



(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial  
Ownership Report (FCC Form 323-E)

File Number: 0000043506 | Submit Date: 2018-02-26 | FRN: 0007694904

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 02/26/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0007694904		L.C. Orrick Outreach, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 1147	SEALY	TX	77474	+1 (832) 368-5119	MANAGER@KQLCFM.ORG

2. Contact Representative

Name		Organization			
Brad C. Deutsch		Garvey Schubert Barer			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac Street NW Suite 200	Washington	DC	20007	+1 (202) 965-7880	BDEUTSCH@GSBLAW.COM

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:

Relationship to stations/permits	Licensee
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?	No

(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):

Licensee/Permittee Name	FRN
L.C. Orrick Outreach, Inc.	0007694904

Fac. ID No.	Call Sign	City	State	Service
93045	KQLC	SEALY	TX	FM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select “Other.” Non-Licensee Respondents 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 TEXAS
Date of execution	10/1979
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> ARTICLES OF INCORPORATION

Document Information	
Description of contract or instrument	BY-LAWS
Parties to contract or instrument	L.C. ORRICK OUTREACH, INC.
Date of execution	12/2015
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> 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, members of the governing board (or other governing entity), stockholders, 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	0007694904	
Entity Name	L.C. Orrick Outreach, Inc.	
Address	PO Box	1147
	Street 1	
	Street 2	
	City	SEALY
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77474
	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%
	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?		No

Ownership Information		
FRN	9990119840	
Name	ROBERT H. LUTON	
Address	PO Box	
	Street 1	2730 MANILA LN
	Street 2	
	City	HOUSTON,
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77043
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - President and Chairperson of the BoardMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Cleric	

By Whom Appointed or Elected	Board of Trustees	
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 from 0.0 to 100.0)	Voting	11.1%
	Equity	0.0%
	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	9990119841	
Name	DONNA SCHLITT	
Address	PO Box	
	Street 1	102 PECAN GROVE
	Street 2	#317
	City	HOUSTON
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77077
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - VICE-PRESIDENT AND TRUSTEEMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	RETIRED	
By Whom Appointed or Elected	BOARD OF TRUSTEES	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	Equity	0.0%
	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
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Ownership Information		
FRN	9990119842	
Name	JOHN E. WARREN	
Address	PO Box	
	Street 1	4907 WOODWAY
	Street 2	
	City	ORANGE
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77630
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - VICE-PRESIDENT AND TRUSTEEMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	CLERIC	
By Whom Appointed or Elected	BOARD OF TRUSTEES	
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 from 0.0 to 100.0)	Voting	11.1%
	Equity	0.0%
	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	9990119843	
Name	MICHAEL BEDEVIAN	
Address	PO Box	
	Street 1	600 Texas Highway 155
	Street 2	
	City	Linden

	<b>State ("NA" if non-U.S. address)</b>	TX
	<b>Zip/Postal Code</b>	75563
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Other - VICE-PRESIDENT, SECRETARY, AND TRUSTEEMember of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	CLERIC	
<b>By Whom Appointed or Elected</b>	BOARD OF TRUSTEES	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Male
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

Ownership Information		
<b>FRN</b>	9990119844	
<b>Name</b>	KARL J. SCHLITT	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	8058 LANI BLUE LANE
	<b>Street 2</b>	
	<b>City</b>	HOUSTON
	<b>State ("NA" if non-U.S. address)</b>	TX
	<b>Zip/Postal Code</b>	77040
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Other - VICE PRESIDENT, TREASURER, AND TRUSTEEMember of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	BUSINESS PERSON	
<b>By Whom Appointed or Elected</b>	BOARD OF TRUSTEES	

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 from 0.0 to 100.0)	Voting	11.1%
	Equity	0.0%
	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	9990119845	
Name	JAMES BELL	
Address	PO Box	
	Street 1	35307 PONTIAC DRIVE
	Street 2	
	City	BROOKSHIRE
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77423
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - VICE-PRESIDENT AND TRUSTEEMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	CLERIC	
By Whom Appointed or Elected	BOARD OF TRUSTEES	
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 from 0.0 to 100.0)	Voting	11.1%
	Equity	0.0%
	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	9990119846	
Name	EDWIN GUERRA,	
Address	PO Box	
	Street 1	22407 BUCKTROUT LN
	Street 2	
	City	KATY
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77449
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - VICE-PRESIDENT AND TRUSTEEMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	CLERIC	
By Whom Appointed or Elected	BOARD OF TRUSTEES	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	Equity	0.0%
	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	9990119847	
Name	HAROLD GUERRA	
Address	PO Box	
	Street 1	7930 FEATHER SPRINGS DR
	Street 2	
	City	HOUSTON
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77095



	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - VICE PRESIDENT AND TRUSTEEMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	CLERIC	
By Whom Appointed or Elected	BOARD OF TRUSTEES	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	Equity	0.0%
	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	9990119848	
Name	JAMES B. LILES	
Address	PO Box	
	Street 1	4430 BAGPIPE LN
	Street 2	
	City	HOUSTON
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77084
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - VICE-PRESIDENT AND TRUSTEEMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	RETIRED	
By Whom Appointed or Elected	BOARD OF TRUSTEES	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male

	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

<b>(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.</b> If "No," submit as an exhibit an explanation.	Yes
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<b>(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b>  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.	No
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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.

Licensee has no parent entity.

Section III - Certification

Certification

Section	Question	Response
<b>Authorized Party to Sign</b>	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).	
<b>Certification</b>	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: <b>PRESIDENT</b> Exact Legal Title or Name of Respondent: <b>L.C. ORRICK OUTREACH, INC.</b> Name: <b>ROBERT H LUTON</b> Phone: <b>8323685119</b>  02/24/2018

