

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000037008Submit Date:2018-01-02FRN:0024120958Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:01/02/2018Filing Status:Active

Section I - General Information

1. Respondent

 FRN
 Entity Name

 0024120958
 Globecasting, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
5734 S McKinney Ave	Globe	AZ	85501	+1 (610) 640- 6400	rollye@kqss. net

2. Contact Representative

Name	Organization
Rollye Cornell	Globecasting, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
5734 S McKinney Ave	Globe	AZ	85501	+1 (610) 640-6400	rollye@kqss.net

3. Application Filing Fee

Question	Response	
Is this application being submitted without a filing fee?	No	

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	2	95	\$140.00
		'		,	Total	\$140.00

4. Nature of Respondent

(a) Provide the following information about the Responden	nt:
Relationship to stations/permits	Licensee
Nature of Respondent	For-profit corporation

(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):

Li	censee/Permittee Name	FRN
G	Blobecasting, Inc.	0024120958

Fac. ID No.	Call Sign	City	State	Service
24161	KJAA	GLOBE	AZ	AM
72510	KQSS	MIAMI	AZ	FM

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 Incorporation		
Parties to contract or instrument	State of Arizona		
Date of execution	03/2014		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation		

Document Information			
Description of contract or instrument	By-Laws		
Parties to contract or instrument	Globecasting, Inc.		
Date of execution	04/2014		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: By-Laws		

2. Ownership Interests

(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	0024120958			
Entity Name	Globecasting, Inc.			
Address	PO Box			
	Street 1	5734 S McKinney Ave		
	Street 2			
	City	Globe		
	State ("NA" if non-U.S. address)	AZ		
	Zip/Postal Code	85501		
	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 from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	

Ownership Information

	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
s interest holder have an attributable interest in one or more broadcast stations		more broadcast stations	No

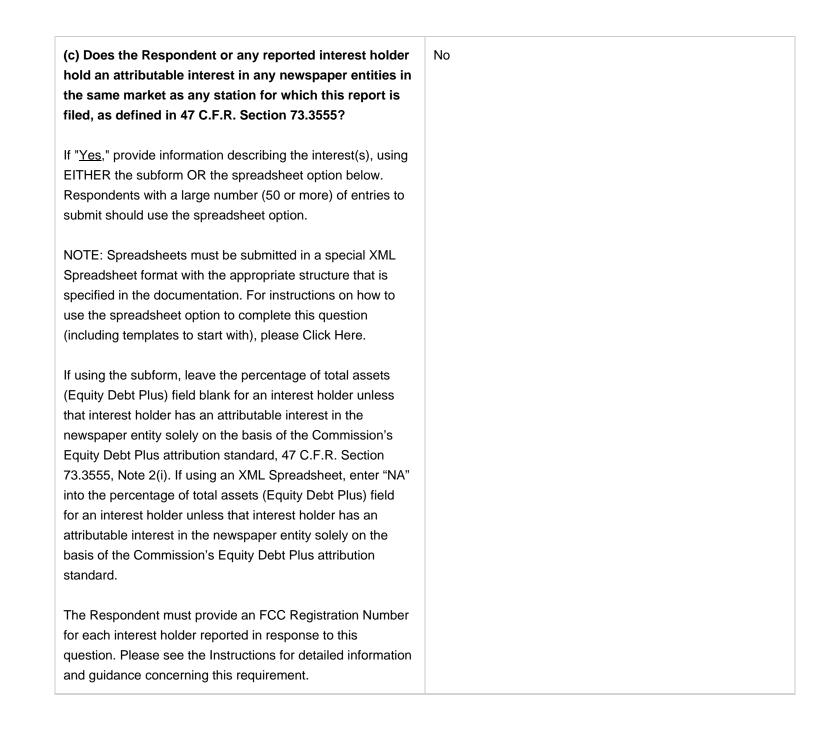
Does interest holder have an attributable interest in one or more broadcast static
that do not appear on this report?

Ownership Information			
FRN	0024120966		
Name	Rollye Cornell		
Address	PO Box		
	Street 1	5734 S McKinney Ave	
	Street 2		
	City	Globe	
	State ("NA" if non-U.S. address)	AZ	
	Zip/Postal Code	85501	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder		
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	50.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	50.0%	
	Total assets (Equity Debt Plus)	50.0%	
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	0024120982	
Name	Jon Cornell	
Address	PO Box	
	Street 1	5734 S McKinney Ave
	Street 2	
	City	Globe

	State ("NA" if non-U.S. address)	AZ	
	Zip/Postal Code	85501	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	50.0%	
	Total assets (Equity Debt Plus)	50.0%	
Does interest holder have that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No
	nat any interests, including equi his filing are non-attributable. an explanation.	ity, financial, or voting	Yes



(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.

Comily Deletionshine

raminy kelationships			
FRN	0024120966	Name	Rollye Cornell
FRN	0024120982	Name	Jon Cornell
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.

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: President Exact Legal Title or Name of Respondent: Globecasting, Inc. Name: Rollye Cornell Phone: 6106406400 12/31/2017