

Federal Communications Commission (REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000173778Submit Date:2021-11-30FRN:0027313154Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:11/30/2021Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name
0027313154	CCM TV, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
P.O. Box 6847	Greenville	SC	29606	+1 (864) 630- 6826	chmickel@ctstllc. com

2. Contact Representative

Name	Organization
Dan Kirkpatrick	Baker & Hostetler LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1050 Connecticut Avenue, NW Suite 1100	Washington	DC	20036	+1 (202) 861- 1758	dkirkpatrick@bakerlaw. 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	Limited liability company	

(b) Provide the following information about this report:

Purpose	Biennial
"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			RN	
WBHQ Columbia, LLC			0011411618	
Fac. ID No.	Call Sign	City	State	Service
40902	WKTC	SUMTER	SC	DTV

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	contracts and other instruments report. In addition, attributable L disclosed by the licensee of the attributable JSA, or a network a Respondents, as well as Licens	set forth in 47 C.F.R. Section 73 ocal Marketing Agreements (LM brokering station on its ownersh ffiliation agreement, check the ap	full power television, AM, and/or FM stations should list all 3.3613(a) through (c) for the facility or facilities listed on this (As) and attributable Joint Sales Agreements (JSAs) must be ip report. If the agreement is an attributable LMA, an opropriate box. Otherwise, select "Other." Non-Licensee authorizations for Class A television and/or low power television tion.	
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	0027313154		
	Entity Name CCM TV, LLC			
	Address	PO Box		
		Street 1	P.O. Box 6847	
		Street 2		
		City	Greenville	

State ("NA" if non-U.S.

address)

address)

Respondent

Listing Type

Zip/Postal Code

Country (if non-U.S.

SC

29606

United States

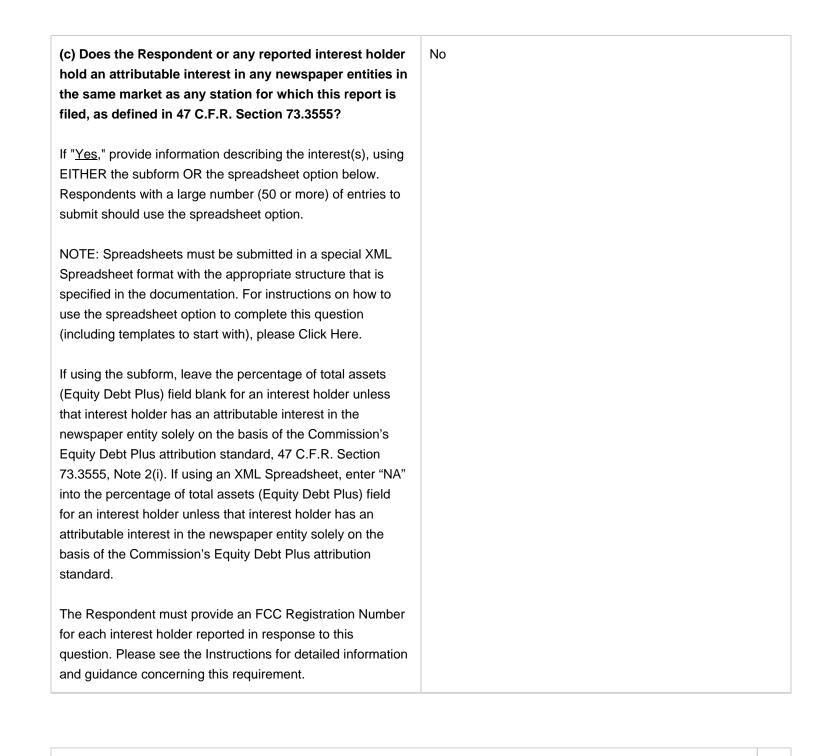
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	or more broadcast stations	No

Ownership Information

FRN	0031651458			
Name	Charles C. Mickel			
Address	PO Box	6847		
-	Street 1			
-	Street 2			
-	City	Greenville		
-	State ("NA" if non-U.S. address)	SC		
-	Zip/Postal Code	29606		
-	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
-	Race	White		
nterest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No	
rom 0.0 to 100.0)	Equity	100.0%		
-	Total assets (Equity Debt Plus)			
Does interest holder have an hat do not appear on this rep		r more broadcast stations	No	
	port?		Yes	

interests, 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 No or related to each other as parentchild or as siblings?

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

(e) Is Respondent seeking an attribution exemption for any officer or director withNoduties 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.

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: Manager and Sole Member Exact Legal Title or Name of Respondent: CCM, LLC Name: Charles C Mickel Phone: 8646306826 11/30/2021