

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000040359** Submit Date: **2018-01-18** FRN: **0007393200**

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/18/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0007393200	MOR Media, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
400 Tower Drive	Paragould	AR	72450	+1 (870) 236- 7627	dina@momediainc.

2. Contact Representative

Name	Organization
Dina Louise Mason, Mrs.	Corporation

Street	City (and Country if non U.S.		Zip		
Address	address)	State	Code	Phone	Email
400 Tower Drive	Paragould	AR	72450	+1 (870) 236- 7627	dina@mormediainc.

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respondent	t:
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees
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)

Licensee/Permittee Name	FRN	
MOR Media, Inc.	0007393200	

Fac. ID No.	Call Sign	City	State	Service
59150	KDRS-FM	PARAGOULD	AR	FM
59151	KDRS	PARAGOULD	AR	AM

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.

Not Applicable.

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	0007393200	
Entity Name	MOR Media, Inc.	
Address	РО Вох	
	Street 1	400 Tower Drive
	Street 2	
	City	Paragould
	State ("NA" if non-U.S. address)	AR
	Zip/Postal Code	72450
	Country (if non-U.S. address)	United States

Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
(enter percentage values from 0.0 to 100.0) Equation Total Control Co	Voting	0.0%	Jointly Held? No	
	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 creport?	or more broadcast stations	No	

Ownership Information				
FRN	0020014254			
Name	Dina L. Mason			
Address	PO Box			
	Street 1	169 Greene 528 Road		
	Street 2			
	City	Marmaduke		
	State ("NA" if non-U.S. address)	AR		
	Zip/Postal Code	72443	72443	
	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	White		
Interest Percentages (enter percentage values	Voting	56.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	56.0%		
	Total assets (Equity Debt Plus)	56.0%		
	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		
FRN	0020014221		

Name	Brian K. Osborn	Brian K. Osborn		
Address	РО Вох			
	Street 1	4400 Prince Drive		
	Street 2			
	City	Paragould		
	State ("NA" if non-U.S. address)	AR		
	Zip/Postal Code	72450		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
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	44.0%	Jointly Held? No	
	Equity	44.0%		
	Total assets (Equity Debt Plus)	44.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No	
	hat any interests, including equit	ty, financial, or voting	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?

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.

No

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

No

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 "Yes," 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.

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: Dina L Mason Name: Dina Louise Mason Phone: 8702367627
		01/18/2018