

(REFERENCE COPY - Not for submission)

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

File Number: 0000163630 | Submit Date: 2021-10-13 | FRN: 0007154172

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 10/25/2021

Filing Status: Active

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

#### 1. Respondent

FRN	Entity Name	
0007154172	Radio for the Blind and Handicapped, Inc.	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3606 MAGAZINE ST.	New Orleans	LA	70115	+1 (504) 899- 1144	npgonz@aol.

## 2. Contact Representative

Name	Organization
Mark A. Balkin	HARDY, CAREY, CHAUTIN & BALKIN, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1080 WEST CAUSEWAY APPROACH	Mandeville	LA	70471	+1 (985) 629- 0777	mbalkin@hardycarey.

## 3. Application Filing Fee

Not Applicable

## 4. Control of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Is the Respondent's governing boaindirectly under the control of ano	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.

## 5. Licensee(s) and Station(s)

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

Licensee/Per	mittee Name	FRN
Radio for the	Blind and Handicapped, Inc.	0007154172

Fac. ID No.	Call Sign	City	State	Service	
54575	WRBH	NEW ORLEANS	LA	FM	

#### **Section II – Biennial Ownership Information**

#### 1. 47 C.F.R. Section 73.3613 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. 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.

Document Information		
Description of contract or instrument	Restated Articles of Incorporation	
Parties to contract or instrument	Licensee	
Date of execution	10/1997	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Entity Formation	

## 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, 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	0007154172	
Entity Name	Radio for the Blind and Handicapped, Inc.	
Address	РО Вох	
	Street 1	3606 MAGAZINE ST.
	Street 2	

	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70115	
	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	Voting	0.0%	
(enter percentage values 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 o	r more broadcast stations No	

Ownership Information		
FRN	9990117535	
Name	Don Banning	
Address	PO Box	
	Street 1	663 Grove Ave.
	Street 2	
	City	Harahan
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	70123
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Director	
Principal Profession or Occupation	Retired Special Ed Teacher	
By Whom Appointed or Elected	Board of Directors	
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 from 0.0 to 100.0)	Voting	6.2%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information			
FRN	9990117536		
Name	Sherman Boughton		
Address	РО Вох		
	Street 1	900 State St.	
	Street 2		
	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70118	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Director & President		
Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	Board of Directors	Board of Directors	
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	6.2%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990117538	
Name	Lloyd Campo	
Address	PO Box	

	Street 1	4910 Magazine St.	
	Street 2		
	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70115	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Director		
Principal Profession or Occupation	Retired Attorney		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	6.2%	
(enter percentage values 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 that do not appear on this report?			

Ownership Information			
FRN	9990117540		
Name	Sam Ford		
Address	PO Box		
	Street 1	304 Lowerline St.	
	Street 2		
	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70118	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Director & Treasurer		

Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	6.2%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
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	9990117542		
Name	Angela Hill		
Address	РО Вох		
	Street 1	600 Port of New Orleans Pl. Unit 7B	
	Street 2		
	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70130	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Director		
Principal Profession or Occupation	Retired Newscaster		
By Whom Appointed or Elected	Board of Directors	Board of Directors	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	6.2%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information			
FRN	9990117544		
Name	Donald Lewis		
Address	PO Box		
	Street 1	1219 Gov. Nicholls St. #B	
	Street 2		
	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70116	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Director		
Principal Profession or Occupation	Gifted Arts Teacher		
By Whom Appointed or Elected	Board of Directors		
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	Voting	6.2%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this r	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990117548	
Name	Charles Smith	
Address	РО Вох	
	Street 1	1017 Amelia St.
	Street 2	

	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70115	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Director & Sec	Officer, Other - Director & Secretary	
Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	6.2%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one of	or more broadcast stations	No

Ownership Information			
FRN	9990117549		
Name	Lauren Steinhardt		
Address	PO Box		
	Street 1	2322 Saint Thomas St.	
	Street 2		
	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70130	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Director		
Principal Profession or Occupation	Insurance Producer		

By Whom Appointed or Elected	Board of Directors	
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 from 0.0 to 100.0)	Voting	6.2%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No

Ownership Information		
FRN	9990117553	
Name	Lindsey B. Wands	
Address	PO Box	
	Street 1	228 St. Charles Ave.
	Street 2	
	City	New Orleans
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	70130
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Director & SecretaryMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	VP of Commerical Banking	
By Whom Appointed or Elected	Board of Directors	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Female
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	6.2%
(enter percentage values 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 that do not appear on this report?

No

Ownership Information			
FRN	9990136820		
Name	Melissa A. Truax		
Address	PO Box		
	Street 1	2121 N. Causeway Blvd. Ste 200	
	Street 2		
	City	Metairie	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70001	
	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	Director of Recruiting- Premier Paths		
By Whom Appointed or Elected	Board of Directors	Board of Directors	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	6.2%	
(enter percentage values 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  No hat do not appear on this report?			

Ownership Information			
FRN	9990136821	9990136821	
Name	Carl Arredondo	Carl Arredondo	
Address	ress PO Box		
	Street 1	705 Old Metairie RDr.	
	Street 2		
	City	Metairie	

	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70001	
	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 Meteorlogist	Retired Meteorlogist	
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	6.2%	
(enter percentage values 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 o	or more broadcast stations No	

Ownership Information	Ownership Information		
FRN	9990136822		
Name	Matthew Berger		
Address	PO Box		
	Street 1	3905 Hullen St.	
	Street 2		
	City	Metairie	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70002	
	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	Vice-President of Marketing for Humana		
By Whom Appointed or Elected	Board of Directors		

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	6.2%
	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have that do not appear on this	or more broadcast stations No	

Ownership Information	Ownership Information		
FRN	9990136823	9990136823	
Name	Andrew Travis Wadman		
Address	РО Вох		
	Street 1	3205 Aztec Fall Cove	
	Street 2		
	City	Austin	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	78746	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Petroleum Engineer at CML Exploration		
By Whom Appointed or Elected	Board of Directors	Board of Directors	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	6.2%	
(enter percentage values 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 creport?	or more broadcast stations No	

Ownership Information			
FRN	9990144205		
Name	Lena Al-Dujaili		
Address	PO Box		
	Street 1	709 Cadiz St.	
	Street 2		
	City	New Orleans	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70115	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Physician		
By Whom Appointed or Elected	Board of Directors	Board of Directors	
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Asian	
Interest Percentages	Voting	6.2%	
(enter percentage values 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 that do not appear on this report?			

Ownership Information		
FRN	9990144210	
Name	Dwight McGhee	
Address	PO Box	
	Street 1	502 Fairway Dr.
	Street 2	
	City LaPlace	
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	70068

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired	Retired	
By Whom Appointed or Elected	Board of Directors		
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	Voting	6.2%	
(enter percentage values 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?		No

Ownership Information	Ownership Information		
FRN	9990144211		
Name	Thomas Spiers		
Address	PO Box		
	Street 1	4905 Gregoire St.	
	Street 2		
	City	Metairie	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70006	
	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	Medical Executive		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)			

	Ethnicity	Not Hispanic or Latino		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Race	White		
	Voting	6.2%		
	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	No			
(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) 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.	

# 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.

#### **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>DIO FOR THE BLIND &amp; HANDICAPPED, INC.</b> Name: <b>Sherman Boughton</b> Phone: <b>5048991144</b> 10/13/2021