

(REFERENCE COPY - Not for submission)

FRN

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000043869 Submit Date: 2018-02-26 FRN: 0019963545 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/26/2018 Filing Status: Active

Section I - General Information

1. Respondent

Entity Name

0019963545		The A. Thor	nomas Quinn Revocable Trust				
Street Address	City (and Count S. address)	ry if non U.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email	

Address	S. address)	address)	Code	Phone	Email
961 Matley Lane Suite 120	Reno	NV	89502	+1 (775) 829- 1964	tquinn@renomediagroup. com

2. Contact Representative

Name	Organization		
Dennis P. Corbett	Telecommunications Law Professionals PLLC		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1025 Connecticut Ave NW Suite 1011	Washington	DC	20036	+1 (202) 789- 3115	dcorbett@telecomlawpros. com

3. Application

Not Applicable

Filing Fee

4. Nature of Respondent

(a) Provide the following information about the Respondent:					
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	Other Revocable Trust				

(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):

icensee/Permitte		FRI	FRN		
Reno Media Group, L.P.			000	08042418	
Fac. ID No.	Call Sign	City		State	Service
2103	KODS	CARNELIAN BAY		СА	FM
Licensee/Permitte	ee Name			FRN	
Americom Limited	Partnership			0006058333	
Fac. ID No.	Call Sign	City		State	Service
202	KSGG	RENO		NV	AM
204	KRNO	INCLINE VILLAGE		NV	FM
41884	KLCA	TAHOE CITY		CA	FM
48684	KBZZ	SPARKS		NV	AM
53706	KOLC	CARSON CITY		NV	FM

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all 1. 47 C.F.R. 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 Section 73.3613 report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be and Other disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an **Documents** 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. (a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by 2. Ownership generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent Interests 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	0019963545					
Entity Name	The A. Thomas Quinn Revocable Trust					
Address	PO Box					
	Street 1	961 Matley Lane	961 Matley Lane			
	Street 2	Suite 120	Suite 120			
	City	Reno	Reno			
	State ("NA" if non-U.S. address)	NV				
	Zip/Postal Code	89502				
	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 i	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 a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No			

Ownership Information					
FRN	0019961887	0019961887			
Name	A. Thomas Quinn				
Address	PO Box				
	Street 1	961 Matley Lane			
	Street 2	Suite 120			
	City	Reno			
	State ("NA" if non-U.S. address)	NV			
	Zip/Postal Code	89502			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Other - Voting Trustee				
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	100.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	100.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No
	nat any interests, including equin his filing are non-attributable. an explanation.	ty, financial, or voting	Yes
hold an attributable interest the same market as any st filed, as defined in 47 C.F.I If "Yes," provide information EITHER the subform OR the Respondents with a large nu submit should use the spread NOTE: Spreadsheets must b Spreadsheet format with the specified in the documentation use the spreadsheet option to (including templates to start) If using the subform, leave th (Equity Debt Plus) field bland that interest holder has an at newspaper entity solely on th Equity Debt Plus attribution at 73.3555, Note 2(i). If using at into the percentage of total at for an interest holder unless	describing the interest(s), using e spreadsheet option below. umber (50 or more) of entries to dsheet option. be submitted in a special XML appropriate structure that is on. For instructions on how to to complete this question with), please Click Here. he percentage of total assets k for an interest holder unless ttributable interest in the he basis of the Commission's standard, 47 C.F.R. Section an XML Spreadsheet, enter "NA" assets (Equity Debt Plus) field that interest holder has an ewspaper entity solely on the	No	
for each interest holder repo	tructions for detailed information		

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

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)?NoIf "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.No

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: Trustee Exact Legal Title or Name of Respondent: A. Thomas Quinn Revocable Trust Name: A Thomas Quinn Phone: 7758291964 02/26/2018