

FEDERAL COMMUNICATIONS COMMISSION

Washington, D. C. 20554

MAR 27 2003

OFFICE OF
MANAGING DIRECTOR

William Roberts
General Manager
Fifth Estate Broadcasting, LLC
WHAN Radio
Post Office Box 148
Ashland, VA 23005

Re: WHAN Radio
Request for Waiver of FY 2002 Regulatory Fee
Fee Control No. 00000RROG-03-068

Dear Mr. Roberts:

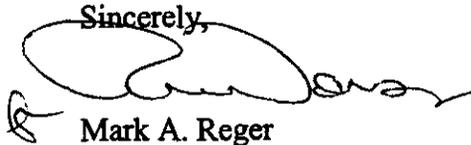
This is in response to your letter dated-stamped received September 19, 2002, filed on behalf of Station WHAN-AM for a waiver or reduction of the \$725.00 fiscal year (FY) 2002 regulatory fee on the basis of financial hardship.

In establishing a regulatory fee program, the Commission recognized that in certain instances payment of a regulatory fee may impose an undue financial hardship upon a licensee. The Commission therefore decided to grant waivers or reductions of its regulatory fees in those instances where a "petitioner presents a compelling case of financial hardship." *See Implementation of Section 9 of the Communications Act*, 9 FCC Rcd 5333, 5346 (1994), *recon. granted*, 10 FCC Rcd 12759 (1995). In reviewing a showing of financial hardship, the Commission relies upon a licensee's cash flow, as opposed to the entity's profits, and considers whether the station lacks sufficient funds to pay the regulatory fee and maintain service to the public. Thus, even if a station loses money, any funds paid to principals, deductions for depreciation or similar items are considered funds available to pay the fees.

You have submitted a copy of Station WHAN-AM's 2001 Internal Revenue Service Form 1065 ("U.S. Return of Partnership Income). These papers indicate that Station WHAN-AM suffered a financial loss in 2001 without regard to any deduction for amortization and depreciation. We therefore grant your request for a waiver of the \$725.00 FY 2002 regulatory fee.

If you have any questions concerning this matter, please contact the Revenue & Receivables Operations Group at (202) 418-1995.

Sincerely,



Mark A. Reger
Chief Financial Officer

00900R206-03-968

"Hanover's Own"



FCC/MELLON

SEP 19 2002

WAIVER
REQUEST

Federal Communications Commission
Regulatory Fees
P.O. Box 358835
Pittsburgh, PA
15251-5835

Dear Sir or Madam;

This letter is to request that WHAN's annual regulatory fee be reduced or waived. I am enclosing statements to show that WHAN's total sales in 2000 was just \$40,794. I therefore request a 'hardship status' be accorded to WHAN. We will be agreeable to a reduced fee since we would like to abide by the rules and regulations of the FCC and contribute our fair share. Hopefully, in the future, WHAN will be financially able to fully participate. Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in cursive script, appearing to read "William Roberts".

William Roberts
General Manager
Fifth Estate Broadcasting, LLC
WHAN-AM Radio

WHAN Radio
P.O. Box 148
Ashland, VA 23005

804.798.1010
804.798.7933 fax

RECEIVED JAN 06 2003

See separate instructions.

IRS use only — Do not write or staple in this space.

For calendar year 2001, or tax year beginning 2001, and ending 20 OMB No. 1545-0099

A Principal Business Activity BROADCASTING	Use the IRS label. Otherwise, print or type.	Name of Partnership FIFTH ESTATE BROADCASTING, LLC	D Employer Identification Number 54-1871679
B Principal Product or Service RADIO		Number, Street, and Room or Suite Number. If a P.O. Box, See Instructions. 11337 ASHCAKE ROAD	E Date Business Started 10/10/97
C Business Code Number 513000		City or Town State ZIP Code ASHLAND VA 23005	F Total Assets (see instrs) \$ 122,368

G Check applicable boxes: (1) Initial return (2) Final return (3) Name change (4) Address change (5) Amended return

H Check accounting method: (1) Cash (2) Accrual (3) Other (specify) _____

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year **4**

Caution: Include only trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

INCOME	1a Gross receipts or sales	1a	40,794.	1a	40,794.
	b Less returns and allowances	1b		1b	
	2 Cost of goods sold (Schedule A, line 8)	2		2	
	3 Gross profit. Subtract line 2 from line 1c	3		3	40,794.
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach schedule)	4		4	
	5 Net farm profit (loss) (attach Schedule F (Form 1040))	5		5	
	6 Net gain (loss) from Form 4797, Part II, line 18	6		6	
	7 Other income (loss) (attach schedule)	7		7	
8 Total income (loss). Combine lines 3 through 7	8		8	40,794.	
SEE INSTRUCTIONS FOR LIMITATIONS	9 Salaries and wages (other than to partners) (less employment credits)	9		9	13,805.
	10 Guaranteed payments to partners	10		10	
	11 Repairs and maintenance	11		11	1,415.
	12 Bad debts	12		12	
	13 Rent	13		13	
	14 Taxes and licenses	14		14	8,106.
	15 Interest	15		15	6,522.
	16a Depreciation (if required, attach Form 4562)	16a	8,082.	16a	
	b Less depreciation reported on Schedule A and elsewhere on return	16b		16b	8,082.
	17 Depletion (Do not deduct oil and gas depletion.)	17		17	
	18 Retirement plans, etc	18		18	
	19 Employee benefit programs	19		19	
	20 Other deductions (attach schedule) See Other deductions	20		20	24,786.
	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20	21		21	62,716.
22 Ordinary income (loss) from trade or business activities. Subtract line 21 from line 8	22		22	-21,922.	

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of General Partner or Limited Liability Company Member _____ Date _____

May the IRS discuss this return with this preparer shown below (see instrs)? Yes No

Paid Preparer's Use Only

Preparer's Signature _____ Date **09/16/02** Check if self-employed Preparer's SSN or PTIN **227-54-4793**

Firm's Name (or yours if self-employed) **James R. O'Brien, CPA** EIN **54-1250868**

Address, and ZIP Code **11231 Abingdon Court Richmond VA 232364311** Phone No. **(804) 794-4851**

Form 1065 (2001) FIFTH ESTATE BROADCASTING, LLC

54-1871679

Page 4

Analysis of Net Income (Loss)

1	Net income (loss). Combine Schedule K, lines 1 through 7 in column (b). From the result, subtract the sum of Schedule K, lines 8 through 11, 14a, 17g, and 18b	1	-21,972.				
2	Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt organization	(vi) Nominee/Other
a	General partners						
b	Limited partners		-16,534.				-5,438.

Schedule L Balance Sheets per Books (Not required if question 5 on Schedule B is answered 'Yes.')

Assets	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
1 Cash		1,304.		2,361.
2a Trade notes and accounts receivable				
b Less allowance for bad debts				
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (attach schedule) Ln. 6 Stmt		12,667.		12,687.
7 Mortgage and real estate loans				
8 Other investments (attach schedule)				
9a Buildings and other depreciable assets	123,760.		123,760.	
b Less accumulated depreciation	42,901.	80,859.	50,983.	72,777.
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)		26,250.		26,250.
12a Intangible assets (amortizable only)				
b Less accumulated amortization				
13 Other assets (attach schedule) Ln. 13 Stmt		14,325.		8,293.
14 Total assets		135,405.		122,368.
Liabilities and Capital				
15 Accounts payable				
16 Mortgages, notes, bonds payable in less than 1 year		5,978.		6,238.
17 Other current liabilities (attach sch) Ln. 17 Stmt		31,085.		45,745.
18 All nonrecourse loans				
19 Mortgages, notes, bonds payable in 1 year or more		64,398.		58,413.
20 Other liabilities (attach schedule)				
21 Partners' capital accounts		33,944.		11,972.
22 Total liabilities and capital		135,405.		122,368.

Schedule M-1 Reconciliation of Income (Loss) per Books with Income (Loss) per Return

(Not required if question 5 on Schedule B is answered 'Yes.')

1	Net income (loss) per books	-21,972.	6	Income recorded on books this year not included on Schedule K, lines 1 through 7 (itemize):	
2	Income included on Schedule K, lines 1 through 4, 6, and 7, not recorded on books this year (itemize):		a	Tax-exempt interest ... \$	
3	Guaranteed payments (other than health insurance)		7	Deductions included on Schedule K, lines 1 through 11, 14a, 17g, and 18b, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 11, 14a, 17g, and 18b (itemize):		a	Depreciation ... \$	
a	Depreciation ... \$		8	Add lines 6 and 7	
b	Travel and entertainment ... \$		9	Income (loss) (Analysis of net income (loss), line 1). Subtract line 8 from line 5	-21,972.
5	Add lines 1 through 4	-21,972.			

Schedule M-2 Analysis of Partners' Capital Accounts (Not required if question 5 on Schedule B is answered 'Yes.')

1	Balance at beginning of year	33,944.	6	Distributions: a Cash	
2	Capital contributed during year		b	Property	
3	Net income (loss) per books	-21,972.	7	Other decreases (itemize):	
4	Other increases (itemize):				
			8	Add lines 6 and 7	

