



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000228883** | Submit Date: **2023-11-29** | FRN: **0032920506**

Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **12/01/2023**

Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0032920506	Southern Belle Media Family, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
115 West Main Street	Frankfort	KY	40601	+1 (502) 875-1130	kristin.cantrell@gmail.com

2. Contact Representative

Name	Organization
Nancy A. Ory	Lerman Senter PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2001 L Street, NW Suite 400	Washington	DC	20036	+1 (202) 429-8970	nory@lermansenter.com

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	34	95	\$3,230.00
				Total	\$3,230.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
Nature of Respondent	Limited liability company

(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
Southern Belle Media Family, LLC	0032920506

Fac. ID No.	Call Sign	City	State	Service
1057	WFGE	STATE COLLEGE	PA	FM
3956	WBUS	CENTRE HALL	PA	FM
6025	WZWW	BOALSBURG	PA	FM
12918	WRQI	SAEGERTOWN	PA	FM
15327	WNTJ	JOHNSTOWN	PA	AM
15328	WKYE	JOHNSTOWN	PA	FM
21421	WGYI	OIL CITY	PA	FM
24940	WGY Y	MEADVILLE	PA	FM
24942	WMGW	MEADVILLE	PA	AM
24997	WKST	NEW CASTLE	PA	AM
36874	WLBR	LEBANON	PA	AM
36878	WVY	LEBANON	PA	FM
38265	WFGY	ALTOONA	PA	FM
38269	WFBG	ALTOONA	PA	AM
47089	WTNA	ALTOONA	PA	AM
47090	WALY	ALTOONA	PA	FM

48923	WLEJ	STATE COLLEGE	PA	AM
48926	WOWY	STATE COLLEGE	PA	FM
49026	WOWQ	CENTRAL CITY	PA	FM
49777	WFRA	FRANKLIN	PA	AM
49789	WHMJ	FRANKLIN	PA	FM
56363	WLKH	SOMERSET	PA	FM
56364	WGGI	SOMERSET	PA	AM
58312	WQWY	BELLWOOD	PA	FM
64845	WRKW	EBENSBURG	PA	FM
64848	WJHT	JOHNSTOWN	PA	FM
64849	WBHV	STATE COLLEGE	PA	AM
71246	WUZZ	NEW CASTLE	PA	AM
72316	WRKY-FM	HOLLIDAYSBURG	PA	FM
72965	WFGI-FM	JOHNSTOWN	PA	FM
74089	WTIV	TITUSVILLE	PA	AM
74469	WYLE	GROVE CITY	PA	FM
76254	WXMJ	CAMBRIDGE SPRINGS	PA	FM
88380	WRQW	COOPERSTOWN	PA	FM

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	Certificate of Formation
Parties to contract or instrument	Southern Belle Media Family, LLC
Date of execution	09/2022
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Certificate of Formation

Document Information	
Description of contract or instrument	Judith Marie Confer Irrevocable Trust
Parties to contract or instrument	Kerby E. Confer, Trustee
Date of execution	07/1999

Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Trust Agreement

Document Information	
Description of contract or instrument	Kerby Eugene Confer Irrevocable Trust
Parties to contract or instrument	Judith Marie Confer and Kristin Confer Cantrell, Trustees
Date of execution	09/2008
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Trust Agreement

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	0032920506	
Entity Name	Southern Belle Media Family, LLC	
Address	PO Box	
	Street 1	115 West Main Street
	Street 2	
	City	Frankfort
	State ("NA" if non-U.S. address)	KY
	Zip/Postal Code	40601
	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 Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information

FRN	0019874494		
Entity Name	Judith Marie Confer Irrevocable Trust		
Address	PO Box		
	Street 1	2105 Bud Court	
	Street 2		
	City	Ft. Mill	
	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29715	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
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	45.0%	Jointly Held? No
	Equity	45.0%	
	Total assets (Equity Debt Plus)	45.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information

FRN	0024218109		
Entity Name	Kerby Eugene Confer Irrevocable Trust		
Address	PO Box		
	Street 1	2105 Bud Court	
	Street 2		
	City	Ft. Mill	

	State ("NA" if non-U.S. address)	SC	
	Zip/Postal Code	29715	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
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	55.0%	Jointly Held? No
	Equity	55.0%	
	Total assets (Equity Debt Plus)	55.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(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.	No
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(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
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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.

File Name	Uploaded By	Attachment Type	Description
Southern Belle Media Family, LLC Organizational Chart.pdf	Applicant	Ownership Chart	SBMF Organizational Chart

Section III - Certification

Certification

Section	Question	Response
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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 LICENSE --OR 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/Manager Exact Legal Title or Name of Respondent: Southern Belle Media Family, LLC Name: Kristin C. Cantrell Phone: 5708987450 11/29/2023