

(REFERENCE COPY - Not for submission)

FRN

0011007515

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000041892Submit Date:2018-02-12FRN:0011007515Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:02/12/2018Filing Status:Active

Section I - General Information

1. Respondent

Entity Name

Onda Capital, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2000 North 14th Street Suite 400	Arlington	VA	22201	+1 (703) 528- 5656	ezavala@zgsgroup. com

2. Contact Representative

Name	Organization
David M. Silverman, Esq.	Davis Wright Tremaine LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1919 Pennsylvania Ave., N.W. Suite 800	Washington	DC	20006- 3401	+1 (202) 973- 4261	DavidSilverman@dwt. com

3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	Yes
If this application is being submitted without a filing fee, Indicate reason for fee exemption.	Fee-Exempt Report

4. Nature of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Licensee		
Nature of Respondent	For-profit corporation		
(b) Provide the following information about this report:			
Purpose Biennial			

"As of" o	late
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50347

68490

10/01/2017

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.

DC

VA

DCA

LPD

5. Licensee(s) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

WZDC-CD

WZTD-LD

Licensee/Permittee Name			FRN	FRN		
Onda Capital, Inc.			0011	007515		
Fac. ID No.	Call Sign	City		State	Service	

WASHINGTON

RICHMOND

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	contracts and other instruments report. In addition, attributable Lo disclosed by the licensee of the l attributable JSA, or a network af Respondents, as well as License	nts that hold authorizations for one or more full power television, AM, and/or FM stations should list all instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this ttributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be nsee of the brokering station on its ownership report. If the agreement is an attributable LMA, an a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee ell as Licensee Respondents that only hold authorizations for Class A television and/or low power television ect "Not Applicable" in response to this question.		
2. Ownership Interests	generating a series of subforms. itself. If the Respondent is not a non-insulated members, and any standards set forth in 47 C.F.R. 3 or entities.) List each interest hol Leave the percentage of total as attributable interest in the Respo Section 73.3555, Note 2(i). In the case of vertical or indirect attributable interest in the Licens Entities that are part of an organ separate ownership reports. In s an attributable interest in the Licens	uestion requires Respondents to enter detailed information about ownership interests by . Answer each question on each subform. The first subform listing should be for the Respondent natural person, also list each of the officers, directors, stockholders, non-insulated partners, y other persons or entities with a direct attributable interest in the Respondent pursuant to the Section 73.3555. (A "direct" interest is one that is not held through any intervening companies older with a direct attributable interest in the Respondent separately. ssets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an ondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. t ownership structures, list only those interests in the Respondent that also represent an see(s) for which the report is being submitted. hizational structure that includes holding companies or other forms of indirect ownership must file such a structure do not report, or file a separate report for, any interest holder that does not have zensee(s) for which the report is being submitted.		
	Please see the Instructions for detailed information and guidance concerning this requirement.			
	Ownership Information			
	FRN	0011007515		
	Entity Name	Onda Capital, Inc.		
	Address	PO Box		
		Street 1	2000 North 14th Street	

	Street 2	Suite 400		
	City	Arlington		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	22201		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
nterest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 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 c report?	or more broadcast stations	No	

Ownership Information

FRN	0014110878			
Entity Name	ZGS Communications, Inc.			
Address	PO Box			
	Street 1	2000 North 14th Street		
	Street 2	Suite 400		
	City	Arlington		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	22201		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	100.0%		
	Total assets (Equity Debt Plus)	100.0%		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

Yes

Ownership Information				
FRN	0019990555	0019990555		
Name	Ronald Gordon			
Address	ddress PO Box			
	Street 1	2000 North 14th Street		
	Street 2	Suite 400		
	City	Arlington		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	22201		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0% Jointly Held? No		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stationsYesthat do not appear on this report?				

Ownership Information

FRN	0019990571		
Name	Eduardo Zavala		
Address	PO Box		
	Street 1	2000 North 14th Street	
	Street 2	Suite 400	
	City	Arlington	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	22201	

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations		more broadcast stations	Yes

Ownership Information

that do not appear on this report?

Ownership Information				
FRN	0019990589			
Name	Peter Housman			
Address	PO Box			
	Street 1	2000 North 14th Street		
	Street 2	Suite 400		
	City	Arlington		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	22201		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

Yes

Ownership Information			
FRN	0019990522		
Name	Ericka Johnson		
Address	PO Box		
	Street 1	2000 North 14th Street	
	Street 2	Suite 400	
	City	Arlington	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	22201	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
Total assets (Equity Debt0.0%Plus)			
Does interest holder have an attributable interest in one or more broadcast stationsYesthat do not appear on this report?			
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.If "No," submit as an exhibit an explanation.Yes			

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?	No
If "Yes," provide information describing the interest(s), using	
EITHER the subform OR the spreadsheet option below.	
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.	
If using the subform, 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	
newspaper entity solely on the basis of the Commission's	
Equity Debt Plus attribution standard, 47 C.F.R. Section	
73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA"	
into the percentage of total assets (Equity Debt Plus) field	
for an interest holder unless that interest holder has an	
attributable interest in the newspaper entity solely on the	
basis of the Commission's Equity Debt Plus attribution	
standard.	
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.	

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If " <u>Yes</u> ," 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.	

3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

File Name	Uploaded By	Attachment Type	Description
ZGS Communications, Inc. PPT Ownership Chart 4849-	Applicant	Ownership	ZGS Communications, Inc.
1406-7262 v.1.pdf		Chart	Ownership Chart

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: President Exact Legal Title or Name of Respondent: ZGS Communications, Inc., Parent Company Name: Eduardo A. Zavala Phone: 7035285656 02/12/2018