

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000045839Submit Date:2018-03-01FRN:0004999066Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:03/01/2018Filing Status:Active

Section I - General Information

1. Respondent

FRN Entity Name 0004999066 Vision Communications, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
5431 WEST SUNSHINE	BROOKLINE STATION	МО	65619	+1 (417) 831- 0995	rcavision@gmail. com

2. Contact Representative

Name	Organization
MICHAEL W. RICHARDS	LAW OFFICE OF MICHAEL W RICHARDS LC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 5852	TAKOMA PARK	MD	20913- 5852	+1 (202) 657- 5780	michael@michaelrichards. us

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	3	95	\$210.00
		·	•	•	Total	\$210.00

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
Vision Communications, Inc.	0004999066

Fac. ID No.	Call Sign	City	State	Service
10345	KKLO	LEAVENWORTH	KS	AM
34563	KICK	SPRINGFIELD	МО	АМ
60709	KADI-FM	REPUBLIC	МО	FM

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	STATE OF MISSOURI	
Date of execution	04/1994	
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	VISION COMMUNICATIONS, INCORPORATED	
Date of execution	04/1994	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: BYLAWS	

Document Information

Description of contract or instrument	STOCK PLEDGE AGREEMENT
Parties to contract or instrument	OLD MISSOURI BANK
Date of execution	05/2015
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: STOCK PLEDGE AGREEMENT

Document Information

Description of contract or instrument	SECURITY AGREEMENT
Parties to contract or instrument	OLD MISSOURI BANK
Date of execution	05/2015
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: SECURITY AGREEMENT

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	0004999066		
Entity Name	Vision Communications, Inc.		
Address	PO Box		
	Street 1 5431 WEST SUNSHINE		
	Street 2		
	City	BROOKLINE STATION	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	65619	
	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	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 that do not appear on this	have an attributable interest in one or more broadcast stations No		

Ownership Information		
FRN	0019272293	
Name	RYLAND C. AMER JR	
Address	PO Box	
	Street 1	5431 WEST SUNSHINE
	Street 2	
	City	BROOKLINE STATION
	State ("NA" if non-U.S. address)	МО
	Zip/Postal Code	65619
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Director, Stockholder	
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	100.0%	Jointly Held? Yes	
	Equity	100.0%		
	Total assets (Equity Debt Plus)	100.0%		
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	0019272400	0019272400		
Name	KAREN A. AMER			
Address	PO Box) Box		
	Street 1	5431 WEST SUNSHINE		
	Street 2			
	City	BROOKLINE STATION		
	State ("NA" if non-U.S. address)	МО		
	Zip/Postal Code	65619		
	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	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	Jointly Held? Yes	
	Equity	100.0%		
	Total assets (Equity Debt Plus)	100.0%		
Does interest holder have that do not appear on this	an attributable interest in one or report?	r more broadcast stations	No	

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

(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 "<u>Yes</u>," 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) 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 Yes or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

raining Relationships			
FRN	0019272400	Name	KAREN A AMER
FRN	0019272293	Name	RYLAND C AMER JR
Relationship	Spouses		

Family Relationships

(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.

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
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: R.C. Amer Name: RC Amer Phone: 4178310995 03/01/2018