



(REFERENCE COPY - Not for submission)

Renewal of License

File Number: **0000119819** | Submit Date: **08/03/2020** | Call Sign: **WMBF-TV** | Facility ID: **83969** | FRN: **0018223693**
State: **South Carolina** | City: **MYRTLE BEACH**
Service: **DTV** | Purpose: **Renewal of License** | Status: **Superseded** | Status Date: **12/17/2020** | Filing Status: **InActive**

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Fees, Waivers, and Exemptions

Section	Question	Response
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	Total number of rule sections involved in this waiver request:	

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
GRAY TELEVISION LICENSEE, LLC Doing Business As: WMBF-TV	4370 PEACHTREE ROAD, NE ATLANTA, GA 30319 United States	+1 (404) 504- 9828	allfclms@gray. tv	Limited Liability Company

**Contact
Representatives
(2)**

Contact Name	Address	Phone	Email	Contact Type
David Burke <i>Senior Vice President and CTO</i> Gray TV	RSA TOWER, 20TH FLOOR 201 MONROE STREET MONTGOMERY, AL 36104 United States	+1 (334) 206- 1475	david. burke@gray.tv	Technical Representative
Joan Stewart Wiley Rein LLP	1776 K Street, NW Washington, DC 20006 United States	+1 (202) 719- 7438	jstewart@wiley. law	Legal Representative

**Renewal
Certification**

Section	Question	Response
Character Issues	Licensee certifies that neither the licensee nor any party to the application has or has had any interest in, or connection with, any broadcast application in any proceeding where character issues were left unresolved, or were resolved adversely against the applicant or any party to the application;	Yes
	Licensee certifies that neither the licensee nor any party to the application has or has had any interest in, or connection with, any pending broadcast application in which character issues have been raised..	Yes
Adverse Findings	Licensee certifies that, with respect to the licensee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any laws related to any of the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	Yes
FCC Violations during the Preceding License Term	Licensee certifies that, with respect to the station(s) for which renewal is requested, there have been no violations by the licensee of the Communications Act of 1934, as amended, or the rules or regulations of the Commission during the preceding license term. If "No", the licensee must submit an explanatory exhibit providing complete descriptions of all violations.	Yes
Ownership	The licensee certifies that, with respect to the station(s) for which renewal is requested, it complied with 47 CFR Section 73.3555.	Yes
Alien Ownership and Control	Licensee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.	Yes
Non-Discriminatory Advertising Sales Agreements	Commercial licensee certifies that its advertising sales agreements do not discriminate on the basis of race or ethnicity and that all such agreements held by the licensee contain non-discrimination clauses. Noncommercial licensees should select "not applicable."	Yes

**DTV/Class A
Certification**

Section	Question	Response
Biennial Ownership Report	Licensee certifies that the station's Biennial Ownership Report (FCC Form 323 or 323-E) has been filed with the Commission, as required by 47 CFR Section 73.3615.	Yes
EEO Program	The station's Broadcast EEO Program Report (Form 2100, Schedule 396), has been filed with the Commission as required by 47 CFR Section 73.2080(f)(1).	Yes File Number: 0000119365
	The station has posted its most recent Broadcast EEO Public File Report on the station's website, as required by 47 CFR Section 73.2080(c)(6).	Yes
Online Public Inspection File	Licensee certifies that the documentation required by 47 CFR Sections 73.3526 or 73.3527, as applicable, has been uploaded to the station's public inspection file when required.	No
Children's Programming Commercial Limitations	For the period of time covered by this application, the licensee certifies that it has complied with the limits on commercial matter as set forth in 47 CFR Section 73.670 and the Commission's commercial limit policies related to host-selling and program-length commercials.	Yes
Children's Television Programming Reports	For the period of time covered by this application, the licensee certifies that it has filed with the Commission, and incorporates by reference, the Children's Television Programming Reports (FCC Form 2100, Schedule H) as described in 47 CFR Section 73.3526, containing all required information.	Yes
Core Programming Processing Guidelines	For the period of time covered by this application, the licensee certifies that the station has complied with the Core Programming criteria and Core Programming Processing Guidelines, as required by the Commission's rules that were in effect at the time the Core Program was aired.	Yes
E/I Symbol	The licensee certifies that, as required by 47 CFR Section 73.671(c)(5), it identifies each Core Program using the E/I symbol throughout the airing of each program.	No
Notifying Publishers Of Program Guides	The licensee certifies that it provides information identifying each Core Program aired on its station to publishers of program guides, as required by 47 CFR Section 73.673.	Yes
Publicizing Children's Reports	The licensee certifies that prior to January 21, 2020, it publicized the existence and location of the station's Children's Television Programming Reports (FCC Form 2100, Schedule H) as required by 47 CFR Section 73.3526 (e)(11)(iii).	Yes
Continued Class A Eligibility	Licensee certifies that its station does, and will continue to, broadcast: (a) a minimum of 18 hours per day; and (b) an average of at least 3 hours per week of programming each quarter produced within the market area served by the station, or by a group of commonly controlled low power or Class A stations whose predicted noise-limited contours are contiguous. See 47 CFR Section 73.6001.	
Discontinued Operations	Licensee certifies that during the preceding license term, the station has not been silent for any consecutive 12-month period.	Yes
Silent Stations	Licensee certifies that the station is currently on the air broadcasting programming intended to be received by the public.	Yes

Environmental Effects	Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.	Yes
Adherence to Minimum Operating Schedule	Licensee certifies that during the preceding license term the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.	Yes
Adherence to Operating Parameters	Licensee certifies that during the preceding license term, the station has operated pursuant to authorized operating parameters, either pursuant to the terms of its license, special temporary authority, or as otherwise permitted under the Commission's rules.	Yes

**Other BroadCast
Certifications**

Section	Question	Response
Other BroadCast Certifications	Does this application include one or more FM translator station(s) or TV translator station(s) or LPTV station(s), in addition to the station listed at the top of this section?	No

**FM Translator
Certifications**

You have not selected any Other Broadcast Station.

TV Translator/ LPTV Certifications

You have not selected any Other Broadcast Certifications

Certification

Section	Question	Response
<p>General Certification Statements</p>	<p>The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).</p>	
	<p>The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1.2002(b) of the rules, 47 CFR §1.2002(b), for the definition of "party to the application" as used in this certification §1.2002 (c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.</p>	
<p>Authorized Party to Sign</p>	<p>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</p> <p>Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application.</p> <p>WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503).</p>	
	<p>I certify that this application includes all required and relevant attachments.</p>	<p>Yes</p>
	<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p>Robert Folliard , III . <i>Assistant Secretary</i></p> <p>08/03/2020</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
WMBF Public File Exhibit.pdf	Applicant	DTV/Class A Certifications	WMBF Public File Exhibit