

FRN

# **Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)**

File Number: 0000165207 Submit Date: 2021-10-29 FRN: 0015090467 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 10/29/2021 Filing Status: Active

## **Section I - General Information**

#### 1. Respondent

**Entity Name** 

0019265461 Brazos Valley		Communications GP, LLC				
Street Address	City (and Count address)	ry if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1240 East Villa Maria Road	Bryan		тх	77802	+1 (979) 776- 1240	TOMMY@VASCOCU. COM

### 2. Contact Representative

Name	Organization
Kathleen Kirby	Wiley Rein LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1776 K Street, NW	Washington	DC	20006	+1 (202) 719-3360	kkirby@wiley.law

#### 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	10/01/2021
	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.

Licensee/Permittee Na	me		FRN	
Brazos Valley Communications, Ltd.			0015090467	
Fac. ID No.	Call Sign	City	State	Service
57802	КВХТ	WIXON VALLEY	тх	FM
57803	KAPN	CALDWELL	тх	FM
62002	КТАМ	BRYAN	тх	AM
62003	KORA-FM	BRYAN	ТХ	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.

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.

FRN	0019265461		
Entity Name	Brazos Valley Communications GP, LLC		
Address	PO Box		
	Street 1	1240 East Villa Maria Road	
	Street 2		
	City	Bryan	
	State ("NA" if non-U.S. address)	ТХ	
	Zip/Postal Code	77802	

#### **Ownership Information**

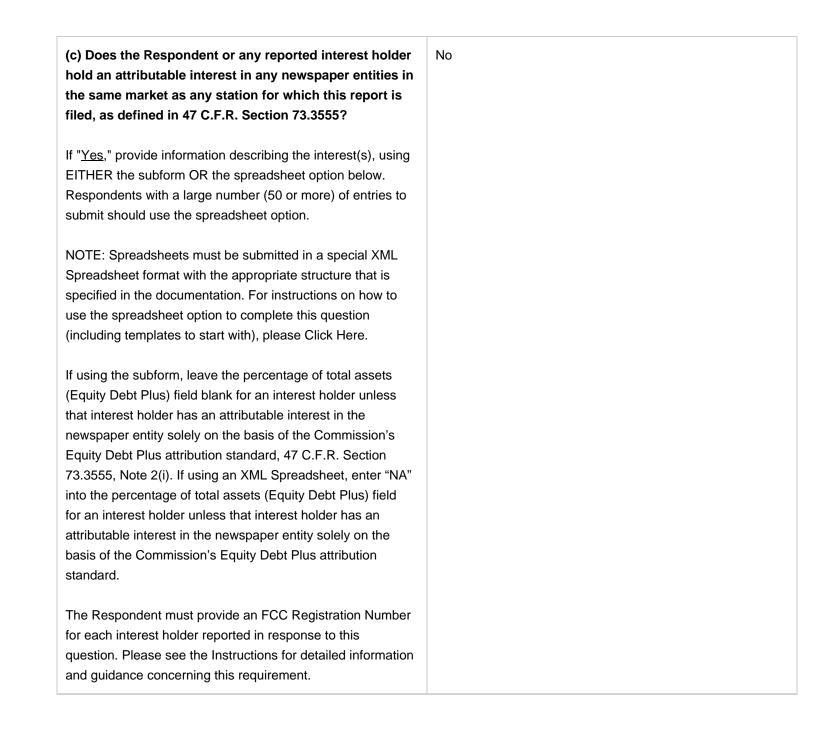
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have ar	n attributable interest in one or	more broadcast stations	No	

Ownership Information					
FRN	0009930207				
Name	Tommy R. Vascocu	Tommy R. Vascocu			
Address	PO Box	5311			
	Street 1				
	Street 2				
	City	Austin			
	State ("NA" if non-U.S. address)	ТХ			
	Zip/Postal Code	78763			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member, Othe	LC/LLC/PLLC Member, Other - Sole Manager			
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	50.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	50.0%			
	Total assets (Equity Debt Plus)				
Does interest holder have	an attributable interest in one	or more broadcast stations	Yes		

that do not appear on this report?

that do not appear on this report?

FRN	0019271899			
Name	Elizabeth L. Young			
Address	PO Box	5311		
	Street 1			
	Street 2			
	City	Austin		
	State ("NA" if non-U.S. address)	ТХ		
	Zip/Postal Code	78763		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (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	White		
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	50.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this r	n attributable interest in one of eport?	r more broadcast stations	Yes	
	at any interests, including equit is filing are non-attributable. In explanation.	y, financial, or voting	Yes	



(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.

FRN	0009930207	Name	Tommy R Vascocu
FRN	0019271899	Name	Elizabeth L Young
Relationship	Spouses		

(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

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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: <b>Sole Manager</b> Exact Legal Title or Name of Respondent: <b>Brazos Valley Communications GP, LLC</b> Name: <b>Tommy R. Vascocu</b> Phone: <b>9797761240</b> 10/29/2021