Approved by OMB (Office of Management and Budget) 3060-0010
September 2019

Federal Communications Commission

(REFERENCE COPY - Not for submission)

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

File Number: **0000212674** | Submit Date: **2023-03-17** | FRN: **0032920506**

Purpose: **Commercial Broadcast Stations Non-Biennial Ownership Report** | Status: **Received** | Status Date: **03/17/2023** | Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0019874494	Judith Marie Confer Irrevocable Trust

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2015 Bud Ct.	Ft. Mill	SC	29715	+1 (443) 562-3949	KERBIFER@AOL.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) 416-6791	NORY@LERMANSENTER.COM

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respondent:	
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	Other Respondent is a trust.

(b) Provide the following information about this report:	
Purpose	Transfer of control or assignment of license/permit
"As of" date	01/01/2023 **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) /Permittees(s) and Station(s) /Permit(s)

Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(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	WGYY	MEADVILLE	PA	FM
24942	WMGW	MEADVILLE	PA	AM
24997	WUZZ	NEW CASTLE	PA	AM
36874	WLBR	LEBANON	PA	AM
36878	WFVY	LEBANON	PA	FM
38265	WFGY	ALTOONA	PA	FM
38269	WFBG	ALTOONA	PA	AM
47089	WTNA	ALTOONA	PA	AM
47090	WWOT	ALTOONA	PA	FM
48923	WLEJ	STATE COLLEGE	PA	AM
48926	WOWY	STATE COLLEGE	PA	FM
49026	WCCL	CENTRAL CITY	PA	FM
49777	WFRA	FRANKLIN	PA	AM
49789	WHMJ	FRANKLIN	PA	FM
56363	WLKH	SOMERSET	PA	FM
56364	WNTI	SOMERSET	PA	AM
58312	WALY	BELLWOOD	PA	FM
64845	WRKW	EBENSBURG	PA	FM
64846	W230BK	JOHNSTOWN	PA	FX
64848	WJHT	JOHNSTOWN	PA	FM
64849	WRSC	STATE COLLEGE	PA	AM
71246	WKST	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
201149	W251CL	FRANKLIN	PA	FX
201206	W264DK	MEADVILLE	PA	FX
201226	W278CR	SOMERSET	PA	FX
201233	W283CX	JOHNSTOWN	PA	FX
201293	W279DK	STATE COLLEGE	PA	FX
201301	W287DC	TITUSVILLE	PA	FX
202431	W248DJ	NEW CASTLE	PA	FX
202432	W250CW	NEW CASTLE	PA	FX
202433	W227DV	STATE COLLEGE	PA	FX
202434	W259DG	ALTOONA	PA	FX
202435	W283DI	ALTOONA	PA	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.

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) 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	0019874494	
Entity Name	Judith Marie Confer Irrevocable Trust	
Address	**PO Box**	

	Street 1	2015 Bud Ct.	
	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	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?			Yes

Ownership Information			
FRN	0019231745		
Name	Kerby E. Confer		
Address	**PO Box**		
	Street 1	2105 Bud Ct.	
	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)	Other - Trustee		
Interest Percentages (enter percentage values from 0.0 to 100.0)	**Voting**	100.0%	**Jointly Held?** No
	Total assets (Equity Debt Plus)	100.0%	
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

(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

(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 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: **Trustee** Exact Legal Title or Name of Respondent: **Judith Marie Confer Irrevocable Trust** Name: **Kerby Confer** Phone: **4435623949** 03/17/2023