



Online Payment

Step 3: Confirm Payment

1 | 2 | 3

Thank you.

Your transaction has been successfully completed.

Pay.gov Tracking Information

Application Name: Remittance Advice

Pay.gov Tracking ID: 25OKQEA1

Agency Tracking ID: PGC2768558

Transaction Date and Time: 11/30/2015 11:22 EST

Payment Summary

Address Information	Account Information	Payment Information
Account Holder Name: A. Wray Fitch III Billing Address: 8280 Greensboro Drive, 7th Floor Billing Address 2: City: McLean State / Province: VA Zip / Postal Code: 22102 Country: USA	Card Type: Visa Card Number: *****1775	Payment Amount: \$130.00 Transaction Date and Time: 11/30/2015 11:22 EST

FCC MB - CDBS Electronic Filing
Application Reference Number: 20151130CJN
Successfully filed at Nov 30 2015 11:18AM

A Fee Payment is Required for this application. The Total Fee is \$130.

You can use the FCC's Electronic Form 159 System to pay electronically and/or to print out an appropriate Form 159. Press the button below now or return to this screen later by pressing the "Pay Fee" button on the CDBS Main Menu/ Informal Menu. See the [CDBS User's Guide](#) for more information about fee payment.

[Electronic Form 159](#)[Return to Main Menu](#)[Logout](#)

Payment must be received by US Bank within 14 (calendar) days of the date that the application is officially received by the Media Bureau's electronic filing system (indicated by the reference number above). This deadline applies to any payment submission method (electronic or via a paper check). If payment is not received in time, the filed application will be considered to be **not paid** and will therefore not be processed by the MB.

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0010 (June 2014)	FOR FCC USE ONLY
FCC 323 OWNERSHIP REPORT FOR COMMERCIAL BROADCAST STATIONS		FOR COMMISSION USE ONLY FILE NO. -20151130CJN

Section I - General Information

1.	Legal Name of the Respondent TOMLINSON-LEIS COMMUNICATIONS, L.P.		
	Street Address (1) 1919 S. SHILOH ROAD		
	Street Address (2) SUITE 612		
	City GARLAND	State or Country (if foreign address) TX	ZIP Code 75042 -
	Telephone Number (include area code) 9728408808	E-Mail Address (if available) BUBBAT@TOMLEIS.COM	
	FCC Registration Number: 0013664941	Call Sign KNET	Facility ID Number 72837
2.	Contact Representative A. WRAY FITCH III		
	Firm or Company Name GAMMON & GRANGE, P.C.		
	Street Address (1) 8280 GREENSBORO DRIVE		
	Street Address (2) 7TH FLOOR		
	City MCLEAN	State or Country (if foreign address) VA	ZIP Code 22102 - 3807
	Telephone Number (include area code) 7037615013	E-Mail Address (if available) AWF@GG-LAW.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 10/01/2015 <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. ☐ Transfer of Control or Assignment of License/Permit
- d. ☐ 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. ☐ Update / certification of accuracy of an initial Ownership Report filed by Permittee (filing in conjunction with Permittee's application for a station license)
- f. ☐ Amendment to a previously filed Ownership Report
- If an Amendment, submit as an Exhibit a listing by Section and Question Number the portions of the previous Report that are being revised.
- File Number: -
[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)
TOMLINSON-LEIS COMMUNICATIONS, L.P.	0013664941

Station List

This Report is filed for the following stations:

Copy	Call Sign	Facility ID Number	Location (City/State)	Class of service
1.	KNET	72837	PALESTINE , TEXAS	AM Station
2.	KYYK	72838	PALESTINE , TEXAS	FM Station

8. Respondent is:

- ☐ Sole Proprietorship ☐ Not-for-profit corporation ☒ Limited partnership
- ☐ For-profit corporation ☐ General partnership ☐ 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 joint sales agreement (JSA), or if the agreement is a network affiliation agreement, check the appropriate box; otherwise, select "Other" for non-LMA/JSA or network affiliation agreements.

☐ Not Applicable

Contract Information

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.	AGREEMENT OF LIMITED PARTNERSHIP	TOMLINSON-LEIS COMMUNICATIONS GP, L.L.C. AND LIMITED PARTNERS	Month JUNE Year 2005	Month Year <input checked="" type="checkbox"/> No	<input type="checkbox"/> LMA/JSA <input type="checkbox"/> Network Affiliation Agreement

Expiration Date	<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

[Enter Capitalization Information]

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	TOMLINSON-LEIS COMMUNICATIONS, LP
	Address	Street 1919 S. SHILOH ROAD SUITE 612 City/State GARLAND , TEXAS Postal/ZIP Code 75042 - 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	0013664941
	Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input checked="" type="checkbox"/> N/A (entity) <u>Gender</u> <input type="radio"/> Male <input type="radio"/> Female <u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino <u>Race (Check all that apply)</u> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <u>Citizenship</u>
	Percentage of votes	0.0 %
	Percentage of equity	0.0 %
	Percentage of total assets (equity debt plus)	0.0 %
Copy 2.	Name	TOMLINSON-LEIS COMMUNICATIONS GP, L.L.C.
	Address	Street 1919 S. SHILOH ROAD SUITE 612 City/State GARLAND , TEXAS Postal/ZIP Code 75042 - 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 checked="" 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	0020006508
	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 (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White Citizenship
	Percentage of votes	1.0 %
	Percentage of equity	1.0 %
	Percentage of total assets (equity debt plus)	1.0 %
Copy 3.	Name	NANNON HOLLAND, EXECUTOR, ESTATE OF DON HOLLAND
	Address	Street 900 CRESTVIEW City/State WYLIE , TEXAS Postal/ZIP Code 75098 - 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 checked="" 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	0020006425
	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> (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White <u>Citizenship</u>
	Percentage of votes	9 %
	Percentage of equity	9 %
	Percentage of total assets (equity debt plus)	9 %
Copy 4.	Name	KENT BURKHART
	Address	Street 3921 SAVANNAH SQUARE ST City/State SUWANEE , GEORGIA Postal/ZIP Code 30024 - 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 checked="" 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	0020006409	
	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 (Check all that apply)</u> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White <u>Citizenship</u> US	
	Percentage of votes	9 %	
	Percentage of equity	9 %	
	Percentage of total assets (equity debt plus)	9 %	
Copy 5.	Name	EDWARD B. TOMLINSON II; CHARLES LEIS AND STEPHEN LEIS, TRUSTEES FOR THE IRREVOCABLE TRUST OF DORVIN D. LEIS	
	Address	Street 1919 S. SHILOH RD SUITE 612 City/State GARLAND , TEXAS Postal/ZIP Code 75042 - 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 checked="" 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	0020006391
	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 (Check all that apply)</u> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White <u>Citizenship</u> US
	Percentage of votes	55 %
	Percentage of equity	55 %
	Percentage of total assets (equity debt plus)	55 %
Copy 6.	Name	EDWARD B. TOMLINSON II
	Address	Street 1919 S. SHILOH ROAD SUITE 650 City/State GARLAND , TEXAS Postal/ZIP Code 75042 - 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 checked="" 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	0020006375										
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> (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White <u>Citizenship</u> US										
Percentage of votes	9.0 %										
Percentage of equity	9.0 %										
Percentage of total assets (equity debt plus)	9.0 %										
Copy 7.	<table border="1"> <tr> <td>Name</td> <td>JOHN C. SHACKLEFORD</td> </tr> <tr> <td>Address</td> <td> Street 9201 N. CENTRAL EXPRESSWAY FOURTH FLOOR City/State DALLAS, TEXAS Postal/ZIP Code 75231 - Country (if not U.S.) </td> </tr> <tr> <td>Listing Type</td> <td> <input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder </td> </tr> <tr> <td>Relationship to Licensee</td> <td> <input type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest </td> </tr> <tr> <td>Positional Interest (Check all that apply)</td> <td> <input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input checked="" type="checkbox"/> Limited Partner </td> </tr> </table>	Name	JOHN C. SHACKLEFORD	Address	Street 9201 N. CENTRAL EXPRESSWAY FOURTH FLOOR City/State DALLAS, TEXAS Postal/ZIP Code 75231 - 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 checked="" type="checkbox"/> Limited Partner
Name	JOHN C. SHACKLEFORD										
Address	Street 9201 N. CENTRAL EXPRESSWAY FOURTH FLOOR City/State DALLAS, TEXAS Postal/ZIP Code 75231 - 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 checked="" 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	0020006417
	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 (Check all that apply)</u> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White <u>Citizenship</u> US
	Percentage of votes	9 %
	Percentage of equity	9 %
	Percentage of total assets (equity debt plus)	9 %
Copy 8.	Name	JAMES F. BOWEN
	Address	Street 2923 SARATOGA DRIVE City/State ROCKWALL , TEXAS Postal/ZIP Code 75087 - 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 checked="" 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	0020006441
	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 (Check all that apply)</u> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White <u>Citizenship</u> US
	Percentage of votes	9.0 %
	Percentage of equity	9.0 %
	Percentage of total assets (equity debt plus)	9.0 %

(b.)

Respondent certifies that any equity and financial interests not reported in response to Question 3(a) are non-attributable.

If "No," submit as an Exhibit an explanation.

☒ Yes ☐ No
[Exhibit 3]

(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?

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](#)

☐ Yes ☒ No

	<p><u>Here.</u></p> <p>[Broadcast Interests Subform]</p> <p>[Newspaper Interests Subform]</p>	
(d.)	<p>Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?</p> <p>If "Yes", complete the information describing the relationship.</p> <p>[Enter Familial Relationships Information]</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>
(e.)	<p>Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee ?</p> <p>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.</p> <p>[Enter Attribution Exemption Information]</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>
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>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.</p> <p>[Enter Respondent Interests Held Information]</p>	<p><input checked="" type="checkbox"/> N/A</p>
5.	<p>Organizational Chart. LICENSEES ONLY: 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>	<p><input type="checkbox"/> N/A [Exhibit 5]</p>

SECTION III - CERTIFICATION

I certify that I am A MEMBER

(Official Title)

of TOMLINSON-LEIS COMMUNICATIONS, L.P.

(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 EDWARD B. TOMLINSON II	Date 11/18/2015
Telephone Number of Respondent (Include area code) 9728408808	

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

Exhibit 5

Description: EXHIBIT 5

CORPORATE STRUCTURE CHART ATTACHED

Attachment 5

Description
Corporate Structure Chart

TOMLINSON-LEIS COMMUNICATIONS LP (LIMITED PARTNERSHIP (LICENSEE))**TOMLINSON-LEIS COMMUNICATIONS GP, LLC – 1% GENERAL PARTNER**

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
NANNON HOLLAND, EXECUTOR, ESTATE OF DON HOLLAND; 900 CRESTVIEW LANE, WYLIE, TX 75098	US	MEMBER	9	9

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
KENT BURKHART; 133 EAST ENID, KEY BISCAINE, FL 33149	US	MEMBER	9	9

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
EDWARD B. TOMLINSON II; CHARLES LEIS AND STEPHEN LEIS TRUSTEES FOR THE IRREVOCABLE TRUST OF DORVIN D. LEIS; 1919 S. SHILOH ROAD, SUITE 612, GARLAND, TX 75042	US	MEMBER	55	55

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
EDWARD B. TOMLINSON II; 1919 S. SHILOH ROAD, SUITE 650, GARLAND, TX 75042	US	MEMBER	9	9

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
JOHN C. SHACKLEFORD; 3300 LEE PARKWAY, 10TH FLOOR, DALLAS, TX 75219	US	MEMBER	9	9

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
JAMES F. BOWEN; 2923 SARATOGA DRIVE, ROCKWALL, TX 75087	US	MEMBER	9	9

LIMITED PARTNERS

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
KENT BURKHART; 133 EAST ENID, KEY BISCAVNE, FL 33149	US	LIMITED PARTNER	9	9

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
EDWARD B. TOMLINSON II; CHARLES LEIS AND STEPHEN LEIS TRUSTEES FOR THE IRREVOCABLE TRUST OF DORVIN D. LEIS; 1919 S. SHILOH ROAD, SUITE 612, GARLAND, TX 75042	US	LIMITED PARTNER	55	55

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
EDWARD B. TOMLINSON II; 1919 S. SHILOH ROAD, SUITE 650, GARLAND, TX 75042	US	LIMITED PARTNER	9	9

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
JOHN C. SHACKLEFORD; 3300 LEE PARKWAY, 10TH FLOOR, DALLAS, TX 75219	US	LIMITED PARTNER	9	9

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
JAMES F. BOWEN; 2923 SARATOGA DRIVE, ROCKWALL, TX 75087	US	LIMITED PARTNER	9	9

(1) Name and Address	(2) Citizenship	(3) Positional Interest	(4) Percentage of Votes	(5) Percentage of total assets(debt plus equity)
NANNON HOLLAND, EXECUTOR, ESTATE OF DON HOLLAND; 900 CRESTVIEW LANE, WYLIE, TX 75098	US	LIMITED PARTNER	9	9