

(REFERENCE COPY - Not for submission)

FRN

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000222922Submit Date:2023-10-13FRN:0019158195Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:10/13/2023Filing Status:Active

Section I - General Information

1. Respondent

Entity Name

0019563584	Madison Leann Bushman Special Trust

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
700 North Grant Street, Sixth Floor	ODESSA	ТХ	79761	+1 (432) 563-9102	MARKS@ICABROADCASTING. COM

2. Contact Representative

Name	Organization
Barry Marks	Investment Corporation of America

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
700 North Grant Street, Sixth Floor	ODESSA	тх	79761	+1 (432) 563- 9102	marks@icabroadcasting. com

3. Application Filing Fee

4. Nature of 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	Other
	Special Trust

(b) Provide the following information about this report:

Purpose

Not Applicable

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	
ICA Radio, LTD.			0019158195	
Fac. ID No.	Call Sign	City	State	Service
5393	KAJE	INGLESIDE	ТХ	FM
9667	KCRS-FM	MIDLAND	ТХ	FM
12151	KKPN	ROCKPORT	ТХ	FM
21419	KFZX	GARDENDALE	ТХ	FM
41856	KMRK-FM	ODESSA	ТХ	FM
42015	KCRS	MIDLAND	ТХ	AM
60801	кснх	MIDLAND	ТХ	FM
78383	KPUS	GREGORY	ТХ	FM
149509	K248AR	MIDLAND	ТХ	FX
155720	K238AZ	ODESSA	ТХ	FX

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.

Ownership Information				
FRN	0019563584	0019563584		
Entity Name	Madison Leann Bushman Sp	Madison Leann Bushman Special Trust		
Address	PO Box	οχ		
	Street 1	700 North Grant Street, Sixth Floor		
	Street 2			
	City	ODESSA		
	State ("NA" if non-U.S. address)	ТХ		
	Zip/Postal Code	79761		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent	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 c report?	or more broadcast stations	No	

Ownership Information

Ownership information				
FRN	0019430222			
Name	Jeffrey D. Bushman			
Address	PO Box			
	Street 1	700 North Grant Street, Sixth Floor		
	Street 2			
	City	ODESSA		
	State ("NA" if non-U.S. address)	ТХ		
	Zip/Postal Code	79761		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			

Positional Interests (check all that apply)	Other - TRUSTEE OF MADIS	ON LEANN BUSHMAN SPECIAL TRUST		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Male		
	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	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an that do not appear on this re	n attributable interest in one o port?	r more broadcast stations	Νο	

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	

(c) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No 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)?	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

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: Authorized Agent Exact Legal Title or Name of Respondent: Madison Leann Bushman Special Trust Name: Barry Marks Phone: 4326647777 10/13/2023