

## Federal Communications Commission (REFERENCE COPY - Not for submission)

## **Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)**

File Number: 0000173495 Submit Date: 2021-11-30 FRN: 0007706435 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/30/2021 Filing Status: Active

## **Section I - General Information**

## 1. Respondent

FRN	Entity Name
0007706435	D.J. BROADCASTING INC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
200 Frazier Rd.	Altavista	VA	24517	+1 (434) 369- 5588	elizabeth@kdcountry. com

## 2. Contact Representative

Name	Organization
Elizabeth C. Hoehne	DJ Broadcasting, Inc

Street	City (and Country if non U.S.		Zip		
Address	address)	State	Code	Phone	Email
200 Frazier Rd.	Altavista	VA	24517	+1 (434) 369- 5588	elizabeth@kdcountry. com

## 3. Application **Filing Fee**

Question	Response
Is this application being submitted without a filing fee?	Yes
If this application is being submitted without a filing fee, Indicate reason for fee exemption.	Fee-Exempt Report

## 4. Nature of Respondent

	(a) Provide the following information about the Respondent:		
Relationship to stations/permits Licensee		Licensee	
	Nature of Respondent	For-profit corporation	

(b) Provide the following information about this report:

Purpose	Validation and resubmission of a previously filed biennial report (certifying no changes from the previously filed biennial report) 0000100558
"As of" date	10/01/2021
	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	
D.J. BROADCASTING INC		0007706435	0007706435	
Fac. ID No.	Call Sign	City	State	Service
21414	WKDE-FM	ALTAVISTA	VA	FM
21415	WGVY	ALTAVISTA	VA	АМ
200986	W271DB	LYNCHBURG	VA	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	0007706435		
Entity Name	D.J. BROADCASTING INC		
Address	PO Box		
	Street 1	200 Frazier Rd.	
	Street 2		
	City	Altavista	
	State ("NA" if non-U.S. address)	VA	
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Ownership Information

	Zip/Postal Code	24517		
	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	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	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations	No	

Ownership Information				
FRN	0020019741	0020019741		
Name	David P. Hoehne	David P. Hoehne		
Address	PO Box	PO Box		
	Street 1	110 Shady Oak Ln		
	Street 2			
	City	Forest		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	24551		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
<b>Positional Interests</b> (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	Voting	48.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	48.0%		
	Total assets (Equity Debt Plus)	48.0%		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

Ownership Information				
FRN	0020019782	0020019782		
Name	Elizabeth C. Hoehne	Elizabeth C. Hoehne		
Address	PO Box	PO Box		
	Street 1	110 Shady Oak Ln		
	Street 2			
	City	Forest		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	24551		
	Country (if non-U.S. United States   address) United States			
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Officer, Director, 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	48.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	48.0%		
	Total assets (Equity Debt Plus)	48.0%		
Does interest holder have a that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No	

Ownership Information				
FRN	0020019840			
Name	Jonathan D. Hoehne			
Address	PO Box			
	Street 17647 Trica Avenue NEStreet 2FremertonCityBremertonState ("NA" if non-U.S. address)WA			
	Zip/Postal Code	98311		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			

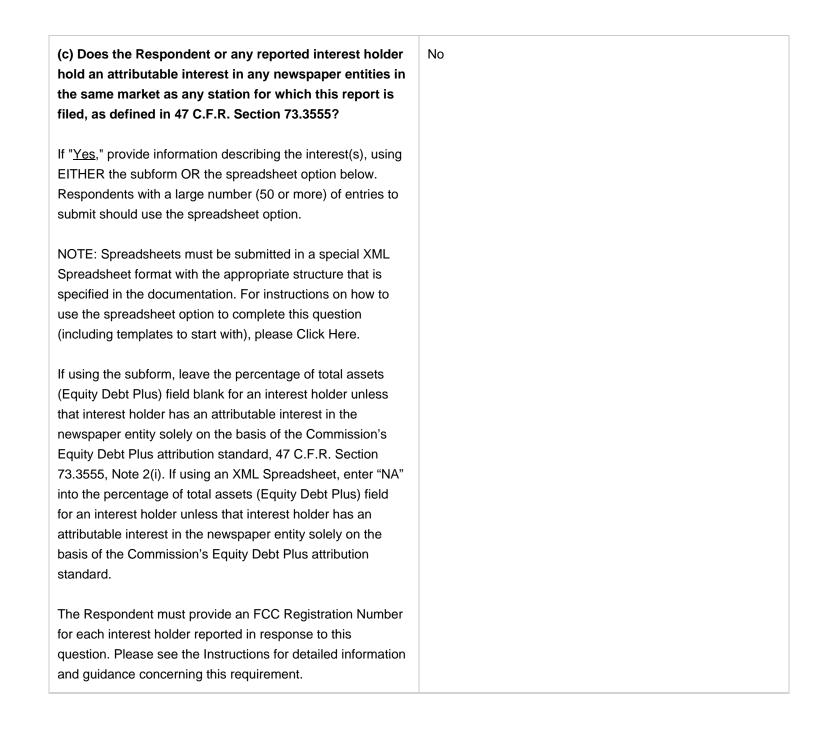
Positional Interests (check all that apply)	Officer, Director, Stockholder			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	4.0% Jointly Held? No		
from 0.0 to 100.0)	Equity	4.0%		
	Total assets (Equity Debt Plus)	4.0%		
Does interest holder have	an attributable interest in one o	r more broadcast stations	No	

that do not appear on this report?

Ownership Information				
FRN	0020022307	0020022307		
Name	Kyle M. Hoehne			
Address	PO Box	ox		
	Street 1	609 Indian Ridge Rd, Apt 3		
	Street 2			
	City	Lynchburg		
	State ("NA" if non-U.S. VA address)			
	Zip/Postal Code	24502		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Officer, Director	Officer, Director		
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	Voting	0.0% Jointly Held? No		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have	an attributable interest in one c	r more broadcast stations	No	

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

FRN	0023195258	0023195258		
Name	Eleanor L. Hoehne	Eleanor L. Hoehne		
Address	PO Box			
	Street 1	218 Longview Rd.		
	Street 2			
	City	Hurt		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	24563		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
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	0.0% Jointly Held? No		
from 0.0 to 100.0)	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	
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.If "No," submit as an exhibit an explanation.				



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

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

Family Relationships				
FRN	0020019782	Name	Elizabeth C Hoehne	
FRN	0020022307	Name	Kyle M Hoehne	
Relationship	Parent/Child			

## Family Relationships

#### Family Relationships

FRN	0020019741	Name	David P Hoehne
FRN	0020019782	Name	Elizabeth C Hoehne
Relationship	Spouses		

#### **Family Relationships**

FRN	0020019741	Name	David P Hoehne
FRN	0020019840	Name	Jonathan D Hoehne
Relationship	Parent/Child		

Family Relationships				
FRN	0020019782	Name	Elizabeth C Hoehne	
FRN	0020019840	Name	Jonathan D Hoehne	
Relationship	Parent/Child			

#### **Family Relationships**

FRN	0020019741	Name	David P Hoehne
FRN	0020022307	Name	Kyle M Hoehne
Relationship	Parent/Child		

## Family Relationships

FRN	0020019840	Name	Jonathan D Hoehne
FRN	0020022307	Name	Kyle M Hoehne
Relationship	Siblings		

#### **Family Relationships**

FRN	0020019840	Name	Jonathan D Hoehne
FRN	0023195258	Name	Eleanor L Hoehne
Relationship	Siblings		

## **Family Relationships**

FRN	0020019741	Name	David P Hoehne
FRN	0023195258	Name	Eleanor L Hoehne
Relationship	Parent/Child		

## **Family Relationships**

FRN	0020019782	Name	Elizabeth C Hoehne
FRN	0023195258	Name	Eleanor L Hoehne
Relationship	Parent/Child		

### **Family Relationships**

FRN	0020022307	Name	Kyle M Hoehne	
FRN	0023195258	Name	Eleanor L Hoehne	
Relationship	Siblings			

(e) 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.

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
2021 Ownership Data.pdf	Applicant	Ownership Chart	

## **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: <b>President</b> Exact Legal Title or Name of Respondent: <b>D.J.</b> <b>Broadcasting, Inc.</b> Name: <b>Elizabeth Clancy Hoehne</b> Phone: <b>4343695588</b> 11/30/2021