

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000044209** Submit Date: **2018-02-27** FRN: **0003730595**

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/27/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0003730595	KCTA

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1602 S Brownlee Blvd	Corpus Christi	TX	78404- 3134	+1 (361) 882- 7711	debrakcta@mygrande. net

2. Contact Representative

Name	Organization
William D. York, III.	Broadcasting Corporation of the Southwest

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1602 S Brownlee Blvd	Corpus Christi	TX	78404- 3134	+1 (361) 882- 7711	debrakcta@mygrande. 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	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	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):

Licensee/Permittee Name	FRN
КСТА	0003730595

Fac. ID No.	Call Sign	City	State	Service
7093	KCTA	CORPUS CHRISTI	TX	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.

Document Information		
Description of contract or instrument	Articles of Incorporation	
Parties to contract or instrument	Texas/Officers/Shareholders	
Date of execution	07/1959	
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	Bylaws
Parties to contract or instrument	Officers/Shareholders
Date of execution	08/1959
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Bylaws

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	0003730595		
Entity Name	КСТА		
Address	РО Вох		
	Street 1	1602 S Brownlee Blvd	
	Street 2		
	City	City Corpus Christi	
	State ("NA" if non-U.S. TX address)		
	Zip/Postal Code	Zip/Postal Code 78404-3134	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent	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 (Equi	ty Debt 0.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or more broadcast station	s No

Ownership Information				
FRN	9990051436			
Name	Joshua Williams			
Address	РО Вох			
	Street 1	2119 Baybreeze		
	Street 2			
	City	Portland		
	State ("NA" if non-U.S. TX address) Zip/Postal Code 78374			
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder			
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	5.0% Jointly Held?		
from 0.0 to 100.0)	Equity	5.0%		
	Total assets (Equity Debt Plus)	5.0%		
Does interest holder have a	nn attributable interest in one o	r more broadcast stations	No	

Ownership Information		
FRN	9990124247	
Name	W D. York, III.	
Address	PO Box Street 1 3710 Castle View Circle Street 2	
	City	Corpus Christi
	State ("NA" if non-U.S. TX address)	
		'

	Zip/Postal Code	78410	
	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 Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	31.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	31.0%	
	Total assets (Equity Debt Plus)	31.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information				
FRN	9990124248			
Name	Rhonda York			
Address	РО Вох			
	Street 1	3710 Castle View Circle		
	Street 2			
	City	Corpus Christi		
	State ("NA" if non-U.S. address)	TX		
Zip/Postal Code 78410		78410	78410	
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	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	4.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	4.0%		

Total assets (Equity Debt Plus)	4.0%	
Does interest holder have an attributable interest in one of that do not appear on this report?	r more broadcast stations	No

Ownership Information				
FRN	9990124249			
Name	Ashlyn York			
Address	РО Вох			
	Street 1	13534 Port Royal Crt		
	Street 2			
	City	Corpus Christi	Corpus Christi	
	State ("NA" if non-U.S. address)			
	Zip/Postal Code 78418			
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	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	6.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	6.0%		
	Total assets (Equity Debt Plus)	t 6.0%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No	

Ownership Information				
FRN	9990124250	9990124250		
Name	Gracie Dinsdale	Gracie Dinsdale		
Address	РО Вох	PO Box		
	Street 1	2805 Tumbleweed		
	Street 2			
	City	Corpus Christi		
	State ("NA" if non-U.S. address)	TX		
		·		

	Zip/Postal Code	78410	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	3.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	3.0%	
	Total assets (Equity Debt Plus)	3.0%	
Does interest holder have that do not appear on this	an attributable interest in one or	or more broadcast stations	No

Ownership Information				
FRN	9990124344			
Name	Trey Williams			
Address	РО Вох			
	Street 1	200 Trinity		
	Street 2			
	City	Portland		
	State ("NA" if non-U.S. address)	TX		
	Zip/Postal Code	78374		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder			
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	4.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	4.0%		

Total assets (Equity Debt Plus)	4.0%	
Does interest holder have an attributable interest in one of that do not appear on this report?	r more broadcast stations	No

Ownership Information			
FRN	9990124345		
Name	Jordan Davis		
Address	PO Box		
	Street 1	200 Trinity	
	Street 2		
	City	Portland	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	78374	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
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	2.0%	Jointly Held? No
	Equity	2.0%	
	Total assets (Equity Debt Plus)	2.0%	
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	9990124346	9990124346	
Name	Julie Ann York Martin	Julie Ann York Martin	
Address	PO Box		
	Street 1	5580 S. Franklin St.	
	Street 2		
	City	Greenwood Village	
	State ("NA" if non-U.S. address)	СО	
		<u> </u>	

	Zip/Postal Code	80121	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
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	14.0%	Jointly Held? No
	Equity	14.0%	
	Total assets (Equity Debt Plus)	14.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990124347		
Name	Tammi Renee York Mager		
Address	РО Вох		
	Street 1	10447 Stonewillow	
	Street 2		
	City	Parker	
	State ("NA" if non-U.S. address)	СО	
	Zip/Postal Code	80134	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	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	22.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	22.0%	

	Total assets (Equity Debt Plus)	22.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

FRN	0000124348		
		9990124348	
Name	Mitzi Aaron Beal		
Address	РО Вох		
	Street 1	2673 Cedar Bayou Lynchebe	erg
	Street 2		
	City	Baytown	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77521	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	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	7.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	7.0%	
	Total assets (Equity Debt Plus)	7.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No
	at any interests, including equi- nis filing are non-attributable. an explanation.	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.

(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

No

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)?

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.

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.

Broadcasting Corporation of the Southwest

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: KCTA Name: William Dell York , III. Phone: 3618827711