.0%		
	Total assets (Equity Debt Plus)	39.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No	
(b) Respondent certifies that interests, not reported in thin If "No," submit as an exhibit and an exhibit an exhibit and an exhibit an exhibit and an exhibit an exhibit an exhibit and an exhibit an exhibit and exhibit an exhibit and exhibit an exhibit and exhibit and exhibit an exhibit and exhibit an exhibit an exhibit an exhibit an exhibit an exhibit and exhibit and exhibit an exhibit an exhibit and exhibit an exhibit and exhibit an exhibit an exhibit an exhibit and exhibit an exhibit and exh	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?

Yes

If " $\underline{\text{Yes}}$," provide the following information for each such the relationship.

Family Relationships					
FRN	2130023621	Name	Deborah Boyd		
FRN	2130023639	Name	James H Boyd , Jr .		
Relationship	Spouses				

(d) Is Respondent seeking an attribution exemption for any officer or director with
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.

No

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: Pres Exact Legal Title or Name of Respondent: Deborah Boyd Name: Deborah Boyd Phone: 7066732222