

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0010 (March 2013)	FOR FCC USE ONLY
<h1 style="margin: 0;">FCC 323</h1> <h2 style="margin: 0;">OWNERSHIP REPORT FOR</h2> <h3 style="margin: 0;">COMMERCIAL BROADCAST STATIONS</h3>		FOR COMMISSION USE ONLY FILE NO. -20140527AED

**Section I - General Information**

1.	Legal Name of the Respondent SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.			
	Street Address (1) 629 DOWNARD ROAD			
	Street Address (2)			
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; padding: 2px;">City ZANESVILLE</td> <td style="width:30%; padding: 2px;">State or Country (if foreign address) OH</td> <td style="width:25%; padding: 2px;">ZIP Code 43701 -</td> </tr> </table>	City ZANESVILLE	State or Country (if foreign address) OH	ZIP Code 43701 -
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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;">Telephone Number (include area code) 7404525431</td> <td style="width:50%; padding: 2px;">E-Mail Address (if available)</td> </tr> </table>	Telephone Number (include area code) 7404525431	E-Mail Address (if available)	
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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; padding: 2px;">FCC Registration Number: 0006162242</td> <td style="width:30%; padding: 2px;">Call Sign WHIZ</td> <td style="width:25%; padding: 2px;">Facility ID Number 61218</td> </tr> </table>	FCC Registration Number: 0006162242	Call Sign WHIZ	Facility ID Number 61218
FCC Registration Number: 0006162242	Call Sign WHIZ	Facility ID Number 61218		
2.	Contact Representative J. RICHARD CARR, ESQ.			
	Firm or Company Name			
	Street Address (1) 5528 TRENT STREET			
	Street Address (2)			
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%; padding: 2px;">City CHEVY CHASE</td> <td style="width:30%; padding: 2px;">State or Country (if foreign address) MD</td> <td style="width:25%; padding: 2px;">ZIP Code 20815 -</td> </tr> </table>	City CHEVY CHASE	State or Country (if foreign address) MD	ZIP Code 20815 -
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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;">Telephone Number (include area code) 3016567053</td> <td style="width:50%; padding: 2px;">E-Mail Address (if available) RICHARDCARR@VERIZON.NET</td> </tr> </table>	Telephone Number (include area code) 3016567053	E-Mail Address (if available) RICHARDCARR@VERIZON.NET	
Telephone Number (include area code) 3016567053	E-Mail Address (if available) RICHARDCARR@VERIZON.NET			
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 checked="" type="radio"/> Other POST-TRANSFER OF CONTROL REPORT <input type="radio"/> N/A (Fee Required)			
5.	All of the information furnished in this Report is accurate as of 05/22/2014 <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 type="radio"/> Biennial			
	b. <input type="radio"/> Validation and Resubmission of a previously filed Biennial Report (certifying no change from previous Report)			

c.  Transfer of Control or Assignment of License/Permit

d.  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.  Update / certification of accuracy of an initial Ownership Report filed by Permittee (filing in conjunction with Permittee's application for a station license)

f.  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:

Licensee Name	Licensee's FCC Registration Number (FRN)
SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.	0006162242

**Station List**

This Report is filed for the following stations:

Copy	Call Sign	Facility ID Number	Location (City/State)	Class of service
1.	WHIZ	61218	ZANESVILLE , OHIO	AM Station
2.	WHIZ-FM	11126	SOUTH ZANESVILLE , OHIO	FM Station
3.	WZVL	183304	PHILO , OHIO	FM Station
4.	WWCD	61230	BALTIMORE , OHIO	FM Station

8. Respondent is:

Sole Proprietorship       Not-for-profit corporation       Limited partnership

For-profit corporation       General partnership       Other

If "Other," describe nature of the Respondent in an Exhibit. [ Exhibit 2 ]

**Section II-A - Non-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, Permittees, or Respondents with a majority interest in or that otherwise exercise de facto control over the subject Licensee or Permittee 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.

Not Applicable

Contract Information					
Copy	Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration	Agreement Type (check all that apply)
1.	ARTICLES OF INCORPORATION	STATE OF OHIO	Month DECEMBER Year 1946	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
2.	CORPORATE BY-LAWS	LICENSEE	Month DECEMBER Year 1946	Month  Year	<input type="checkbox"/> LMA/radio JSA

				<input checked="" type="checkbox"/> Network
			<input checked="" type="checkbox"/> No	Affiliation Agreement
			Expiration Date	<input checked="" type="checkbox"/> Other
3.	NETWORK AFFILIATION AGREEMENT	ABC RADIO	Month JANUARY Year 2010	Month JANUARY Year 2015 <input checked="" type="checkbox"/> No Expiration Date
				<input checked="" type="checkbox"/> LMA/radio
				JSA
				<input checked="" type="checkbox"/> Network
				Affiliation Agreement
				<input checked="" type="checkbox"/> Other

2. Capitalization (Only Licensees, Permittees, or entities with a majority interest in or that otherwise exercises de facto control over the subject Licensee shall respond.)  
 Not Applicable

**Capitalization Information**

Copy	Class of stock (preferred, common or other)	Voting or Non-voting	Number of shares			
			Authorized	Issued and Outstanding	Treasury	Unissued
1.	<input type="radio"/> Preferred <input checked="" type="radio"/> Common <input type="radio"/> Other (specify)	<input checked="" type="radio"/> Voting <input type="radio"/> Non-Voting	750	750	0	0

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 or Permittee 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 or Permittee for which the report is being submitted.

**Ownership Interests Information**

Copy 1.	Name	SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.
	Address	Street 629 DOWNARD ROAD  City/State ZANESVILLE , OHIO Postal/ZIP Code 43701 - Country (if not U.S.)
	Listing Type	<input checked="" type="radio"/> Respondent <input type="radio"/> Other Interest Holder
	Relationship to	

Licensee/Permittee	<input checked="" type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <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 type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input checked="" type="checkbox"/> Other (please specify): LICENSEE CORP
FCC Registration Number	0006162242
Percentage of votes	0%
Percentage of total assets (equity debt plus)	0%

Copy 2. Name	NORMA J. LITICK
Address	<b>Street</b> 215 W. WILLOW LANE  <b>City/State</b> ZANESVILLE , OHIO <b>Postal/ZIP Code</b> 43701 - <b>Country (if not U.S.)</b>
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
Relationship to Licensee/Permittee	<input checked="" type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <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 checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input 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	0019797760

Percentage of votes	0 %
Percentage of total assets (equity debt plus)	0 %

Copy 3.

Name	HENRY C. LITTICK
Address	Street 905 FAIRMONT AVENUE  City/State ZANESVILLE , OHIO Postal/ZIP Code 43701 - Country (if not U.S.) 43701
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
Relationship to Licensee/Permittee	<input checked="" type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest
Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
FCC Registration Number	0019798016

Percentage of votes	80 %
Percentage of total assets (equity debt plus)	80 %

Copy 4.

Name	SUSAN L. GRAHAM
Address	Street 2988 MYRTLE OAK CIRCLE  City/State DAVIE , FLORIDA Postal/ZIP Code 33328 - Country (if not U.S.)
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
Relationship to Licensee/Permittee	<input type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <input checked="" type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest

Positional Interest (Check all that apply)	<input type="checkbox"/> checkbox not checked	Officer
	<input type="checkbox"/> checkbox not checked	Director
	<input type="checkbox"/> checkbox not checked	General Partner
	<input type="checkbox"/> checkbox not checked	Limited Partner
	<input type="checkbox"/> checkbox not checked	LC/LLC/PLLC Member
	<input type="checkbox"/> checkbox not checked	Owner
	<input checked="" type="checkbox"/> checkbox checked	Stockholder
	<input type="checkbox"/> checkbox not checked	Attributable Creditor
	<input type="checkbox"/> checkbox not checked	Attributable Investor
	<input type="checkbox"/> checkbox not checked	Other (please specify):
FCC Registration Number	0019797968	
Percentage of votes	7 %	
Percentage of total assets (equity debt plus)	7 %	
Copy 5. Name	BARBARA J. SAUNDERS	
Address	Street 360 BROADVIEW AVENUE	
	City/State ZANESVILLE , OHIO	
	Postal/ZIP Code 43701 -	
	Country (if not U.S.)	
Listing Type	<input type="radio"/> radio button not selected	Respondent
	<input checked="" type="radio"/> radio button selected	Other Interest Holder
Relationship to Licensee/Permittee	<input type="radio"/> radio button not selected	Licensee/Permittee (or Officer/Director of Licensee/Permittee)
	<input checked="" type="radio"/> radio button selected	Person with attributable interest
	<input type="radio"/> radio button not selected	Entity with attributable interest
Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> checkbox checked	Officer
	<input checked="" type="checkbox"/> checkbox checked	Director
	<input type="checkbox"/> checkbox not checked	General Partner
	<input type="checkbox"/> checkbox not checked	Limited Partner
	<input type="checkbox"/> checkbox not checked	LC/LLC/PLLC Member
	<input type="checkbox"/> checkbox not checked	Owner
	<input checked="" type="checkbox"/> checkbox checked	Stockholder
	<input type="checkbox"/> checkbox not checked	Attributable Creditor
	<input type="checkbox"/> checkbox not checked	Attributable Investor
	<input type="checkbox"/> checkbox not checked	Other (please specify):
FCC Registration Number	0019797950	
Percentage of votes	7 %	
Percentage of total assets (equity debt plus)	7 %	

Copy 6. Name	JOHN C. GRAHAM TRUST A (VOTED BY BARBARA SAUNDERS AND SUSAN GRAHAM)
Address	Street 360 BROADVIEW AVENUE  City/State ZANESVILLE , OHIO Postal/ZIP Code 43701 - Country (if not U.S.)
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
Relationship to Licensee/Permittee	<input type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <input type="radio"/> Person with attributable interest <input checked="" 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 type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
FCC Registration Number	0019797943
Percentage of votes	4.4 %
Percentage of total assets (equity debt plus)	4.4 %

(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 ]
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(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 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 <a href="#">Click Here</a> .	<input type="radio"/> Yes <input checked="" type="radio"/> No
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**Broadcast Interest Information**

Copy	Name of Interest Holder	Call Sign	Community of license	Facility ID Number	Percentage of Votes	Percentage of total assets (EDP)	Positional Interest (Check all that apply)
1.	SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.	WHIZ-TV	City ZANESVILLE State OHIO	61216	20%	20%	checkbox not checked Officer checkbox not checked Director checkbox checked Partner checkbox not checked Limited Partner checkbox not checked Owner checkbox not checked Stockholder checkbox not checked Attributable Entity checkbox not checked Other (please specify):

**[Newspaper Interests Subform]**

(d.) Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?

radio button selected Yes  
radio button not selected No

If "Yes", complete the information describing the relationship.

**Familial Relationships**

Copy	Name	Parent/ Child	Spouse	Siblings
1.	SUSAN L. GRAHAM, RICHARD E. GRAHAM, BARBARA SAUNDERS	radio button not selected	radio button not selected	radio button selected
2.	NORMA J. LITTICK/HENRY C. LITTICK	radio button selected	radio button not selected	radio button not selected

(e.) Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee or Permittee ?

radio button not selected Yes  
radio button selected 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.

**[Enter Attribution Exemption Information]**

**SECTION III - CERTIFICATION**

I certify that I am PRESIDENT



of SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.

(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 HENRY C. LITTICK	Date 05/27/2014
Telephone Number of Respondent (Include area code) 7405255431	

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

Menu



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	Street Address (2)		
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	Telephone Number (include area code) 7404525431	E-Mail Address (if available)	
	FCC Registration Number: 0006162242	Call Sign WHIZ	Facility ID Number 61218
2.	Contact Representative J. RICHARD CARR, ESQ.		Firm or Company Name
	Street Address (1) 5528 TRENT STREET		
	Street Address (2)		
	City CHEVY CHASE	State or Country (if foreign address) MD	ZIP Code 20815 -
	Telephone Number (include area code) 3016567053	E-Mail Address (if available) RICHARDCARR@VERIZON.NET	
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 checked="" type="radio"/> Other POST-TRANSFER OF CONTROL REPORT <input type="radio"/> N/A (Fee Required)		
5.	All of the information furnished in this Report is accurate as of 05/22/2014 <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 type="radio"/> Biennial		
	b. <input type="radio"/> Validation and Resubmission of a previously filed Biennial Report (certifying no change from previous Report)		

c.  Transfer of Control or Assignment of License/Permit

d.  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.  Update / certification of accuracy of an initial Ownership Report filed by Permittee (filing in conjunction with Permittee's application for a station license)

f.  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:

Licensee Name	Licensee's FCC Registration Number (FRN)
SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.	0006162242

**Station List**

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3.	WZVL	183304	PHILO , OHIO	FM Station
4.	WWCD	61230	BALTIMORE , OHIO	FM Station

8. Respondent is:

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Not-for-profit corporation	<input type="checkbox"/> Limited partnership
<input checked="" type="checkbox"/> For-profit corporation	<input type="checkbox"/> General partnership	<input type="checkbox"/> Other

If "Other," describe nature of the Respondent in an Exhibit. [ Exhibit 2 ]

**Section II-A - Non-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, Permittees, or Respondents with a majority interest in or that otherwise exercise de facto control over the subject Licensee or Permittee 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.

Not Applicable

Contract Information					
Copy	Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration	Agreement Type (check all that apply)
1.	ARTICLES OF INCORPORATION	STATE OF OHIO	Month DECEMBER Year 1946	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
2.	CORPORATE BY-LAWS	LICENSEE	Month DECEMBER Year 1946	Month  Year  	<input type="checkbox"/> LMA/radio JSA

				<input checked="" type="checkbox"/> Network
			<input checked="" type="checkbox"/> No	Affiliation Agreement
			Expiration Date	<input checked="" type="checkbox"/> Other
3.	NETWORK AFFILIATION AGREEMENT	ABC RADIO	Month JANUARY Year 2010	Month JANUARY Year 2015
			<input checked="" type="checkbox"/> No	LMA/radio
			Expiration Date	JSA
				<input checked="" type="checkbox"/> Network
				Affiliation Agreement
				<input checked="" type="checkbox"/> Other

2. Capitalization (Only Licensees, Permittees, or entities with a majority interest in or that otherwise exercises de facto control over the subject Licensee shall respond.)

Not Applicable

**Capitalization Information**

Copy	Class of stock (preferred, common or other)	Voting or Non-voting	Number of shares			
			Authorized	Issued and Outstanding	Treasury	Unissued
1.	<input type="checkbox"/> Preferred <input checked="" type="checkbox"/> Common <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Voting <input type="checkbox"/> Non-Voting	750	750	0	0

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 or Permittee 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 or Permittee for which the report is being submitted.

**Ownership Interests Information**

Copy 1.	Name	SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.
	Address	Street 629 DOWNARD ROAD  City/State ZANESVILLE, OHIO Postal/ZIP Code 43701 - Country (if not U.S.)
	Listing Type	<input checked="" type="checkbox"/> Respondent <input type="checkbox"/> Other Interest Holder
	Relationship to	

Licensee/Permittee	<input checked="" type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <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 type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input checked="" type="checkbox"/> Other (please specify): LICENSEE CORP
FCC Registration Number	0006162242
Percentage of votes	0 %
Percentage of total assets (equity debt plus)	0 %
Copy 2. Name	NORMA J. LITTICK
Address	Street 215 W. WILLOW LANE  City/State ZANESVILLE , OHIO Postal/ZIP Code 43701 - Country (if not U.S.)
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
Relationship to Licensee/Permittee	<input checked="" type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <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 checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input 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	0019797760

Percentage of votes	0 %	
Percentage of total assets (equity debt plus)	0 %	

Copy 3.

Name	HENRY C. LITTICK	
Address	Street	905 FAIRMONT AVENUE
	City/State	ZANESVILLE , OHIO
	Postal/ZIP Code	43701 -
	Country (if not U.S.)	43701
Listing Type	<input type="radio"/> Respondent	<input type="radio"/> Other Interest Holder
	<input type="radio"/> Other Interest Holder	
Relationship to Licensee/Permittee	<input type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee)	
	<input type="radio"/> Person with attributable interest	
	<input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> Officer	
	<input checked="" type="checkbox"/> Director	
	<input type="checkbox"/> General Partner	
	<input type="checkbox"/> Limited Partner	
	<input type="checkbox"/> LC/LLC/PLLC Member	
	<input type="checkbox"/> Owner	
	<input checked="" type="checkbox"/> Stockholder	
	<input type="checkbox"/> Attributable Creditor	
	<input type="checkbox"/> Attributable Investor	
	<input type="checkbox"/> Other (please specify):	
FCC Registration Number	0019798016	

Percentage of votes	80 %	
Percentage of total assets (equity debt plus)	80 %	

Copy 4.

Name	SUSAN L. GRAHAM	
Address	Street	2988 MYRTLE OAK CIRCLE
	City/State	DAVIE , FLORIDA
	Postal/ZIP Code	33328 -
	Country (if not U.S.)	
Listing Type	<input type="radio"/> Respondent	<input type="radio"/> Other Interest Holder
	<input type="radio"/> Other Interest Holder	
Relationship to Licensee/Permittee	<input type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee)	
	<input type="radio"/> Person with attributable interest	
	<input type="radio"/> Entity with attributable interest	

Positional Interest (Check all that apply)	<input type="checkbox"/> checkbox not checked	Officer
	<input type="checkbox"/> checkbox not checked	Director
	<input type="checkbox"/> checkbox not checked	General Partner
	<input type="checkbox"/> checkbox not checked	Limited Partner
	<input type="checkbox"/> checkbox not checked	LC/LLC/PLLC Member
	<input type="checkbox"/> checkbox not checked	Owner
	<input checked="" type="checkbox"/> checkbox checked	Stockholder
	<input type="checkbox"/> checkbox not checked	Attributable Creditor
	<input type="checkbox"/> checkbox not checked	Attributable Investor
	<input type="checkbox"/> checkbox not checked	Other (please specify):
FCC Registration Number	0019797968	
Percentage of votes	7 %	
Percentage of total assets (equity debt plus)	7 %	

Copy 5.	Name	BARBARA J. SAUNDERS		
	Address	Street	360 BROADVIEW AVENUE	
		City/State	ZANESVILLE , OHIO	
		Postal/ZIP Code	43701 -	
		Country (if not U.S.)		
		Listing Type	<input type="checkbox"/> radio button not selected	Respondent
		<input checked="" type="checkbox"/> radio button selected	Other Interest Holder	
	Relationship to Licensee/Permittee	<input type="checkbox"/> radio button not selected	Licensee/Permittee (or Officer/Director of	
			Licensee/Permittee)	
		<input checked="" type="checkbox"/> radio button selected	Person with attributable interest	
	<input type="checkbox"/> radio button not selected	Entity with attributable interest		
Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> checkbox checked	Officer		
	<input checked="" type="checkbox"/> checkbox checked	Director		
	<input type="checkbox"/> checkbox not checked	General Partner		
	<input type="checkbox"/> checkbox not checked	Limited Partner		
	<input type="checkbox"/> checkbox not checked	LC/LLC/PLLC Member		
	<input type="checkbox"/> checkbox not checked	Owner		
	<input checked="" type="checkbox"/> checkbox checked	Stockholder		
	<input type="checkbox"/> checkbox not checked	Attributable Creditor		
	<input type="checkbox"/> checkbox not checked	Attributable Investor		
	<input type="checkbox"/> checkbox not checked	Other (please specify):		
FCC Registration Number	0019797950			
Percentage of votes	7 %			
Percentage of total assets (equity debt plus)	7 %			



Copy 6.

Name	JOHN C. GRAHAM TRUST A (VOTED BY BARBARA SAUNDERS AND SUSAN GRAHAM)
Address	Street 360 BROADVIEW AVENUE  City/State ZANESVILLE , OHIO Postal/ZIP Code 43701 - Country (if not U.S.)
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
Relationship to Licensee/Permittee	<input type="radio"/> Licensee/Permittee (or Officer/Director of Licensee/Permittee) <input type="radio"/> Person with attributable interest <input checked="" 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 type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
FCC Registration Number	0019797943
Percentage of votes	4.4 %
Percentage of total assets (equity debt plus)	4.4 %

(b.) Respondent certifies that any equity and financial interests not reported in response to Question 3(a) are non-attributable.

Yes  
 No  
[ Exhibit 3 ]

If "No," submit as an Exhibit an explanation.

(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?

Yes  
 No

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 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](#).

**Broadcast Interest Information**

Copy	Name of Interest Holder	Call Sign	Community of license	Facility ID Number	Percentage of Votes	Percentage of total assets (EDP)	Positional Interest (Check all that apply)
1.	SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.	WHIZ-TV	City ZANESVILLE State OHIO	61216	20 %	20 %	checkbox not checked Officer checkbox not checked Director checkbox checked Partner checkbox not checked Limited Partner checkbox not checked Owner checkbox not checked Stockholder checkbox not checked Attributable Entity checkbox not checked Other (please specify):

[Newspaper Interests Subform]

(d.) Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?

radio button selected Yes  
radio button not selected No

If "Yes", complete the information describing the relationship.

Familial Relationships				
Copy	Name	Parent/ Child	Spouse	Siblings
1.	SUSAN L. GRAHAM, RICHARD E. GRAHAM, BARBARA SAUNDERS	radio button not selected	radio button not selected	radio button selected
2.	NORMA J. LITTICK/HENRY C. LITTICK	radio button selected	radio button not selected	radio button not selected

(e.) Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee or Permittee ?

radio button not selected Yes  
radio button selected 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.

[Enter Attribution Exemption Information]

**SECTION III - CERTIFICATION**

I certify that I am PRESIDENT

of SOUTHEASTERN OHIO BROADCASTING SYSTEM, INC.

(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 HENRY C. LITTICK	Date 05/27/2014
Telephone Number of Respondent (Include area code) 7405255431	

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**

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