

(REFERENCE COPY - Not for submission)

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

File Number: 0000046895 | Submit Date: 2018-03-02 | FRN: 0005063300

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 03/02/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0005063300	Pillar of Fire

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3455 W. 83rd Ave.	Westminster	СО	80031	+1 (303) 428- 0910	jack@am91. org

2. Contact Representative

Name	Organization	
Matthew H. McCormick	Fletcher, Heald & Hildreth, P.L.C.	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street 11th	Arlington	VA	22209	+1 (703) 812- 0438	mccormick@fhhlaw.

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.	

and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Per	mittee Name	FRN
Pillar of Fire		0005063300

Fac. ID No.	Call Sign	City	State	Service
52600	KPOF	DENVER	СО	AM

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.

Document Information		
Description of contract or instrument	ARTICLES OF INCORPORATION	
Parties to contract or instrument	State of Colorado	
Date of execution	09/1942	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: ARTICLES OF INCORPORATION	

Document Information		
Description of contract or instrument	BY-LAWS	
Parties to contract or instrument	Respondent	
Date of execution	09/1942	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: BY-LAWS	

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	0005063300	0005063300		
Entity Name	Pillar of Fire			
Address	РО Вох			
	Street 1	3455 W. 83rd Ave.		
	Street 2			
	City	Westminster		
	State ("NA" if non-U.S. address)	СО		
	Zip/Postal Code	80031		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No		

Ownership Information			
FRN	9990128499		
Name	Curtis A. Aldstadt		
Address	PO Box		
	Street 1	3455 W. 83rd Ave.	
	Street 2		
	City Westminster State ("NA" if non-U.S. CO address)		
	Zip/Postal Code	80031	
	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	Operations Manager, Farmer		

By Whom Appointed or Elected	Board of Directors		
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	20.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information				
FRN	0019282730			
Name	Pamela Crawford			
Address	PO Box			
	Street 1	197 Schoolhouse Road		
	Street 2			
	City	Somerset		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	08873		
	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	Senior Coordinator, Housing Committee			
By Whom Appointed or Elected	Board of Directors			
Citizenship, Gender,	Citizenship	GB		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race White			
Interest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	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?

Yes

Ownership Information				
FRN	0019276484			
Name	Robert B. Dallenbach			
Address	PO Box			
	Street 1	8201 King Street		
	Street 2			
	City	Westminster		
	State ("NA" if non-U.S. address)	СО		
	Zip/Postal Code	80031		
	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	Pastor			
By Whom Appointed or Elected	Board of Directors			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Race White		
Interest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations Yes		

Ownership Information			
FRN	0019276401		
Name	Joseph W. Gross		
Address	PO Box		
	Street 1	1295 Seville Drive	
	Street 2		
	City	Pacifica	

	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	94044		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Member of Governing	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Pastor			
By Whom Appointed or Elected	Board of Directors			
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US		
	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	'es	

Ownership Information				
FRN	0019282714			
Name	Ray Rogers			
Address	PO Box			
	Street 1	3455 W. 83rd Ave.		
	Street 2			
	City Westminster			
	State ("NA" if non-U.S. CO address)			
	Zip/Postal Code 80031			
	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	Chief Engineer			
By Whom Appointed or Elected	Board of Directors			

• •	nat any interests, including equi- his filing are non-attributable. an explanation.	ty, financial, or voting	Yes	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No		
	Total assets (Equity Debt Plus)			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
Interest Percentages	Voting	20.0%		
	Race	White		
	Ethnicity	Not Hispanic or Latino		
Information (Natural Persons Only)	Gender	Male		
Citizenship, Gender, Ethnicity, and Race	Citizenship	US		

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	

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.

The 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 LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: Treasurer Exact Legal Title or Name of Respondent: Pillar of Fire Name: Curtis A. Aldstadt Phone: 3034280910 03/02/2018