

#### (REFERENCE COPY - Not for submission)

FRN

Not Applicable

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

 File Number:
 0000104493
 Submit Date:
 2020-01-31
 FRN:
 0007465404

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/31/2020

 Filing Status:
 Active
 Status:
 Status Date:
 01/31/2020

# **Section I - General Information**

### 1. Respondent

# Entity Name

0016055949	LKCM Radio Investors II GP, LP

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
301 Commerce Street Suite 1600	Fort Worth	тх	76102	+1 (817) 332-3235	LICENSE@THERANCHRADIO. COM

## 2. Contact Representative

Name	Organization
Karyn K. Ablin	Fletcher, Heald & Hildreth

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) 812-0400	ablin@fhhlaw.com

## 3. Application Filing Fee

# 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 partnership		

#### (b) Provide the following information about this report:

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Purpose	Biennial	
"As of" date	10/01/2019	
	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.	

#### Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name				FRN	
LKCM Radio Group, LP			0007465404		
Fac. ID No.	Call Sign	City	Sta	ite	Service
855	KXPN-FM	SCOTLAND	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.				
2. Ownership Interests	<ul> <li>(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 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 pursuant to the attributable interest in the Respondent separately.</li> <li>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).</li> <li>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.</li> <li>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.</li> <li>Please see the Instructions for further detail concerning interests that must be reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.</li> </ul>				
	Ownership Information				
	FRN	0016055949			
	Entity Name	LKCM Radio Investors II GP,	LP		
	Address	PO Box			
		Street 1	301 Commerce Street		
		Street 2	Suite 1600		
		City	Fort Worth		
	State ("NA" if non-U.S. TX address)				
		Zip/Postal Code 76102			
		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	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 an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information				
FRN	0020019584			
Entity Name	LKCM RADIO INVESTORS GP, INC.			
Address	PO Box			
	Street 1	301 COMMERCE STREET		
	Street 2	Suite 1600		
	City	Fort Worth		
	State ("NA" if non-U.S. address)	ТХ		
	Zip/Postal Code	76102		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	General Partner			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal n	ation or Tribal entity		
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)			
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?				

Ownership Information			
FRN	0029175718		
Name	J Luther King		
Address	PO Box		
	Street 1	301 COMMERCE STREET	

	Street 2	Suite 1600		
	City	Fort Worth		
	State ("NA" if non-U.S. address)	ТХ		
	Zip/Postal Code	76201		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Officer			
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	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	Yes	

<b>Ownership In</b>	formation
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FRN	0029175734		
Name	J Bryan King		
Address	PO Box		
	Street 1 301 COMMERCE STREET		
	Street 2 Suite 1600		
	City Fort Worth		
	State ("NA" if non-U.S.     TX       address)     TX		
	Zip/Postal Code 76102		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural			
Persons Only)			
	Race White		

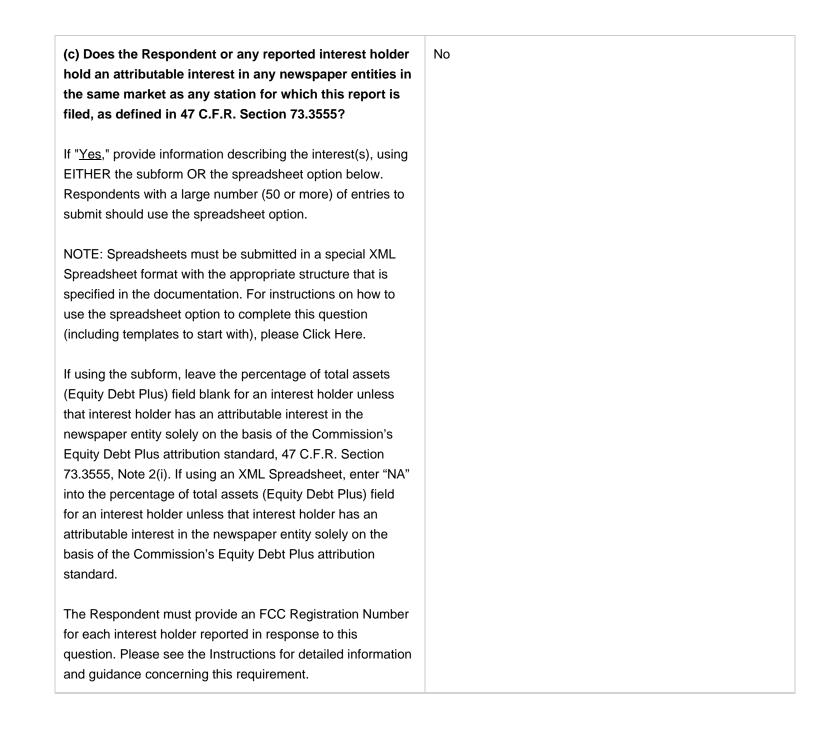
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes		

#### **Ownership Information**

Ownership Information				
FRN	0029175759	0029175759		
Name	Michael Bornitz			
Address	PO Box			
	Street 1	301 COMMERCE STREET		
	Street 2			
	City	Fort Worth		
	State ("NA" if non-U.S. TX address)			
	Zip/Postal Code	Zip/Postal Code 76102		
	Country (if non-U.S.     United States       address)     United States			
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Officer			
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	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	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?				

Ownership Information				
FRN	0029175775			
Name	Jacob Smith			
Address	PO Box			
	Street 1	301 COMMERCE STREET		
	Street 2			

	City	Fort Worth	
	State ("NA" if non-U.S. address)	ТХ	
	Zip/Postal Code	76102	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer		
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	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	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?			Yes
(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.			



(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	0029175718	Name	J Luther King
FRN	0029175734	Name	J Bryan King
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	

Certification

attributed an interest

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>Manager</b> Exact Legal Title or Name of Respondent: <b>LKCM Radio Investors II GP, LP</b> Name: <b>Michael Bornitz</b> Phone: <b>8173323235</b> 01/31/2020