

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000226099** Submit Date: **2023-11-14** FRN: **0006292023**

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/14/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0006292023	Auburn Broadcasting, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3568 Lenox Road	Geneva	NY	14456	+1 (315) 781- 7000	abishop@flradiogroup.

2. Contact Representative

Name	Organization		
Reid Avett	Womble Bond Dickinson (US) LLP		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2001 K Street, NW Suite 400	Washington	DC	20006	+1 (202) 857- 4425	Reid.Avett@wbd-us.

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	2	95	\$190.00
				Total	\$190.00

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	10/01/2023	
	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	
Auburn Broadcasting, Inc.	0006292023	

Fac. ID No.	Call Sign	City	State	Service
5392	WFLK	SENECA FALLS	NY	FM
43791	WAUB	AUBURN	NY	AM
85677	W251AJ	MELROSE PARK	NY	FX
141061	W240DO	GENEVA	NY	FX
202115	W242DC	AUBURN	NY	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.

Document Information		
Description of contract or instrument	Articles and By-Laws	
Parties to contract or instrument	State of New York	
Date of execution	12/1995	

Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Articles and By-Laws

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	0006292023		
Entity Name	Auburn Broadcasting, Inc.		
Address	РО Вох		
	Street 1	3568 Lenox Road	
	Street 2		
	City	Geneva	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14456	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (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 from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt	0.0%	

Ownership Information				
FRN	0009610536	0009610536		
Name	Alan Bishop			
Address	РО Вох			
	Street 1	4786 County Road 11		
	Street 2			
	City	Rushville		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	14544		
	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 from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No	
	Equity	100.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	Yes	

Ownership Information		
FRN	0019418615	
Name	Lisa Bishop	
Address	PO Box	
	Street 1	4786 County Road 11
	Street 2	
	City	Rushville
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14544
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

Positional Interests (check all that apply)	Officer		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	us	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	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
	nat 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	0009610536	Name	Alan Bishop
FRN	0019418615	Name	Lisa Bishop
Relationship	Spouses		

(d) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
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. Organizational 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.

No parent or subsidiaries

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: President Exact Legal Title or Name of Respondent: Auburn Broadcasting, Inc. Name: Alan Bishop Phone: 3157817000