

(REFERENCE COPY - Not for submission)

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

File Number: **0000171284** Submit Date: **2021-11-24** FRN: **0006123889** 

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/24/2021

Filing Status: Active

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

#### 1. Respondent

FRN	Entity Name
0006123889	TABERNACLE BAPTIST CHURCH/schools

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3931 White Horse Road	Greenville	sc	29611	+1 (864) 295- 2145	radio@wtbi.

## 2. Contact Representative

Name	Organization	
Brad Deutsch	Foster Garvey P.C.	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac St., NW Suite 200	Washington	DC	20007	+1 (202) 298- 1793	brad.deutsch@foster. com

# 3. Application Filing Fee

Not Applicable

## 4. Control of Respondent

Relationship to stations/permits  Entity required to file a Form 323-E because it holds an attributable interest in more Licensees or Permittees		holds an attributable interest in one or
Is the Respondent's governing be	pard (or other governing entity) directly or	No

(b) Provide the following information about this report:				
Purpose	Biennial 10/01/2021			
"As of" date				
	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
Tabernacle Baptist Church / schools	0009332263

Fac. ID No.	Call Sign	City	State	Service
64496	WTBI-FM	GREENVILLE	sc	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.

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, 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	0006123889	0006123889		
Entity Name	TABERNACLE BAPTIST CHU	RCH/schools		
Address	РО Вох			
	Street 1	3931 White Horse Road		
	Street 2			
	City	Greenville		
	State ("NA" if non-U.S. address)	SC		
	Zip/Postal Code	29611		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			

Positional Interests (check all that apply)	Respondent	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
Interest Percentages	Voting	0.0%		
enter percentage values rom 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 or more broadcast stations report?  Yes			

Ownership Information				
FRN	9990136000	9990136000		
Name	Joel W. Logan	Joel W. Logan		
Address	PO Box			
	Street 1	3931 White Horse Road		
	Street 2			
	City	Greenville		
	State ("NA" if non-U.S. address)	SC		
	Zip/Postal Code	29611		
	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	Church Pastor			
By Whom Appointed or Elected	Church Congregation	Church Congregation		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	100.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
	rest holder have an attributable interest in one or more broadcast stations  Yes ot appear on this report?			

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.	Yes
If "No," submit as an exhibit an explanation.	

(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.	

### 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>Trustee</b> Exact Legal Title or Name of Respondent: <b>Tabernacle Baptist Church</b> Name: <b>John H. Watts</b> Phone: <b>8642952145</b> 11/24/2021