Response

No



Federal Communications Commission (REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000222974Submit Date:2023-10-13FRN:0027863620Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:10/13/2023Filing Status:Active

Section I - General Information

1. Respondent

FRN Entity Name 0027863620 CHRISTIAN TELEVISION OF LAS VEGAS INC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 6922	Clearwater	FL	33758	+1 (727) 535- 5622	stephanieo@ctnonline. com

2. Contact Representative

Name	Organization		
Joseph C. Chautin III	Hardy, Carey, Chautin & Balkin, LLP		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1080 WEST CAUSEWAY APPROACH	Mandeville	LA	70471	+1 (985) 629- 0777	jchautin@hardycarey. com

3. Application Filing Fee

Question

Is this application being submitted without a filing fee?

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
					Total	

4. Nature of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Licensee			
Nature of Respondent	Not-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	FRN	FRN		
CHRISTIAN TELEV	002	7863620		
Fac. ID No.	Call Sign	City	State	Service
10498	KEEN-CD	LAS VEGAS	NV	DCA

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.

RN	0027863620				
Entity Name	CHRISTIAN TELEVISION OF LAS VEGAS INC				
Address	PO Box	6922			
	Street 1				
	Street 2				
	City	Clearwater			
	State ("NA" if non-U.S. address)	FL			
	Zip/Postal Code	33758			
	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			
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%			

Ownership Information

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FRN	0027788355		
Name	Phil Driscoll		
Address	ess PO Box		
	Street 1	856 Mason Road	
	Street 2		
	City	Monroe	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	45050	
	Country (if non-U.S. address)	United States	

Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Director				
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	25.0%	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 o	or more broadcast stations	Yes		

Ownership Information						
FRN	0019245695	0019245695				
Name	Wayne Wetzel					
Address	PO Box	6922				
	Street 1					
	Street 2					
	City	Clearwater				
	State ("NA" if non-U.S. address)	FL				
	Zip/Postal Code	33758				
	Country (if non-U.S. address)	United States				
Listing Type	Other Interest Holder					
Positional Interests (check all that apply)	Officer	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	25.0% 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	r more broadcast stations	Yes			

Ownership Information						
FRN	0019245752	0019245752				
Name	Robert D'Andrea, Jr.					
Address	PO Box	6922				
	Street 1					
	Street 2					
	City	Clearwater				
	State ("NA" if non-U.S. address)	FL				
	Zip/Postal Code	33758				
	Country (if non-U.S. United States address) United States					
Listing Type	Other Interest Holder	Other Interest Holder				
Positional Interests (check all that apply)	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	Voting	25.0%	Jointly Held? No			
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 r	n attributable interest in one o eport?	r more broadcast stations	Yes			

Ownership	o Information
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Ownership Information		
FRN	0031889934	
Name	Yolanda Morris	
Address	PO Box 6922	
	Street 1	
	Street 2	
	City	Clearwater
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33758
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	25.0%	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 that do not appear on this report?			Yes
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(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 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	0031889934	Name	Yolanda Morris
FRN	0019245752	Name	Robert D'Andrea , Jr .
Relationship	Siblings		

(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.	

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

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: President Exact Legal Title or Name of Respondent: CHRISTIAN TELEVISION OF LAS VEGAS, INC. Name: Yolanda Morris Phone: 7275355622 10/13/2023