

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0010 (October 2009)	FOR FCC USE ONLY
<b>FCC 323                  OWNERSHIP REPORT FOR                  COMMERCIAL BROADCAST STATIONS</b>		<b>FOR COMMISSION USE ONLY                  FILE NO. BOA-20111201EEG</b>

**Section I - General Information**

1.	Legal Name of the Respondent FAMILY BROADCASTING GROUP, INC.			
	Street Address (1) 9802 NORTH MORGAN ROAD			
	Street Address (2)			
	City YUKON	State or Country (if foreign address) OK	ZIP Code 73099 -	
	Telephone Number (include area code) 4054700993	E-Mail Address (if available)		
	FCC Registration Number: 0009504747	Call Sign KSBI	Facility ID Number 38214	
2.	Contact Representative JOHN W. BAGWELL	Firm or Company Name LERMAN SENTER PLLC		
	Street Address (1) 2000 K STREET, NW			
	Street Address (2) SUITE 600			
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20006 -	
	Telephone Number (include area code) 2024298970	E-Mail Address (if available) JBAGWELL@LERMANSENTER.COM		
3.	Nature of Respondent (See Instructions for definitions)			
	<input checked="" type="radio"/> Licensee <input type="radio"/> Permittee <input type="radio"/> Entity with an attributable interest			
4.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Fee-exempt Report <input type="radio"/> Other Other <input checked="" type="radio"/> N/A (Fee Required)			
5.	All of the information furnished in this Report is accurate as of 10/01/2011 <i>(Date entered must (1) be Oct. 1 of the filing year when filing a Biennial Ownership Report (or Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-biennial Ownership Report.)</i>			
6.	Purpose: This Report is filed for: (choose one)			
	a. <input checked="" type="radio"/> Biennial			
	b. <input type="radio"/> Validation and Resubmission of a previously filed Biennial Report (certifying no change from previous Report)			
	c. <input type="radio"/> Transfer of Control or Assignment of License/Permit			
	d. <input type="radio"/> Report by Permittee filing within 30 days after the grant of a construction permit for a new commercial AM, FM or full power television broadcast station.			
	e. <input type="radio"/> Update / certification of accuracy of an initial Ownership Report filed by Permittee (filing in conjunction with Permittee's application for a station license)			

f. <input type="radio"/> Amendment to a previously filed Ownership Report	File Number: -
If an Amendment, <b>submit as an Exhibit</b> a listing by Section and Question Number the portions of the previous Report that are being revised.	[ Exhibit 1 ]

7. Licensee and Station Information. The stations listed below are all licensed to the following person or entity:

Licensee Name	Licensee's FCC Registration Number (FRN)
FAMILY BROADCASTING GROUP, INC.	0009504747

**Station List**

This Report is filed for the following stations:

Copy	Call Sign	Facility ID Number	Location (City/State)	Class of service
1.	KSBI	38214	OKLAHOMA CITY , OKLAHOMA	Television
2.	KFVT-LP	38217	WICHITA , KANSAS	TV Translator or LPTV station
3.	KXOC-LP	38213	OKLAHOMA CITY , OKLAHOMA	TV Translator or LPTV station
4.	K13XU	38231	TULSA , OKLAHOMA	TV Translator or LPTV station
5.	K14LD	38218	MUSKOGEE , OKLAHOMA	TV Translator or LPTV station
6.	K15DA	38226	TULSA , OKLAHOMA	TV Translator or LPTV station
7.	K17FB	4834	ARDMORE , OKLAHOMA	TV Translator or LPTV station
8.	K20HO	38221	LAWTON , OKLAHOMA	TV Translator or LPTV station
9.	K21DF	38216	STILLWATER , OKLAHOMA	TV Translator or LPTV station
10.	K35CU	38220	ADA , OKLAHOMA	TV Translator or LPTV station
11.	K45EJ	38230	ENID , OKLAHOMA	TV Translator or LPTV station
12.	K48HU	38222	WICHITA FALLS , TEXAS	TV Translator or LPTV station
13.	K51EK	38227	MCALESTER , OKLAHOMA	TV Translator or LPTV station
14.	K16HH-D	167209	PONCA CITY , OKLAHOMA	TV Translator or LPTV station
15.	K32IW-D	167211	TULSA , OKLAHOMA	TV Translator or LPTV station
16.	K46JM-D	167210	MCALESTER , OKLAHOMA	TV Translator or LPTV station

8. Respondent is:

<input type="radio"/> Sole Proprietorship	<input type="radio"/> Not-for-profit corporation	<input type="radio"/> Limited partnership
<input checked="" type="radio"/> For-profit corporation	<input type="radio"/> General partnership	<input type="radio"/> Other

If "Other," describe nature of the Respondent in an Exhibit. [ Exhibit 2 ]

**Section II-B - Biennial Ownership Information**

1. Contract Information. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only Licensees, or Respondents with a majority interest in or that otherwise exercise de facto control over the subject Licensee shall respond. Other Respondents should select "Not Applicable" in response to this question.) If the agreement is a local marketing agreement (LMA) or a radio joint sales agreement (JSA), or if the agreement is a network affiliation agreement, check the appropriate box; otherwise, select "Other" for non-LMA/radio JSA or network affiliation agreements.

Not Applicable

**Contract Information**

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Copy	Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration	Agreement Type (check all that apply)
1.	CERTIFICATE OF INCORPORATION	STATE OF OKLAHOMA	Month DECEMBER Year 2002	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
2.	AMENDED CERTIFICATE OF INCORPORATION	STATE OF OKLAHOMA	Month MARCH Year 2003	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
3.	AMENDED AND RESTATED BYLAWS	N/A	Month JULY Year 2011	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
4.	AMENDMENT TO CERTIFICATE OF INCORPORATION	STATE OF OKLAHOMA	Month DECEMBER Year 2006	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
5.	CERTIFICATE OF DESIGNATION	STATE OF OKLAHOMA	Month DECEMBER Year 2006	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
6.	SECOND AMENDMENT TO CERTIFICATE OF INCORPORATION	STATE OF OKLAHOMA	Month MARCH Year 2010	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
7.	AMENDED AND RESTATED CERTIFICATE OF DESIGNATION	STATE OF OKLAHOMA	Month MARCH Year 2010	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
8.	TUFF TV AFFILIATION AGREEMENT	TUFF TV, LLC	Month FEBRUARY Year 2011	Month MARCH Year 2014 <input type="checkbox"/> No	<input type="checkbox"/> LMA/radio JSA <input checked="" type="checkbox"/> Network Affiliation

				Expiration Date	Agreement <input type="checkbox"/> Other
9.	AMENDED AND RESTATED SHAREHOLDERS AGREEMENT	N/A	Month DECEMBER Year 2008	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other

2. Capitalization (Only Licensees or entities with a majority interest in or that otherwise exercises de facto control over the subject Licensee shall respond.)  
 Not Applicable

**Capitalization Information**

Copy	Class of stock (preferred, common or other)	Voting or Non-voting	Number of shares			
			Authorized	Issued and Outstanding	Treasury	Unissued
1.	<input type="radio"/> Preferred <input checked="" type="radio"/> Common <input type="radio"/> Other (specify)	<input checked="" type="radio"/> Voting <input type="radio"/> Non-Voting	826470	268750	0	557720
2.	<input type="radio"/> Preferred <input type="radio"/> Common <input checked="" type="radio"/> Other (specify) SERIES A PREFERRED	<input checked="" type="radio"/> Voting <input type="radio"/> Non-Voting	74665	74665	0	0
3.	<input type="radio"/> Preferred <input type="radio"/> Common <input checked="" type="radio"/> Other (specify) SERIES B PREFERRED	<input type="radio"/> Voting <input checked="" type="radio"/> Non-Voting	339378	124378	0	215000

3. (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, noninsulated partners, members and other persons or entities with a direct attributable interest in the Respondent. (A "direct" interest is one that is not held through any intervening companies or entities.) In the case of vertical or indirect ownership structures, report only those interests in the Respondent that also represent an attributable interest in the Licensee for which the Report is being submitted.

List each person or entity with a direct attributable interest in the Respondent separately. 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 separate reports for persons or entities that do not have an attributable interest in the Licensee for which the report is being submitted.

**Ownership Interests Information**

Copy 1.	Name	FAMILY BROADCASTING GROUP, INC.
	Address	Street 9802 NORTH MORGAN ROAD  City/State YUKON , OKLAHOMA Postal/ZIP Code 73099 - Country (if not U.S.)
	Listing Type	<input checked="" type="radio"/> Respondent <input type="radio"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input checked="" type="checkbox"/> Other (please specify): LICENSEE
FCC Registration Number	0009504747	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)		<input checked="" type="checkbox"/> N/A (entity)
	Gender	<input type="radio"/> Male <input type="radio"/> Female
	Ethnicity	<input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino
	Race	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input type="radio"/> White <input type="radio"/> Two or more races
	Citizenship	
Percentage of votes	0.0 %	
Percentage of equity	0.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 2.	Name	BRADY M. BRUS
	Address	

	Street 14701 SPRUCE DRIVE	
	City/State PIEDMONT , OKLAHOMA	
	Postal/ZIP Code 73078 -	
	Country (if not U.S.)	
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	
Relationship to Licensee	<input type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0019777093	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	<u>Gender</u> <input checked="" type="radio"/> Male <input type="radio"/> Female	
	<u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	<u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	<u>Citizenship</u> US	
Percentage of votes	3.0 %	
Percentage of equity	3.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 3.	Name	ANGELA BRUS
	Address	Street 14701 SPRUCE DRIVE

	City/State PIEDMONT , OKLAHOMA Postal/ZIP Code 73078 - Country (if not U.S.)	
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	
Relationship to Licensee	<input type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0019777127	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	<u>Gender</u> <input type="radio"/> Male <input checked="" type="radio"/> Female	
	<u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	<u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	<u>Citizenship</u> US	
Percentage of votes	2.0 %	
Percentage of equity	2.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 4.	Name	AUBREY K. MCCLENDON
	Address	Street P.O. BOX 18756  City/State OKLAHOMA CITY , OKLAHOMA Postal/ZIP Code

	73154 - Country (if not U.S.)	
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	
Relationship to Licensee	<input type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0019777358	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	<u>Gender</u> <input checked="" type="radio"/> Male <input type="radio"/> Female	
	<u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	<u>Race</u> <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	<u>Citizenship</u> US	
Percentage of votes	45.0 %	
Percentage of equity	45.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 5.	Name	WARD FAMILY ENTERPRISES, LP
	Address	Street P.O. BOX 54525  City/State OKLAHOMA CITY , OKLAHOMA Postal/ZIP Code 73154 - Country (if not U.S.)



	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input checked="" type="radio"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
	FCC Registration Number	0019777325
	Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input checked="" type="checkbox"/> N/A (entity) Gender <input type="radio"/> Male <input type="radio"/> Female Ethnicity <input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino Race <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input type="radio"/> White <input type="radio"/> Two or more races Citizenship NA
	Percentage of votes	45.0 %
	Percentage of equity	45.0 %
	Percentage of total assets (equity debt plus)	0.0 %
Copy 6.	Name	JOSEPH W. BOWIE
	Address	Street 2952 VIA ESPERANZA  City/State EDMOND , OKLAHOMA Postal/ZIP Code 73013 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder

Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest								
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):								
FCC Registration Number	0021271697								
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity) Gender <input checked="" type="radio"/> Male <input type="radio"/> Female Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino Race <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races Citizenship US								
Percentage of votes	0.0 %								
Percentage of equity	0.0 %								
Percentage of total assets (equity debt plus)	0.0 %								
Copy 7.	<table border="1"> <tr> <td data-bbox="343 1592 566 1637">Name</td> <td data-bbox="566 1592 1232 1637">JOHN D. GARRISON</td> </tr> <tr> <td data-bbox="343 1637 566 1899">Address</td> <td data-bbox="566 1637 1232 1899">                     Street                      PO BOX 18756                       City/State                      OKLAHOMA CITY , OKLAHOMA                      Postal/ZIP Code                      73154 -                      Country (if not U.S.)                 </td> </tr> <tr> <td data-bbox="343 1899 566 1989">Listing Type</td> <td data-bbox="566 1899 1232 1989"> <input type="radio"/> Respondent  <input checked="" type="radio"/> Other Interest Holder                 </td> </tr> <tr> <td data-bbox="343 1989 566 2089">Relationship to Licensee</td> <td data-bbox="566 1989 1232 2089"></td> </tr> </table>	Name	JOHN D. GARRISON	Address	Street PO BOX 18756  City/State OKLAHOMA CITY , OKLAHOMA Postal/ZIP Code 73154 - Country (if not U.S.)	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder	Relationship to Licensee	
Name	JOHN D. GARRISON								
Address	Street PO BOX 18756  City/State OKLAHOMA CITY , OKLAHOMA Postal/ZIP Code 73154 - Country (if not U.S.)								
Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder								
Relationship to Licensee									

	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0021267687	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	Gender <input checked="" type="radio"/> Male <input type="radio"/> Female	
	Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	Race <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	Citizenship US	
Percentage of votes	0.0 %	
Percentage of equity	0.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 8.	Name	SCOTT C. HARTMAN
	Address	Street PO BOX 54525  City/State OKLAHOMA CITY , OKLAHOMA Postal/ZIP Code 73154 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	

	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0021267505	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	Gender <input checked="" type="radio"/> Male <input type="radio"/> Female	
	Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	Race <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	Citizenship US	
Percentage of votes	0.0 %	
Percentage of equity	0.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 9.	Name	FRANK E. JELDY, JR.
	Address	Street 13612 PRAIRIE VIEW LANE  City/State OKLAHOMA CITY , OKLAHOMA Postal/ZIP Code 73142 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	

	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0021267612	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	Gender <input checked="" type="radio"/> Male <input type="radio"/> Female	
	Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	Race <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	Citizenship US	
Percentage of votes	0.0 %	
Percentage of equity	0.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 10.	Name	VINCE ORZA
	Address	Street 9802 NORTH MORGAN ROAD  City/State YUKON , OKLAHOMA Postal/ZIP Code 73099 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	

	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0021266739	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)	
	Gender <input checked="" type="radio"/> Male <input type="radio"/> Female	
	Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino	
	Race <input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input checked="" type="radio"/> White <input type="radio"/> Two or more races	
	Citizenship US	
Percentage of votes	0.0 %	
Percentage of equity	0.0 %	
Percentage of total assets (equity debt plus)	0.0 %	
Copy 11.	Name	GERALD HART
	Address	Street 9802 NORTH MORGAN ROAD  City/State YUKON , OKLAHOMA Postal/ZIP Code 73099 - Country (if not U.S.)
	Listing Type	<input checked="" type="radio"/> Respondent <input type="radio"/> Other Interest Holder
	Relationship to Licensee	

- Licensee (or Officer/Director of Licensee)
- Person with attributable interest
- Entity with attributable interest

Positional Interest  
(Check all that apply)

- Officer
- Director
- General Partner
- Limited Partner
- LC/LLC/PLLC Member
- Owner
- Stockholder
- Attributable Creditor
- Attributable Investor
- Other (please specify):

FCC Registration Number 0021266978

Gender, Ethnicity, Race and Citizenship Information (Natural Persons)

- N/A (entity)
- Gender
  - Male  Female
- Ethnicity
  - Hispanic or Latino
  - Not Hispanic or Latino
- Race
  - American Indian or Alaska Native
  - Asian
  - Black or African American
  - Native Hawaiian or Other Pacific Islander
  - White
  - Two or more races
- Citizenship
  - US

	Percentage of votes	0.0 %	
	Percentage of equity	0.0 %	
	Percentage of total assets (equity debt plus)	0.0 %	

(b.) Respondent certifies that any equity and financial interests not reported in response to Question 3(a) are non-attributable.  Yes  No [ Exhibit 3 ]  
If "No," submit as an Exhibit an explanation.

(c.) Does the Respondent or any person/entity with an attributable interest in the Respondent also hold an attributable interest in any other broadcast station, or in any newspaper entities in the same market, as defined in 47 C.F.R. Section 73.3555?  Yes  No  
If "Yes", provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below for the applicable type of interest (broadcast or newspaper). Respondents with a large number (50 or more) of entries to submit should use the

spreadsheet option. NOTE: Spreadsheets must be submitted in a special "XML Spreadsheet" format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please [Click Here](#).

**[Broadcast Interests Subform]**

**[Newspaper Interests Subform]**

- (d.)  Yes  No  
 Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?

If "Yes", complete the information describing the relationship.

<b>Familial Relationships</b>				
Copy	Name	Parent/Child	Spouse	Siblings
1.	ANGELA BRUS & BRADY BRUS	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

- (e.)  Yes  No  
 Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee ?

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.

**[Enter Attribution Exemption Information]**

4.	<p>Respondent's Interests Held. Each Respondent other than a Licensee should list the name and FCC Registration Number of all entities in which the Respondent holds a direct attributable ownership interest, where that listed entity has an attributable ownership interest in the Licensee of the stations associated with the Report. Licensees should select "N/A" in response to this question.</p> <p><b>For any listing that includes the name of a person or entity reported on multiple Ownership Reports, ensure that the FRN information is consistent among all such Ownership Reports. Respondents should coordinate with each other to ensure such consistency.</b></p> <p><b>[Enter Respondent Interests Held Information]</b></p>	<input checked="" type="checkbox"/> N/A
5.	<p>Organizational Chart. <b>LICENSEES ONLY:</b> Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all persons/entities that have attributable interests in the Licensee.</p> <p>Non-Licensee Respondents should select "N/A" in response to this question.</p>	<input type="checkbox"/> N/A [ Exhibit 5 ]

**SECTION III - CERTIFICATION**



I certify that I am PRESIDENT

(Official Title)

of FAMILY BROADCASTING GROUP, INC.

(Exact legal title or name of Respondent)

and 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.

(Date of the signature below must (1) be no earlier than Oct. 1 of the filing year when filing a Biennial Ownership Report (and no earlier than Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-biennial Ownership Report.)

Signature VINCE ORZA	Date 12/01/2011
Telephone Number of Respondent (Include area code) 4054700993	

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).

**Exhibits**

**Attachment 5**

Description
<a href="#">Organizational Structure Chart</a>