



(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial  
Ownership Report (FCC Form 323-E)

File Number: 0000048419 | Submit Date: 2018-03-08 | FRN: 0012952263

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 03/08/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0012952263		Southwestern Diabetic Foundation, Inc. d/b/a Camp Sweeney			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 918	GAINESVILLE	TX	76241	+1 (940) 665-2011	info@campswweeney.org

2. Contact Representative

Name		Organization			
Scott Cinnamon		Law Offices of Scott C. Cinnamon, PLLC			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1250 Connecticut Ave. # 200-144	Washington	DC	20036	+1 (202) 216-5798	scott@cinnamonlaw.com

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:

Relationship to stations/permits	Licensee
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?	No

(b) Provide the following information about this report:

Purpose	Biennial
"As of" date	10/01/2017  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
Southwestern Diabetic Foundation, Inc. d/b/a Camp Sweeney	0012952263

Fac. ID No.	Call Sign	City	State	Service
89080	KPFC	CALLISBURG	TX	FM
92562	K206CD	GAINESVILLE	TX	FX

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select “Other.” Non-Licensee Respondents 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, members of the governing board (or other governing entity), stockholders, 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	0012952263	
Entity Name	Southwestern Diabetic Foundation, Inc. d/b/a Camp Sweeney	
Address	PO Box	918
	Street 1	
	Street 2	
	City	GAINESVILLE
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	76241
	Country (if non-U.S. address)	United States
Listing Type	Respondent	

<b>Positional Interests</b> (check all that apply)	Respondent		
<b>Tribal Nation or Tribal Entity</b>	Interest holder is not a Tribal nation or Tribal entity		
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%	
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>	0.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			No

Ownership Information			
<b>FRN</b>	9990134025		
<b>Name</b>	T. Milton Dickson, Jr., DDS.		
<b>Address</b>	<b>PO Box</b>	696	
	<b>Street 1</b>		
	<b>Street 2</b>		
	<b>City</b>	GAINESVILLE	
	<b>State ("NA" if non-U.S. address)</b>	TX	
	<b>Zip/Postal Code</b>	76241	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
<b>Principal Profession or Occupation</b>	Dentist		
<b>By Whom Appointed or Elected</b>	Executive Committee		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	6.7%	
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			No

Ownership Information			
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FRN	9990134026		
Name	Robert D. Vandemeer, MD.		
Address	PO Box		
	Street 1	3907 McFarlin Blvd.	
	Street 2		
	City	Dallas	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	75205	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Medical Doctor		
By Whom Appointed or Elected	Executive Committee		
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 from 0.0 to 100.0)	Voting	6.7%	
	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?		No	

Ownership Information		
FRN	9990134027	
Name	Ernie M. Fernandez, MD.	
Address	PO Box	
	Street 1	8555 Walnut Hill La.
	Street 2	Suite 205
	City	Dallas
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	75231
	Country (if non-U.S. address)	United States

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Medical Doctor		
By Whom Appointed or Elected	Executive Committee		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	6.7%	
	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?		No	

Ownership Information		
FRN	9990134028	
Name	John Schmitz	
Address	PO Box	170
	Street 1	
	Street 2	
	City	GAINESVILLE
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	76241
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Businessman	
By Whom Appointed or Elected	Executive Committee	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White

<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	6.7%	
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			No

Ownership Information			
<b>FRN</b>	9990134029		
<b>Name</b>	Jack R . Coleman, CHBC.		
<b>Address</b>	<b>PO Box</b>		
	<b>Street 1</b>	101 E. Park Blvd.	
	<b>Street 2</b>	Ste. 300	
	<b>City</b>	Plano	
	<b>State ("NA" if non-U.S. address)</b>	TX	
	<b>Zip/Postal Code</b>	75074	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
<b>Principal Profession or Occupation</b>	Business Consultant		
<b>By Whom Appointed or Elected</b>	Executive Committee		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	6.7%	
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			No

Ownership Information		
<b>FRN</b>	9990134030	
<b>Name</b>	Karla Adam Trusler	
<b>Address</b>	<b>PO Box</b>	

	Street 1	6124 Del Norte Ln.	
	Street 2		
	City	Dallas	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	75225	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Real Estate		
By Whom Appointed or Elected	Executive Committee		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	6.7%	
	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?		No	

Ownership Information		
FRN	9990134031	
Name	David A. Vandemeer	
Address	PO Box	25202
	Street 1	
	Street 2	
	City	Dallas
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	75225
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	

Principal Profession or Occupation	Businessman		
By Whom Appointed or Elected	Executive Committee		
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 from 0.0 to 100.0)	Voting	6.7%	
	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?			No

Ownership Information		
FRN	9990134032	
Name	Jack W. Young	
Address	PO Box	465
	Street 1	
	Street 2	
	City	Whitesboro
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	76273
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Finance Professional	
By Whom Appointed or Elected	Executive Committee	
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 from 0.0 to 100.0)	Voting	6.7%
	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?		No

Ownership Information		
FRN	9990134033	
Name	Bryan A. Dickson, MD.	
Address	PO Box	
	Street 1	1935 Medical District Dr.
	Street 2	Suite 4400
	City	Dallas
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	75235
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Medical Doctor	
By Whom Appointed or Elected	Executive Committee	
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 from 0.0 to 100.0)	Voting	6.7%
	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?		No

Ownership Information		
FRN	9990134034	
Name	Charlene Ritchey	
Address	PO Box	
	Street 1	1200 Anthony Street
	Street 2	

	<div>City</div> <div>State ("NA" if non-U.S. address)</div> <div>Zip/Postal Code</div> <div>Country (if non-U.S. address)</div>	<div>Gainesville</div> <div>TX</div> <div>76240</div> <div>United States</div>
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Businesswoman	
By Whom Appointed or Elected	Executive Committee	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	6.7%
	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?		No

Ownership Information		
FRN	9990134035	
Name	John Vandemeer, DVM.	
Address	PO Box	
	Street 1	5323 North Central Expressway
	Street 2	
	City	Dallas
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	75205
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Veterinarian	

By Whom Appointed or Elected	Executive Committee	
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 from 0.0 to 100.0)	Voting	6.7%
	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?		No

Ownership Information		
FRN	9990134036	
Name	Holt Foster	
Address	PO Box	
	Street 1	3219 Drexel Dr.
	Street 2	
	City	Dallas
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	75205
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Attorney	
By Whom Appointed or Elected	Executive Committee	
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 from 0.0 to 100.0)	Voting	6.7%
	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?	No
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Ownership Information		
FRN	9990134037	
Name	Phil L. Adams	
Address	PO Box	
	Street 1	100 E. Broadway St.
	Street 2	
	City	Gainesville
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	76240
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Attorney	
By Whom Appointed or Elected	Executive Committee	
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 from 0.0 to 100.0)	Voting	6.7%
	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?		No

Ownership Information		
FRN	9990134038	
Name	David G. Genever-Watling	
Address	PO Box	
	Street 1	5139 Brookview Dr.
	Street 2	
	City	Dallas

	<b>State ("NA" if non-U.S. address)</b>	TX
	<b>Zip/Postal Code</b>	75220
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Businessman	
<b>By Whom Appointed or Elected</b>	Executive Committee	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Male
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	6.7%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

Ownership Information		
<b>FRN</b>	9990134039	
<b>Name</b>	Marc Siegel	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	6525 Turtle Creek Blvd.
	<b>Street 2</b>	
	<b>City</b>	Dallas
	<b>State ("NA" if non-U.S. address)</b>	TX
	<b>Zip/Postal Code</b>	75205
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Businessman	
<b>By Whom Appointed or Elected</b>	Executive Committee	

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 from 0.0 to 100.0)	Voting	6.7%
	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?		No

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(c) 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.	No
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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 LICENSE --OR 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>Director</b> Exact Legal Title or Name of Respondent: <b>Southwestern Diabetic Foundation, Inc.</b> Name: <b>Ernie Fernandez , MD.</b> Phone: <b>9406652011</b>  03/08/2018

