

FRN

Not Applicable

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

File Number:0000222914Submit 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

0019565837 ICA Broadcasting, LLC

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

(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 liability company	

(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
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	АМ
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

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

1.47 C.F.R.

and Other

Documents

Section 73.3613

(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	0019565837				
Entity Name	ICA Broadcasting, LLC				
Address	PO Box				
	Street 1	700 North Grant Street, Sixth I	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				
<b>Positional Interests</b> (check all that apply)	Respondent				
Tribal Nation or Tribal Entity	Interest holder is not a Tribal ı	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?			No		

Ownership Information			
FRN	0019430214		
Name	John M. 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	·	
<b>Positional Interests</b> (check all that apply)	Officer, Other - CHAIRMAN		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	

	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	64.8% Jointly Held? No		
	Equity	64.8%		
	Total assets (Equity Debt Plus)			
Does interest holder have	an attributable interest in one c	r more broadcast stations	No	

that do not appear on this report?

## **Ownership Information**

Ownership information			
FRN	0019859081		
Entity Name	DJK, INC.		
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)	LC/LLC/PLLC Member		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	35.1%	Jointly Held? No
from 0.0 to 100.0)	Equity 35.1%		
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

#### **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)	LC/LLC/PLLC Member		
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	0.1%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.1%	
	Total assets (Equity Debt Plus)		

Ownership Information				
FRN	0019430248			
Name	Bradley J. 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)	LC/LLC/PLLC Member			
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)Voting0.1%		0.1%	Jointly Held? No	

	Equity	0.1%	
	Total assets (Equity Debt Plus)		
Does interest holder have an	attributable interest in one or	more broadcast stations	No

#### **Ownership Information** 0019430263 FRN Name Jason K. Bushman Address **PO Box** Street 1 700 North Grant Street, Sixth Floor Street 2 ODESSA City State ("NA" if non-U.S. ТΧ address) 79761 **Zip/Postal Code** Country (if non-U.S. **United States** address) Other Interest Holder Listing Type LC/LLC/PLLC Member **Positional Interests** (check all that apply) Citizenship, Gender, US Citizenship Ethnicity, and Race Gender Male Information (Natural Persons Only) Ethnicity Not Hispanic or Latino Race White **Interest Percentages** Voting 0.1% **Jointly Held?** (enter percentage values No from 0.0 to 100.0) Equity 0.1% Total assets (Equity Debt Plus) Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?

#### **Ownership Information**

FRN	0019931666	
Name	Edward B. Lasater	
Address	PO Box	
	Street 1	11 Maravilla Circle
	Street 2	
	City	Odessa

	State ("NA" if non-U.S. address)	ТХ	
	Zip/Postal Code	79765	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - MANAGER		
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)		

Ownership Information				
FRN	0019859057			
Name	JOAN M. BISHOP			
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)	Officer, Other - MANAGER			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
Race White		White		
Interest Percentages Voting		0.0%	Jointly Held? No	
	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	No

Ownership Information				
FRN	0023143498			
Name	Christopher A. Rose			
Address	PO Box			
	Street 1	700 North Grant Street, Sixth F	loor	
	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)	Officer, Other - MANAGER			
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 No that do not appear on this report?				

## **Ownership Information**

FRN	0029032034	
Name	LUCY MORALES	
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			
<b>Positional Interests</b> (check all that apply)	Officer, Other - MANAGER			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	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 a that do not appear on this i	an attributable interest in one or report?	r more broadcast stations	No	

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.	Yes
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	0019430214	Name	John M Bushman	
FRN	0019430248	Name	Bradley J Bushman	
Relationship	Parent/Child			

#### Family Relationships

FRN	0019430222	Name	Jeffrey D Bushman
FRN	0019430248	Name	Bradley J Bushman
Relationship	Siblings		

## Family Relationships

FRN	0019430222	Name	Jeffrey D Bushman
FRN	0019430263	Name	Jason K Bushman
Relationship	Siblings		

Family Relationships			
FRN	0019430214	Name	John M Bushman
FRN	0019430222	Name	Jeffrey D Bushman
Relationship	Parent/Child		

## Family Relationships

FRN	0019430214	Name	John M Bushman
FRN	0019430263	Name	Jason K Bushman
Relationship	Parent/Child		

#### **Family Relationships**

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FRN	0019430248	Name	Bradley J Bushman
FRN	0019430263	Name	Jason K Bushman
Relationship	Siblings		

No

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

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.

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>Authorized Agent</b> Exact Legal Title or Name of Respondent: <b>ICA</b> <b>Broadcasting, LLC</b> Name: <b>Barry Marks</b> Phone: <b>4326647777</b> 10/13/2023