

(REFERENCE COPY - Not for submission)

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Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000040083Submit Date:2018-01-11FRN:0026672691Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:01/11/2018Filing Status:Active

Section I - General Information

1. Respondent

Entity Name

0026672691		Ichthus Outread	h Ministries, LLC			
Street Address	City (and Coun address)	try if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
558 Moss Creek Lane	Leslie		AR	72645	+1 (870) 447- 3178	wayne@kcgsam. com

2. Contact Representative

Name		Orga	anization		
Donald Martin		Don	ald E. Martir	n, P.C.	
			Zin		
Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 8433	Falls Church	VA	22041	+1 (703) 642-2344	dempc@prodigy.net

3. Application Filing Fee

Question

Is this application being submitted without a filing fee?

Response No

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	1	95	\$70.00
			-	*	Total	\$70.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
Nature of Respondent	Limited liability company

(b) Provide the following information about this report:

Purpose	Biennial
"As of" date	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.

5. Licensee(s) and Station(s)

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

Ichthus Outreach Ministries, LLC 0026672691	Licensee/Permittee Name	FRN
	Ichthus Outreach Ministries, LLC	0026672691

Fac. ID No.	Call Sign	City	State	Service
56054	KCGS	MARSHALL	AR	АМ

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Document Information				
Description of contract or instrument	Articles of Organization			
Parties to contract or instrument	Internal			
Date of execution	03/2017			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Entity organizational document			

(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, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

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 Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

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 a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

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.

Ownership Information				
FRN	0026672691	0026672691		
Entity Name	Ichthus Outreach Ministries, LLC			
Address	PO Box			
	Street 1	558 Moss Creek Lane		
	Street 2			
	City	Leslie		
	State ("NA" if non-U.S. address)	AR		
	Zip/Postal Code	72645		
	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			
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 stations No that do not appear on this report?			

Ownership Information

Ownership Information

Address	PO Box	
Name	Carl Mayes	
FRN	0026760561	

	Street 1	273 Tringle Trail		
	Street 2			
	City	Leslie		
	State ("NA" if non-U.S. address)	AR		
	Zip/Postal Code	72645		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)				
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	Voting	25.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	25.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one or report?	r more broadcast stations	No	

Ownership Information				
FRN	0026760603	0026760603 Dottie Mayes		
Name	Dottie Mayes			
Address	PO Box			
	Street 1	273 Triangle Trail		
	Street 2			
	City	Leslie		
	State ("NA" if non-U.S. address)	AR		
	Zip/Postal Code	72645		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, LC/LLC/PLLC Membe	r		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		

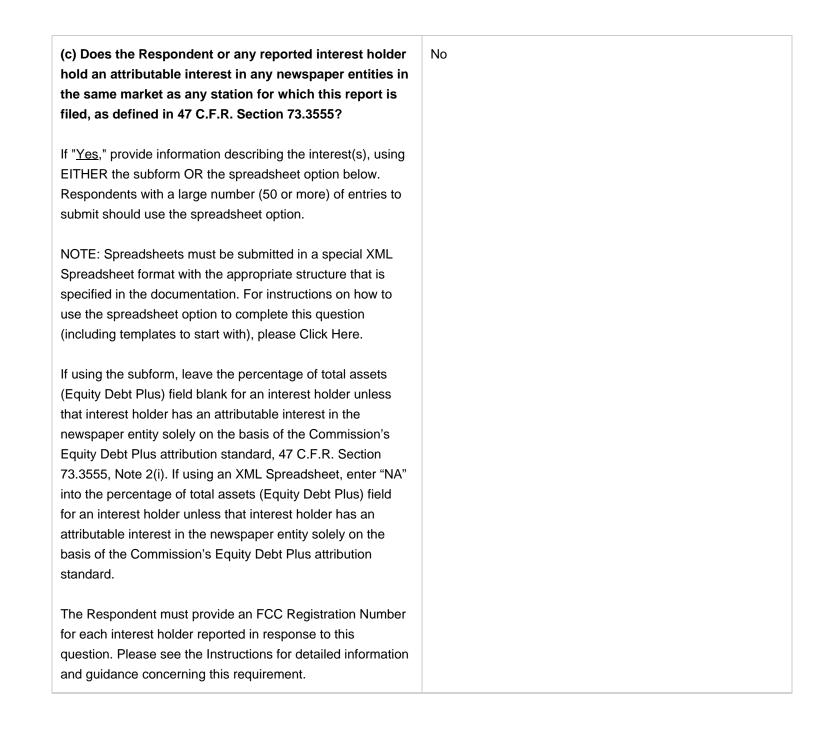
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	25.0%	Jointly Held? No
	Equity	25.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information			
FRN	0026760637		
Name	Wayne Witcher		
Address	PO Box		
	Street 1	558 Moss Creek Lane	
	Street 2		
	City	Leslie	
	State ("NA" if non-U.S. address)	AR	
	Zip/Postal Code	72645	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
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	Voting	25.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	25.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No

Ownership Information			
FRN	0026760629		
Name	Carol Ann Witcher		
Address	PO Box		
	Street 1	558 Moss Creek Lane	

	Street 2		
	City	Leslie	
	State ("NA" if non-U.S. address)	AR	
	Zip/Postal Code	72645	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, LC/LLC/PLLC Member		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	25.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	25.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?		No	
(b) Respondent certifies that any interests, including equity, financial, or voting Yes interests, not reported in this filing are non-attributable.			Yes

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



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

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

FRN	0026760637	Name	Wayne Witcher
FRN	0026760629	Name	Carol Ann Witcher
Relationship	Spouses		

Family Relationships

Family Relationships

FRN	0026760561	Name	Carl Mayes
FRN	0026760603	Name	Dottie Mayes
Relationship	Spouses		

(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
OWNERSHIP STRUCTURE.docx	Applicant	Ownership Chart	Ownership Structure

Section III - Certification

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: Member Exact Legal Title or Name of Respondent: Ichthus Outreach Ministries, LLC Name: Wayne Witcher Phone: 8704473178 01/11/2018