

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000047049Submit Date:2018-03-02FRN:0003770245Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:03/02/2018Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name
0020022166	The Langston Family, L.L.C.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
683 East Main Street	Rochester	NY	14605	+1 (585) 262- 2050	Andre@wdkx. com

2. Contact Representative

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Name	Organization
Mark N. Lipp	Fletcher, Heald & Hildreth, P.L.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812-0445	lipp@fhhlaw.com

3. Application Filing Fee

Not Applicable

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	Limited liability company	

(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.

icensee/Permittee Name FRN					
Monroe County Broadcastin	Monroe County Broadcasting Co. Ltd 0003770245				
Fac. ID No.	Call Sign	City	State	Service	
43540	WDKX	ROCHESTER	NY	FM	

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	contracts and other instruments report. In addition, attributable L disclosed by the licensee of the attributable JSA, or a network at Respondents, as well as License	authorizations for one or more full power television, AM, and/or FM stations should list all set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this ocal Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be brokering station on its ownership report. If the agreement is an attributable LMA, an filiation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee ee Respondents that only hold authorizations for Class A television and/or low power television icable" in response to this question.		
	Not Applicable.			
2. Ownership Interests (a) Ownership Interests. This Question requires Respondents to enter detailed information about ow generating a series of subforms. Answer each question on each subform. The first subform listing s itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders non-insulated members, and any other persons or entities with a direct attributable interest in the Re- standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through a or entities.) List each interest holder with a direct attributable interest in the Respondent separately.			subform. The first subform listing should be for the Respondent the officers, directors, stockholders, non-insulated partners, a direct attributable interest in the Respondent pursuant to the rest is one that is not held through any intervening companies	
			nk for an interest holder unless that interest holder has an Commission's Equity Debt Plus attribution standard, 47 C.F.R.	
	In the case of vertical or indirect attributable interest in the Licens		nose interests in the Respondent that also represent an ng submitted.	
	Entities that are part of an organizational structure that includes holding companies or other forms of indirect separate ownership reports. In such a structure do not report, or file a separate report for, any interest holde an attributable interest in the Licensee(s) for which the report is being submitted.			
	Please see the Instructions for f	urther detail concerning interests	s that must be reported in response to this question.	
	The Respondent must provide a Please see the Instructions for c	-	each interest holder reported in response to this question. e concerning this requirement.	
	Ownership Information			
	FRN	0020022166		
	Entity Name	The Langston Family, L.L.C.		
	Address	PO Box		
		Street 1	683 East Main Street	
		Street 2		
		City	Rochester	
		State ("NA" if non-U.S. address)	NY	
		Zip/Postal Code	14605	
		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
	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

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FRN	0020017265	0020017265		
Name	Gloria M. Langston			
Address	PO Box			
	Street 1	2505 East Avenue		
	Street 2			
	City	Rochester		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	14610		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	3.2%		
	Total assets (Equity Debt Plus)	0.0%		
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	0020017331	
Name	Andre M. Langston	

Address	PO Box			
	Street 1	1715 Clover Street		
	Street 2			
	City	Rochester		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	14618		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Equity	86.2%		
	Total assets (Equity Debt Plus)	0.0%		

Ownership Information

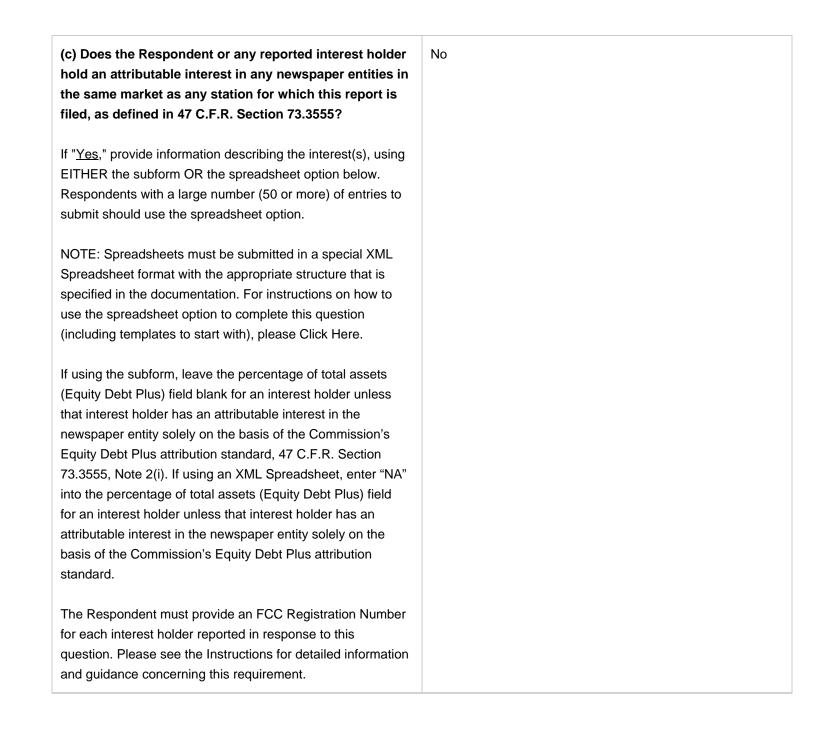
FRN	0021678149	
Entity Name	Credit Shelter Trust	
Address	PO Box	
	Street 1	683 E. Main Street
	Street 2	
	City	Rochester
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14605
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	LC/LLC/PLLC Member	
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	100.0% Jointly Held? No	
	Equity	8.1%	
	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

Ownership Information				
FRN	0027302413			
Name	Andrea M. Langston			
Address	PO Box			
	Street 1	683 E. Main Street		
	Street 2			
	City	Rochester		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	14605		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Equity	2.4%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No	
(b) Respondent certifies th	at any interests, including equi	ity financial or voting	Yes	

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	



(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.

Family Relationships			
FRN	0020017331	Name	Andre M Langston
FRN	0027302413	Name	Andrea M Langston
Relationship	Parent/Child		

Family Relationships

FRN	0020017265	Name	Gloria M Langston
FRN	0020017331	Name	Andre M Langston
Relationship	Parent/Child		

(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.

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: Member Exact Legal Title or Name of Respondent: The Langston Family, L.L.C. Name: Andre Langston Phone: 5852622050 03/02/2018