

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0010 (October 2009)	FOR FCC USE ONLY
FCC 323 OWNERSHIP REPORT FOR COMMERCIAL BROADCAST STATIONS		FOR COMMISSION USE ONLY FILE NO. -20111130DGZ

Section I - General Information

1.	Legal Name of the Respondent WVJT, LLC		
	Street Address (1) 2307 PRINCESS ANN STREET		
	Street Address (2)		
	City GREENSBORO	State or Country (if foreign address) NC	ZIP Code 27408 -
	Telephone Number (include area code) 3362862087	E-Mail Address (if available) COTTONBAY@AOL.COM	
	FCC Registration Number: 0014928618	Call Sign WIQO-FM	Facility ID Number 73158
2.	Contact Representative A. WRAY FITCH III		
	Firm or Company Name GAMMON & GRANGE, P.C.		
	Street Address (1) 8280 GREENSBORO DRIVE, 7TH FLOOR		
	Street Address (2)		
	City MCLEAN	State or Country (if foreign address) VA	ZIP Code 22102 - 3807
	Telephone Number (include area code) 7037615013	E-Mail Address (if available) AWF@GG-LAW.COM	
3.	Nature of Respondent (See Instructions for definitions) <input checked="" type="radio"/> Licensee <input type="radio"/> Permittee <input type="radio"/> Entity with an attributable interest		
4.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Fee-exempt Report <input type="radio"/> Other Other <input checked="" type="radio"/> N/A (Fee Required)		
5.	All of the information furnished in this Report is accurate as of 10/01/2011 <i>(Date entered must (1) be Oct. 1 of the filing year when filing a Biennial Ownership Report (or Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-biennial Ownership Report.)</i>		
6.	Purpose: This Report is filed for: (choose one)		
	a. <input checked="" type="radio"/> Biennial		
	b. <input type="radio"/> Validation and Resubmission of a previously filed Biennial Report (certifying no change from previous Report)		
	c. <input type="radio"/> Transfer of Control or Assignment of License/Permit		
	d. <input type="radio"/> Report by Permittee filing within 30 days after the grant of a construction permit for a new commercial AM, FM or full power television broadcast station.		

e. <input type="radio"/> Update / certification of accuracy of an initial Ownership Report filed by Permittee (filing in conjunction with Permittee's application for a station license)																										
f. <input type="radio"/> Amendment to a previously filed Ownership Report	File Number: -																									
If an Amendment, submit as an Exhibit a listing by Section and Question Number the portions of the previous Report that are being revised.																										
[Exhibit 1]																										
7.	Licensee and Station Information. The stations listed below are all licensed to the following person or entity:																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Licensee Name</td> <td>Licensee's FCC Registration Number (FRN)</td> </tr> <tr> <td>WVJT,LLC</td> <td>0014928618</td> </tr> </table>		Licensee Name	Licensee's FCC Registration Number (FRN)	WVJT,LLC	0014928618																					
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Section II-B - Biennial Ownership Information																										
1.	Contract Information. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only Licensees, or Respondents with a majority interest in or that otherwise exercise <u>de facto</u> control over the subject Licensee shall respond. Other Respondents should select "Not Applicable" in response to this question.) If the agreement is a local marketing agreement (LMA) or a radio joint sales agreement (JSA), or if the agreement is a network affiliation agreement, check the appropriate box; otherwise, select "Other" for non-LMA/radio JSA or network affiliation agreements.																									
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2.	OPERATING AGREEMENT	WVJT, LLC	Month NOVEMBER Year 2005	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
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2. Capitalization (Only Licensees or entities with a majority interest in or that otherwise exercises de facto control over the subject Licensee shall respond.)
 Not Applicable
[Enter Capitalization Information]

3. (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, noninsulated partners, members and other persons or entities with a direct attributable interest in the Respondent. (A "direct" interest is one that is not held through any intervening companies or entities.) In the case of vertical or indirect ownership structures, report only those interests in the Respondent that also represent an attributable interest in the Licensee for which the Report is being submitted.

List each person or entity with a direct attributable interest in the Respondent separately. 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 separate reports for persons or entities that do not have an attributable interest in the Licensee for which the report is being submitted.

Ownership Interests Information

Copy 1.	Name	WVJT, LLC
	Address	Street 2307 PRINCESS ANN STREET City/State GREENSBORO , NORTH CAROLINA Postal/ZIP Code 27408 - Country (if not U.S.)
	Listing Type	<input checked="" type="radio"/> Respondent <input type="radio"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner	

	<input type="checkbox"/> LC/LLC/PLLC Member <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0014928618	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input checked="" type="checkbox"/> N/A (entity) <u>Gender</u> <input type="checkbox"/> Male <input type="checkbox"/> Female	
	<u>Ethnicity</u> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	
	<u>Race</u> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races	
	<u>Citizenship</u>	
Percentage of votes	100 %	
Percentage of equity	100 %	
Percentage of total assets (equity debt plus)	100 %	
Copy 2.	Name	TODD P. ROBINSON
	Address	Street 2307 PRINCESS ANN STREET City/State GREENSBORO , NORTH CAROLINA Postal/ZIP Code 27408 - Country (if not U.S.)
	Listing Type	<input type="checkbox"/> Respondent <input checked="" type="checkbox"/> Other Interest Holder
	Relationship to Licensee	<input type="checkbox"/> Licensee (or Officer/Director of Licensee) <input checked="" type="checkbox"/> Person with attributable interest <input type="checkbox"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director

	<input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input checked="" type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0005024252	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	Gender <input checked="" type="radio"/> Male <input type="radio"/> Female	
	Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	Race <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	Citizenship US	
Percentage of votes	100 %	
Percentage of equity	58 %	
Percentage of total assets (equity debt plus)	58 %	
(b.)	Respondent certifies that any equity and financial interests not reported in response to Question 3(a) are non-attributable. If "No," submit as an Exhibit an explanation.	<input checked="" type="radio"/> Yes <input type="radio"/> No [Exhibit 3]
(c.)	Does the Respondent or any person/entity with an attributable interest in the Respondent also hold an attributable interest in any other broadcast station, or in any newspaper entities in the same market, as defined in 47 C.F.R. Section 73.3555? If "Yes", provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below for the applicable type of interest (broadcast or newspaper). Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option. NOTE: Spreadsheets must be submitted in a special "XML Spreadsheet" format with	<input checked="" type="radio"/> Yes <input type="radio"/> No

	<p>the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.</p> <p>[Broadcast Interests Subform]</p> <p>[Newspaper Interests Subform]</p>	
(d.)	<p>Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?</p> <p>If "Yes", complete the information describing the relationship.</p> <p>[Enter Familial Relationships Information]</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>
(e.)	<p>Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee ?</p> <p>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.</p> <p>[Enter Attribution Exemption Information]</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>
4.	<p>Respondent's Interests Held. Each Respondent other than a Licensee should list the name and FCC Registration Number of all entities in which the Respondent holds a direct attributable ownership interest, where that listed entity has an attributable ownership interest in the Licensee of the stations associated with the Report. Licensees should select "N/A" in response to this question.</p> <p>For any listing that includes the name of a person or entity reported on multiple Ownership Reports, ensure that the FRN information is consistent among all such Ownership Reports. Respondents should coordinate with each other to ensure such consistency.</p> <p>[Enter Respondent Interests Held Information]</p>	<p><input checked="" type="radio"/> N/A</p>
5.	<p>Organizational Chart. LICENSEES ONLY: Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all persons/entities that have attributable interests in the Licensee.</p> <p>Non-Licensee Respondents should select "N/A" in response to this question.</p>	<p><input checked="" type="radio"/> N/A [Exhibit 5]</p>

SECTION III - CERTIFICATION

I certify that I am A MEMBER

(Official Title)

of WVJT, LLC

(Exact legal title or name of Respondent)

and 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.

(Date of the signature below must (1) be no earlier than Oct. 1 of the filing year when filing a Biennial Ownership Report (and no earlier than Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-biennial Ownership Report.)

Signature TODD P. ROBINSON	Date 11/18/2011
Telephone Number of Respondent (Include area code) 3362862087	

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 LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 2

Description: EXHIBIT 2

WVJT, LLC IS A LIMITED LIABILITY COMPANY.

Exhibit 5

Description: EXHIBIT 5

COPORATE STRUCTURE CHART ATTACHED.

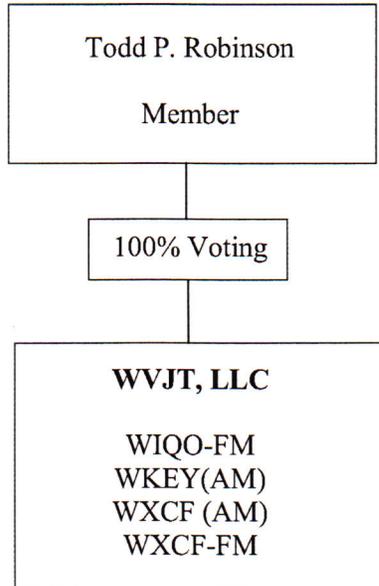
Attachment 5

Description
CORPORATE STRUCTURE CHART

Spreadsheets

Description
BROADCAST INTERESTS SPREADSHEET

**WVJT, LLC
CORPORATE STRUCTURE CHART**



Form 323, Section II-B, 3c Broadcast Interests

25F_01

Name of Interest Holder	Call Sign	Community City	Community State	Facility ID Number	Percentage of Votes	Percentage of Equity	Percentage of Total Assets (EDIP)	Positional Interest (Check all that apply (Y/N))				Other Info
								Director	Partner	Limited Partner	Stockholder Owner	
TODD P. ROBINSON	KZLA	RIVERDALE	CA	88666	50	50	50	N	N	N	N	MEMBER
TODD P. ROBINSON	WKCJ	ELLISTON-LAFAYETTE	VA	54597	50	29	28	N	N	N	N	MEMBER
TODD P. ROBINSON	WRON	RONCEVERTE	WV	54596	50	29	28	N	N	N	N	MEMBER
TODD P. ROBINSON	WRON-FM	LEWISBURG	WV	59675	50	29	28	N	N	N	N	MEMBER
TODD P. ROBINSON	WLSW	WHITE SULPHUR SPRING	WV	59678	50	29	28	N	N	N	N	MEMBER
TODD P. ROBINSON	KHIL	WILCOX	AZ	72656	5	5	5	N	N	N	N	MEMBER
TODD P. ROBINSON	KWCX-FM	TANQUE VERDE	AZ	72659	5	5	5	N	N	N	N	MEMBER
TODD P. ROBINSON	KZLZ	CASAS ADOBES	AZ	36022	5	5	5	N	N	N	N	MEMBER
TODD P. ROBINSON	KTKE	TRUCKEE	CA	88673	100	100	58	N	N	N	N	MEMBER



Electronic Form 159

Payment Confirmation

Your transaction has been approved. For your records, please note the following:

AGENCY TRACKING ID:	PGC2046596
AUTHORIZATION NUMBER :	05306G
AMOUNT PAID :	\$240.00

[PRINT FORM 159](#)

[CLOSE](#)

Customer Service

[FCC Fees](#)

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[FCC Home Page](#)

If you have any questions or concerns please contact your licensing system help desk.