

(REFERENCE COPY - Not for submission)

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

File Number: 0000048081 | Submit Date: 2018-03-05 | FRN: 0019613173

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 03/05/2018

Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN	Entity Name
0019613173	Christian Radio Friends, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
57685 COUNTY ROAD 9	Elkhart	IN	46517	+1 (574) 875- 5166	dmoore@wfrn.

### 2. Contact Representative

Name	Organization
Matthew H. McCormick	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812- 0438	mccormick@fhhlaw.

# 3. Application Filing Fee

Not Applicable

## 4. Control of Respondent

	Entity required to file a Form 323-E because it holds an attributable interest in one or more Licensees or Permittees	
Is the Respondent's governing boaindirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No

(b) Provide the following information about this report:		
Purpose	Biennial	
"As of" date	10/01/2017	
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.	

### 5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN
Progressive Broadcasting System, Inc.	0004341897

Fac. ID No.	Call Sign	City	State	Service
53639	WFRN-FM	ELKHART	IN	FM
53645	WFRI	WINAMAC	IN	FM
53650	WCMR	ELKHART	IN	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.

Not Applicable.

### 2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information		
FRN	0019613173	
Entity Name	Christian Radio Friends, Inc.	
Address	РО Вох	
	Street 1	57685 COUNTY ROAD 9
	Street 2	
	City	Elkhart
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46517
	Country (if non-U.S. address)	United States

Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	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 creport?	or more broadcast stations	Yes

Ownership Information			
FRN	0019435502	0019435502	
Name	Douglas Moore	Douglas Moore	
Address	<b>PO Box</b> 1763		
	Street 1		
	Street 2		
	City	Elkhart	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46515	
	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	Broadcaster		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	33.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations Yes	

Ownership Information			
FRN	9990129468		
Name	Robert Savage		
Address	PO Box		
	Street 1	66258 HARTZLER BLVD.	
	Street 2		
	City	GOSHEN	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46526	
	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	Counselor		
By Whom Appointed or Elected	Board	Board	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	33.0%	
(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 i	an attributable interest in one o	or more broadcast stations No	

Ownership Information		
FRN	9990129465	
Name	Charles Moore	
Address	РО Вох	1793
	Street 1	
	Street 2	
	City	Elkhart
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46515

	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	Educator		
By Whom Appointed or Elected	Board		
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	33.3%	
	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	Yes
• •	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(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.	

### 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: <b>President</b> Exact Legal Title or Name of Respondent: <b>Christian Radio Friends, Inc.</b> Name: <b>Doug Moore</b> Phone: <b>5748755166</b>
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