

FRN

Not Applicable

## **Noncommercial Broadcast Stations Biennial** Ownership Report (FCC Form 323-E)

File Number: 0000174208 Submit Date: 2021-11-30 FRN: 0009381658 Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status Date: 11/30/2021 Status: Received Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

#### **Entity Name**

0009381658	8	Hyde County E	Board of Education			
Street Address	City (and Count address)	ry if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 217	Swan Quarter		NC	27885	+1 (252) 926- 7201	sbasnight@hyde. k12.nc.us

# 2. Contact

Representative	

Name	Organization
Anne Goodwin Crump	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street 11th Floor	Arlington	VA	22209	+1 (703) 810-0400	crump@fhhlaw.com

#### 3. Application Filing Fee

# 4. Control of

Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Is the Respondent's governing boa indirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No

(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.

and Station(s)

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

Licensee/Permittee	icensee/Permittee Name FRN				
Hyde County Board	Hyde County Board of Education 0009381658				
Fac. ID No.	Call Sign	City		State	Service
28177	WHYC	SWAN QUARTER		NC	FM

#### Section II – Biennial Ownership Information

#### 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Not Applicable.

#### 2. Ownership Interests

1.47 C.F.R.

**Documents** 

Section 73.3613

(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, members of the governing board (or other governing entity), stockholders, 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	0009381658		
Entity Name	Hyde County Board of Education		
Address	PO Box	217	
	Street 1		
	Street 2		
	City	Swan Quarter	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27885	
	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	Voting	0.0%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	No

Ownership Information				
FRN	9990123776			
Name	Thomas Whitaker			
Address	PO Box			
	Street 1	791 Canal Street		
	Street 2			
	City	Fairfield		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	27826		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retired			
By Whom Appointed or Elected	Voter elected			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages (enter percentage values	Voting	20.0%		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information		
FRN	9990123781	
Name	Aleta Cox	

Address	PO Box	4		
	Street 1			
	Street 2			
	City	Engelhard		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	27824		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retired			
By Whom Appointed or Elected	Voter elected	Voter elected		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

**Ownership Information** FRN 9990123789 Randy Etheridge Name Address PO Box 593 Street 1 Street 2 City Engelhard State ("NA" if non-U.S. NC address) Zip/Postal Code 27824 Country (if non-U.S. United States address) Listing Type Other Interest Holder

that do not appear on this report?

Officer, Member of Governing Board (or other governing entity)		
Co-owner, Etheridge Oil and Gas		
Voter elected		
Citizenship, Gender,CitizenshipUSEthnicity, and Race		
Gender	Male	
Ethnicity	Not Hispanic or Latino	
Race	White	
Voting	20.0%	
Equity	0.0%	
Total assets (Equity Debt Plus)		
	Co-owner, Etheridge Oil and Constraints of Constrai	

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

No

### **Ownership Information**

FRN	9990123797		
Name	Angela Todd		
Address	<b>PO Box</b> 1394		
	Street 1		
	Street 2		
	City	Ocracoke	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27960	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Owner, Angie's Gym		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	<b>Voting</b> 20.0%		
	Race	White	

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder ha	ve an attributable interest in one o	more broadcast stations	No

that do not appear on this report?

Ownership Information			
FRN	9990140873	9990140873	
Name	Lindsey Mooney		
Address	PO Box		
	Street 1	Canal Street	
	Street 2		
	City	Fairfield	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27826	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Farm Owner		
By Whom Appointed or Elected	Voter elected		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information		
FRN	9990140875	
Name	Stephen Basnight, III.	
Address	<b>PO Box</b> 217	
	Street 1	

	Street 2		
	City	Swan Quarter	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	27885	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer	Officer	
Principal Profession or Occupation	School Superintendant		
By Whom Appointed or Elected	Hyde County Board of Education		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	ity Debt 0.0%	
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No
	at any interests, including equi nis filing are non-attributable. an explanation.	ty, financial, or voting	Yes
duties wholly unrelated to	an attribution exemption for an the Licensee(s)? ation in the required fields and su esponsibilities, and explaining why	bmit an Exhibit fully describing	No

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.

Licensee has no parent entity.

#### 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>Superintendent</b> Exact Legal Title or Name of Respondent: <b>Hyde County Board of Education</b> Name: <b>Stephen Basnight , III.</b> Phone: <b>2529267201</b> 11/30/2021