

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000224083 | Submit Date: 2023-10-27 | FRN: 0007599046

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 10/27/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN Entity Name		Entity Name
	0007599046	Tacoma Broadcasters, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 31000	Spokane	WA	99223	+1 (509) 443- 1000	acn@qwestoffice.

2. Contact Representative

Name		Organization	
	Mary O'Connor	Wilkinson Barker Knauer, LLP	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, N.W. Suite 800N	Washington	DC	20036	+1 (202) 383- 3351	moconnor@wbklaw.

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	2	95	\$190.00
				Total	\$190.00

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
Tacoma Broadcasters, Inc.	0007599046

Fac. ID No.	Call Sign	City	State	Service
68158	KTAC	EPHRATA	WA	FM
68159	КТВІ	EPHRATA	WA	AM

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 (fka TRMR, Inc.)			
Parties to contract or instrument	State of Washington			
Date of execution	05/1982			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation			

Document Information				
Description of contract or instrument	Articles of Amendment			
Parties to contract or instrument	State of Washington			
Date of execution	09/2001			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Articles of Amendment			

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	Information				
FRN	0007599046	0007599046			
Entity Name	Tacoma Broadcasters, Inc.	Tacoma Broadcasters, Inc.			
Address	PO Box	31000			
	Street 1				
	Street 2				
	City	Spokane			
	State ("NA" if non-U.S. address)	WA			
	Zip/Postal Code	99223			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
Positional Interests (check all that apply)	Respondent Interest holder is not a Tribal nation or Tribal entity				
Tribal Nation or Tribal Entity					
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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information			
FRN	0005005947		
Name	Thomas W. Read		
Address	РО Вох	x 31000	
	Street 1		
	Street 2		
	City	Spokane	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	99223	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder		
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)	Voting	55.0%	Jointly Held? No
	Equity	55.0%	
	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

Ownership Information		
FRN	0005005996	
Name	Melinda B. Read	
Address	РО Вох	31000
	Street 1	
	Street 2	
	City	Spokane

	report? at any interests, including equints filing are non-attributable.	ty, financial, or voting	Yes
Does interest holder have an attributable interest in one or more broadcast stations		No	
	Total assets (Equity Debt Plus)		
from 0.0 to 100.0)	Equity	45.0%	
Interest Percentages (enter percentage values	Voting	45.0%	Jointly Held? No
	Race	White	
Ethnicity, and Race Information (Natural Persons Only)	Ethnicity	Not Hispanic or Latino	
	Gender	Female	
Citizenship, Gender,	Citizenship US		
Positional Interests (check all that apply)	Officer, Director, Stockholder		
Listing Type	Other Interest Holder		
	Country (if non-U.S. address)	United States	
	Zip/Postal Code	99223	
	State ("NA" if non-U.S. address)	WA	

(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.

Family Relationships			
FRN	0005005947	Name	Thomas W Read
FRN	0005005996	Name	Melinda B Read
Relationship	Spouses		

(d) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
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.	

Non-Licensee Respondents should select "N/A" in response to this question.

Licensee does not have a 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: Tacoma Broadcasters, Inc. Name: Thomas W Read Phone: 5094431000