

FRN

Not Applicable

# Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number:0000230468Submit Date:2023-12-01FRN:0015145915Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:12/01/2023Filing Status:Active

## **Section I - General Information**

#### 1. Respondent

Entity Name

0015145915		Hispanic Chris	tian Communications			
Street Address	City (and Count address)	try if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
7 West US Hwy 87	Smiley		тх	78140	+1 (210) 687- 3121	oasisradio. tv@gmail.com

#### 2. Contact Representative

Name	Organization
James E. Price, III.	Sterling Communications, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 1877	LaFayette	GA	30728	+1 (423) 903- 3565	sterlingjamesp@gmail. com

#### 3. Application Filing Fee

4. Control of Respondent

(a) Provide the following information about the Respondent:					
Relationship to stations/permits	Licensee				
Is the Respondent's governing board (or other governing entity) directly or No indirectly under the control of another entity?					
(b) Provide the following information	on about this report:				
Purpose Biennial					
'As of" date 10/01/2023					

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 Name			FRN	
Hispanic Christian Communications				5
Fac. ID No.	Call Sign	City	State	Service
93531	KSXT	SMILEY	ТХ	FM

# Section II – Biennial Ownership Information

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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Documents Respondents 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, members of the governing board (or other governing entity), stockholders, 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 0015145915 Entity Name **Hispanic Christian Communications** 

Address	PO Box	
	Street 1	7 West US Hwy 87
	Street 2	
	City	Smiley
	State ("NA" if non-U.S. address)	ТХ
	Zip/Postal Code	78140
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
<b>Positional Interests</b> (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%		
	Equity	0.0%		
	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	9990121366				
Name	Gloria Ballesteros				
Address	PO Box				
	Street 1	7 West US Hwy 87			
	Street 2				
	City	Smiley			
	State ("NA" if non-U.S. address)	тх			
	Zip/Postal Code	78140			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)				
Principal Profession or Occupation	Businesswoman				
By Whom Appointed or Elected	Board				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Female			
Persons Only)	Ethnicity	Hispanic or Latino			
	Race	White			
Interest Percentages	Voting	33.3%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
	Total assets (Equity Debt Plus)				
Does interest holder have a that do not appear on this re	n attributable interest in one of eport?	more broadcast stations	No		

# Ownership Information FRN 9990136915 Name Carlos Ballesteros

Address	PO Box				
	Street 1	7 West US Hwy 87			
	Street 2				
	City	Smiley			
	State ("NA" if non-U.S. address)	ТХ			
	Zip/Postal Code	78140			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)				
Principal Profession or Occupation	Businessman				
By Whom Appointed or Elected	Board				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Hispanic or Latino			
	Race	White			
Interest Percentages	Voting	33.3%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
	Total assets (Equity Debt Plus)				

Ownership Information				
FRN	9990140100			
Name	Marjorie Rodriguez			
Address	PO Box			
	Street 1	7 West US Hwy 87		
	Street 2			
	City	Smiley		
	State ("NA" if non-U.S. address)	ТХ		
	Zip/Postal Code	78140		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			

Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)				
Principal Profession or Occupation	Businesswoman				
By Whom Appointed or Elected	Board				
Citizenship, Gender,	Citizenship	US	US		
Ethnicity, and Race Information (Natural	Gender	Female			
Persons Only)	Ethnicity	Hispanic or Latino	Hispanic or Latino		
	Race	White			
Interest Percentages	Voting	33.3%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
	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 equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes		
(c) Is Respondent seeking	an attribution exemption for an	y officer or director with	No		
duties wholly unrelated to	the Licensee(s)?				
If " <u>Yes</u> ," complete the inform	ation in the required fields and su				

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.

Licensee has no parent entity

### **Section III - Certification**

<b>A</b> 4161 41	
1 'Artiticatia	n
Certificatio	

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: <b>President</b> Exact Legal Title or Name of Respondent: <b>Hispanic Christian Communications</b> Name: <b>Carlos Ballesteros</b> Phone: <b>2104246428</b> 12/01/2023