

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000225541** Submit Date: **2023-11-09** FRN: **0007265937**

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/09/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0007265937	L.M. Communications, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
401 West Main Street	Lexington	KY	40507	+1 (859) 233- 1515	Imartin@Imcomm.

2. Contact Representative

Name		Organization	
	Sally A. Buckman, Esq.	Lerman Senter PLLC	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2001 L Street, NW Suite 400	Washington	DC	20036	+1 (202) 429- 8970	sbuckman@lermansenter.

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	\$285.00
				Total	\$285.00

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	10/01/2023		
	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.		

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN
L.M. Communications, Inc.	0007265937

Fac. ID No.	Call Sign	City	State	Service
36114	WLXG	LEXINGTON	KY	AM
36140	WGKS	PARIS	KY	FM
43861	WCDA	VERSAILLES	KY	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	KENTUCKY		
Date of execution	02/2001		
Date of expiration	No expiration date		

Agreement type	Other
(check all that apply)	Agreement Type: ARTICLES OF INCORPORATION

Document Information			
Description of contract or instrument	BYLAWS		
Parties to contract or instrument	L.M. COMMUNICATIONS, INC.		
Date of execution	02/2001		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: BYLAWS		

Document Information		
Description of contract or instrument	LOAN AGREEMENT	
Parties to contract or instrument	LYNN M. MARTIN AND REPUBLIC BANK & TRUST COMPANY	
Date of execution	06/2013	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: LOAN AGREEMENT	

Document Information		
Description of contract or instrument	SECURITY AGREEMENT	
Parties to contract or instrument	L.M. COMMUNICATIONS, INC. AND REPUBLIC BANK & TRUST COMPANY	
Date of execution	06/2013	
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	0007265937	0007265937	
Entity Name	L.M. Communications, Inc.		
Address	PO Box		
	Street 1	401 West Main Street	
	Street 2		
	City	Lexington	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40507	
	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		
(enter percentage values from 0.0 to 100.0) Equit	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	0007276918	0007276918	
Name	Lynn M. Martin	Lynn M. Martin	
Address	PO Box		
	Street 1	401 WEST MAIN STREET	
	Street 2	SUITE 301 - VICTORIAN SQUARE	
	City	LEXINGTON	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40507	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Director, Stockholder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race	Gender	Male	

Information (Natural 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 Plus)	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?		Yes	
• • •	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) 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?

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

(d) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

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
L M Communications Org Chart.pdf	Applicant	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	Official Title: President

and that to the best of my knowledge and belief, all statements in this report are true, correct and complete. Exact Legal Title or Name of Respondent: **L.M. Communications, Inc.**

Name: Lynn M. Martin Phone: 8592331515

11/09/2023