

(REFERENCE COPY - Not for submission)

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

File Number: **0000048338** | Submit Date: **2018-03-06** | FRN: **0022410377** 

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 03/06/2018

Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN	Entity Name
0022410377	Cloudcroft Broadcasting Corporation

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3001 N. Florida Ave.	Alamogordo	NM	88310	+1 (575) 430- 8159	bflotte@hotmail.

### 2. Contact Representative

Name	Organization
Barry D. Wood	Wood & Maines, PC

Street City (and Country if non U.S.		Zip			
Address	address)	State	Code	Phone	Email
3300 Fairfax Dr., Suite 202	Arlington	VA	22201	+1 (703) 465- 2361	wood@legalcompass.

### 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	1	95	\$70.00
				Total	\$70.00

### 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	
Cloudcroft Broadcasting Corporation	0022410377	

Fac. ID No.	Call Sign	City	State	Service
191499	KTMN	CLOUDCROFT	NM	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 New Mexico		
Date of execution	02/2013		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation		

### 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	0022410377			
Entity Name	Cloudcroft Broadcasting Corp	oration		
Address	РО Вох			
	Street 1	3001 N. Florida Ave.		
	Street 2			
	City	Alamogordo		
	State ("NA" if non-U.S. address)	NM		
	Zip/Postal Code	88310		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	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	an attributable interest in one creport?	or more broadcast stations	No	

Ownership Information			
FRN	9990103989		
Name	Robert Flotte		
Address	РО Вох		

	Street 1	3001 N. Florida Ave.	
	Street 2		
	City	Alamogordo	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code 88310		
	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	Male	
Persons Only)	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)	100.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information				
FRN	0027312958	0027312958		
Name	Matthew Flotte			
Address	РО Вох	1377		
	Street 1			
	Street 2			
	City	Cloudcroft		
	State ("NA" if non-U.S. address)			
	Zip/Postal Code	88317		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director	Officer, Director		
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 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?		r more broadcast stations	Yes

FRN       0027312933         Name       Susan Maynez         Address         PO Box         Street 1       3002 Lookout Ridge Drive         Street 2         City       Las Cruces         State ("NA" if non-U.S. address)         Zip/Postal Code       88011         Country (if non-U.S. address)       United States         Positional Interests (check all that apply)       Officer, Director         Citizenship, Gender, Ethnicity, and Race (Information (Natural Persons Only)       Citizenship       US         Gender       Female         Ethnicity       Not Hispanic or Latino         Race       White         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%	Ownership Information				
Address    PO Box	FRN	0027312933	0027312933		
Street 1 3002 Lookout Ridge Drive  Street 2  City Las Cruces  State ("NA" if non-U.S. address)  Zip/Postal Code 88011  Country (if non-U.S. address)  United States  Listing Type Other Interest Holder  Positional Interests (check all that apply)  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Ethnicity Not Hispanic or Latino  Race White  Voting 0.0%  Equity 0.0%  Total assets (Equity Debt Plus)  Diving 0.0%	Name	Susan Maynez			
Street 2  City Las Cruces  State ("NA" if non-U.S. address)  Zip/Postal Code 88011  Country (if non-U.S. address)  United States  Country (if non-U.S. address)  Citizensting Type  Other Interest Holder  Positional Interests (check all that apply)  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Ethnicity Not Hispanic or Latino  Race White  Voting  Voting  O.0%  Equity  O.0%  Total assets (Equity Debt Plus)	Address	PO Box			
City Las Cruces  State ("NA" if non-U.S. address)  Zip/Postal Code 88011  Country (if non-U.S. address)  United States  Country (if non-U.S. address)  Other Interest Holder  Positional Interests (check all that apply)  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Ethnicity Not Hispanic or Latino  Race White  Voting 0.0%  Jointly Held? No  Equity 0.0%  Total assets (Equity Debt Plus)  OMM		Street 1	3002 Lookout Ridge Drive		
State ("NA" if non-U.S. address)  Zip/Postal Code  88011  Country (if non-U.S. address)  United States  United States  United States  United States  Citizenst Holder  Officer, Director  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Ethnicity  Race  White  Voting  US  Gender  Female  Ethnicity  Not Hispanic or Latino  Race  White  Voting  0.0%  Jointly Held?  No  Fquity  O.0%  Total assets (Equity Debt Plus)  O.0%		Street 2			
address)  Zip/Postal Code 88011  Country (if non-U.S. address)  United States  Citizenst Holder  Officer, Director  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Ethnicity Not Hispanic or Latino  Race White  Voting 0.0%  Equity 0.0%  Total assets (Equity Debt Plus)		City	Las Cruces		
Country (if non-U.S. address)  United States  Country (if non-U.S. address)  Other Interest Holder  Officer, Director  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Ethnicity  Race  White  Voting  On%  Jointly Held? No Held? No Held? No Hold assets (Equity Debt Plus)		· ·	address)		
Address)  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Citizenst Percentages (enter percentages (enter percentage values from 0.0 to 100.0)  Equity  Citizenship  Citizenship  US  Gender  Female  Female  Ethnicity  Not Hispanic or Latino  White  Voting  0.0%  Jointly Held?  No  Total assets (Equity Debt Plus)  0.0%		Zip/Postal Code			
Positional Interests (check all that apply)  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Ethnicity  Race  White  Voting  Voting  Citizenship  US  Female  Ethnicity  Not Hispanic or Latino  Race  White  Voting  Jointly Held?  No  Equity  Total assets (Equity Debt Plus)  Director					
(check all that apply)  Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)  Ethnicity Race  White  Voting  Citizenship US  Gender Female  Ethnicity Not Hispanic or Latino  White  Voting  Jointly Held? No  Equity  Total assets (Equity Debt Plus)  O.0%	Listing Type	Other Interest Holder			
Ethnicity, and Race Information (Natural Persons Only)  Ethnicity  Race  White  Voting  Outline Percentages (enter percentage values from 0.0 to 100.0)  Equity  Total assets (Equity Debt Plus)  Persons Only)  Female  Not Hispanic or Latino  Jointly Held? No  Outline  Jointly Held? No  Outline  Outli		Officer, Director			
Persons Only   Ethnicity   Not Hispanic or Latino	-	Citizenship	US		
Ethnicity  Race  White  Interest Percentages (enter percentage values from 0.0 to 100.0)  Equity  Total assets (Equity Debt Plus)  Not Hispanic or Latino  White  Jointly Held? No  10.0%  Jointly Held? No  0.0%	Information (Natural	Gender	Female		
Interest Percentages (enter percentage values from 0.0 to 100.0)  Equity  Total assets (Equity Debt Plus)  O.0%  Jointly Held? No  0.0%	Persons Only)	Ethnicity	Not Hispanic or Latino		
(enter percentage values from 0.0 to 100.0)  Equity  0.0%  Total assets (Equity Debt Plus)  0.0%		Race	White		
Total assets (Equity Debt Plus)  0.0%  0.0%	(enter percentage values	Voting			
Plus)	rom 0.0 to 100.0)	Equity	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations  Yes					
that do not appear on this report?			r more broadcast stations	Yes	

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 "Yes," 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 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.

No

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?

Yes

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

Family Relationships				
FRN	9990103989	Name	Robert Flotte	
FRN	0027312958	Name	Matthew Flotte	
Relationship	Parent/Child			

Family Relationships				
FRN	9990103989	Name	Robert Flotte	
FRN	0027312933	Name	Susan Maynez	
Relationship	Parent/Child			

Family Relationships			
FRN	0027312958	Name	Matthew Flotte
FRN	0027312933	Name	Susan Maynez
Relationship	Siblings		

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
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.

File Name	Uploaded By	Attachment Type	Description
OWNERSHIP STRUCTURE - Cloudcroft Broadcasting Corporation.  docx	Applicant	Ownership Chart	Ownership Chart

### **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: <b>President</b> Exact Legal Title or Name of Respondent: <b>Cloudcroft Broadcasting Corporation</b> Name: <b>Robert Flotte</b> Phone: <b>5074345000</b> 03/06/2018