

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

Section I - General Information

1.	Legal Name of the Respondent 192 INVESTMENTS, L.L.C.			
	Street Address (1) PO BOX 54525			
	Street Address (2)			
	City OKLAHOMA CITY	State or Country (if foreign address) OK	ZIP Code 73154 -	
	Telephone Number (include area code) 4054295860	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 type="radio"/> Licensee <input type="radio"/> Permittee <input checked="" 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 checked="" type="radio"/> Other HOLDING COMPANY REPORT <input 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. 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

File Number: -

If an Amendment, **submit as an Exhibit** 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.	K13XU	38231	TULSA , OKLAHOMA	TV Translator or LPTV station
3.	K14LD	38218	MUSKOGEE , OKLAHOMA	TV Translator or LPTV station
4.	K32IW-D	167211	TULSA , OKLAHOMA	TV Translator or LPTV station
5.	K46JM-D	167210	MCALESTER , 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.	KFVT-LP	38217	WICHITA , KANSAS	TV Translator or LPTV station
15.	KXOC-LP	38213	OKLAHOMA CITY , OKLAHOMA	TV Translator or LPTV station
16.	K16HH-D	167209	PONCA CITY , OKLAHOMA	TV Translator or LPTV 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 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

[Enter Contract Information]

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	192 INVESTMENTS, L.L.C.
	Address	Street PO BOX 54525 City/State OKLAHOMA CITY , OKLAHOMA Postal/ZIP Code 73154 - Country (if not U.S.)
	Listing Type	<input checked="" type="radio"/> Respondent <input 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 type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input checked="" type="checkbox"/> Other (please specify): RESPONDENT
	FCC Registration Number	0021276464
Gender, Ethnicity, Race and Citizenship	<input checked="" type="checkbox"/> N/A (entity) Gender <input type="radio"/> Male <input type="radio"/> Female	

Information (Natural Persons)	<u>Ethnicity</u> <input type="radio"/> Hispanic or Latino <input 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 type="radio"/> White <input type="radio"/> Two or more races	
	<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	TRENT LEE WARD TRUST U/T/A DATED MAY 31, 1989
	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 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 checked="" 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	0021276498
	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</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 type="radio"/> White <input type="radio"/> Two or more races	
		<u>Citizenship</u>	
	Percentage of votes	33.0 %	
	Percentage of equity	33.0 %	
	Percentage of total assets (equity debt plus)	0.0 %	
Copy 3.	Name	ROMI NIREL WARD TRUST U/T/A DATED MAY 31, 1989	
	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 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 checked="" 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	0021276514	
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</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 type="radio"/> White <input type="radio"/> Two or more races
		<u>Citizenship</u>
	Percentage of votes	33.0 %
	Percentage of equity	33.0 %
	Percentage of total assets (equity debt plus)	0.0 %
Copy 4.	Name	JAMES DAVIS WARD TRUST U/T/A DATED MAY 31, 1989
	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 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 checked="" 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	0021276522
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</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 type="radio"/> White <input type="radio"/> Two or more races
		<u>Citizenship</u>
	Percentage of votes	33.0 %
	Percentage of equity	33.0 %
	Percentage of total assets (equity debt plus)	0.0 %
Copy 5.	Name	SCOTT HARTMAN AS TRUSTEE OF THE TRENT LEE WARD TRUST
	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 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 type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input checked="" type="checkbox"/> Other (please specify): TRUSTEE
	FCC Registration Number	0021267505
	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	0.0 %
	Percentage of equity	0.0 %
	Percentage of total assets (equity debt plus)	0.0 %
Copy 6.	Name	SCOTT HARTMAN AS TRUSTEE OF THE ROMI NIREL WARD TRUST
	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 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 type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input checked="" type="checkbox"/> Other (please specify): TRUSTEE
	FCC Registration Number	0021267505
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	0.0 %
	Percentage of equity	0.0 %
	Percentage of total assets (equity debt plus)	0.0 %
Copy 7.	Name	SCOTT HARTMAN AS TRUSTEE OF THE JAMES DAVIS WARD TRUST
	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 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 type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input checked="" type="checkbox"/> Other (please specify): TRUSTEE
	FCC Registration Number	0021267505
	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

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.
 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 Here](#).

[Broadcast Interests Subform]
[Newspaper Interests Subform]

Yes No

(d.) 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.

[Enter Familial Relationships Information]

Yes No

(e.) 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

Yes No

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>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> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <tr> <td colspan="3" style="text-align: center;">Respondent's Interests</td> </tr> <tr> <td style="width: 10%; text-align: center;">Copy 1.</td> <td style="width: 40%;">Name</td> <td style="width: 50%;">WARD ASSET MANAGEMENT, LLC</td> </tr> <tr> <td></td> <td>FCC Registration Number</td> <td>0021276456</td> </tr> </table>	Respondent's Interests			Copy 1.	Name	WARD ASSET MANAGEMENT, LLC		FCC Registration Number	0021276456	<input type="checkbox"/> N/A
Respondent's Interests												
Copy 1.	Name	WARD ASSET MANAGEMENT, LLC										
	FCC Registration Number	0021276456										
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>	<input checked="" type="checkbox"/> N/A [Exhibit 5]									

SECTION III - CERTIFICATION

I certify that I am MANAGER

(Official Title)

of 192 INVESTMENTS, L.L.C.

(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 TRENT WARD	Date 12/01/2011
Telephone Number of Respondent (Include area code) 4054295860	

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 2

Description: EXHIBIT 2

RESPONDENT IS A LIMITED LIABILITY COMPANY.