



(REFERENCE COPY - Not for submission)

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

File Number: 0000239678 | Submit Date: 2024-02-22 | FRN: 0002012003

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

02/22/2024 | Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0002012003		WKLC, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
401 West Main St.	Lexington	KY	40507	+1 (859) 233-1515	lmartin@lmcomm.com

2. Contact Representative

Name		Organization			
Sally A. Buckman		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	sbuckman@lermansenter.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	For-profit corporation

(b) Provide the following information about this report:	
Purpose	Transfer of control or assignment of license/permit
"As of" date	02/02/2024 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) /Permittees(s)

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

and Station(s)
/Permit(s)

Licensee/Permittee Name	FRN
WKLC, Inc.	0002012003

Fac. ID No.	Call Sign	City	State	Service
12076	WSCW	SOUTH CHARLESTON	WV	AM
12077	WMXE	SOUTH CHARLESTON	WV	FM
54371	WMON	MONTGOMERY	WV	AM
73175	WKLC-FM	ST. ALBANS	WV	FM
73176	WJYP	ST. ALBANS	WV	AM
142178	W272DW	SOUTH CHARLESTON	WV	FX
201133	W252DT	MONTGOMERY	WV	FX
201135	W288DP	ST. ALBANS	WV	FX

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	ARTICLES OF INCORPORATION
Parties to contract or instrument	WEST VIRGINIA
Date of execution	08/1979
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: ARTICLES OF INCORPORATION

Document Information	
Description of contract or instrument	BYLAWS
Parties to contract or instrument	WKLC, INC.
Date of execution	08/1979
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: BYLAWS

Document Information	
Description of contract or instrument	Agreement and Plan of Reorganization
Parties to contract or instrument	L.M. Communications Television, LLC; L.M. Communications, Inc.; L.M. Communications of Kentucky, LLC; WKLC, Inc.; L.M. Communications of South Carolina, Inc.; Lynn M. Martin

Date of execution	12/2023
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Agreement and Plan of Reorganization

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	0002012003		
Entity Name	WKLC, Inc.		
Address	PO Box		
	Street 1	401 West Main St.	
	Street 2		
	City	Lexington	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40507	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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

FRN	0021860648		
Entity Name	L.M. Communications Television LLC		
Address	PO Box		
	Street 1	401 West Main St.	
	Street 2	Suite 301	
	City	Lexington	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40507	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	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	0007276918		
Name	Lynn M. Martin		
Address	PO Box		
	Street 1	401 West Main St.	
	Street 2	Suite 301	
	City	Lexington	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40507	
	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	0.0%	Jointly Held? No
	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

(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 " <u>Yes</u> ," 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 " <u>Yes</u> ," 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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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 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 Exact Legal Title or Name of Respondent: WKLC, Inc. Name: Lynn M. Martin Phone: 8592331515 02/22/2024