

FRN

0002587871

Not Applicable

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000103077Submit Date:2020-01-30FRN:0020019436Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:01/30/2020Filing Status:Active

Section I - General Information

Iowa Broadcasters, Inc.

1. Respondent

Entity Name

Street	City (and Country if non U.S.	State ("NA" if non-U.S.	Zip		
Address	address)	address)	Code	Phone	Email
c/o	Charlotte	NC	28205	+1 (704) 372-	bposton@bahake
Beverly				4434	com
Poston					
One					
Televsion					
Place					

2. Contact Representative

Name	Organization
M. Anne Swanson	Wilkinson Barker Knauer, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW Suite 800N	Washington	DC	20036	+1 (202) 383- 3342	aswanson@wbklaw. com

3. Application Filing Fee

4.	Nature of
Re	espondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees	
Nature of Respondent	For-profit corporation	

(b) Provide the following information about this report:

Purpose	Biennial	
"As of" date	10/01/2019	
	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 Na	FRN				
Colorado Springs Radio Broadcasters, Inc.				0001547553	
Fac. ID No.	Call Sign	City	State	Service	
12367	KILO	COLORADO SPRINGS	СО	FM	
53845	KRXP	PUEBLO WEST	СО	FM	

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other 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. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, 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, directors, stockholders, non-insulated partners, non-insulated members, 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	0002587871			
Entity Name	Iowa Broadcasters, Inc.			
Address	PO Box			
	Street 1	c/o Beverly Poston		
	Street 2	One Televsion Place		
	City	Charlotte		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28205		

Ownership Information

	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	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast statio			No	

that do not appear on this report?

Ownership Information				
FRN	0019312636			
Name	Beverly B. Poston			
Address	PO Box			
	Street 1	One Television Place		
	Street 2			
	City	Charlotte		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28205		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0% Jointly Held? No		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
	Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			

FRN	0029125622			
Name	Jayne Borman			
Address	PO Box			
	Street 1	One Television Place		
	Street 2			
	City	Charlotte		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28205		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0% Jointly Held? No		
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 report?	r more broadcast stations	Yes	

Ownership Information

FRN	0029125465			
Name	Suzanne B. Pittenger			
Address	PO Box			
	Street 1	One Television Place		
	Street 2			
	City	Charlotte		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28205		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			

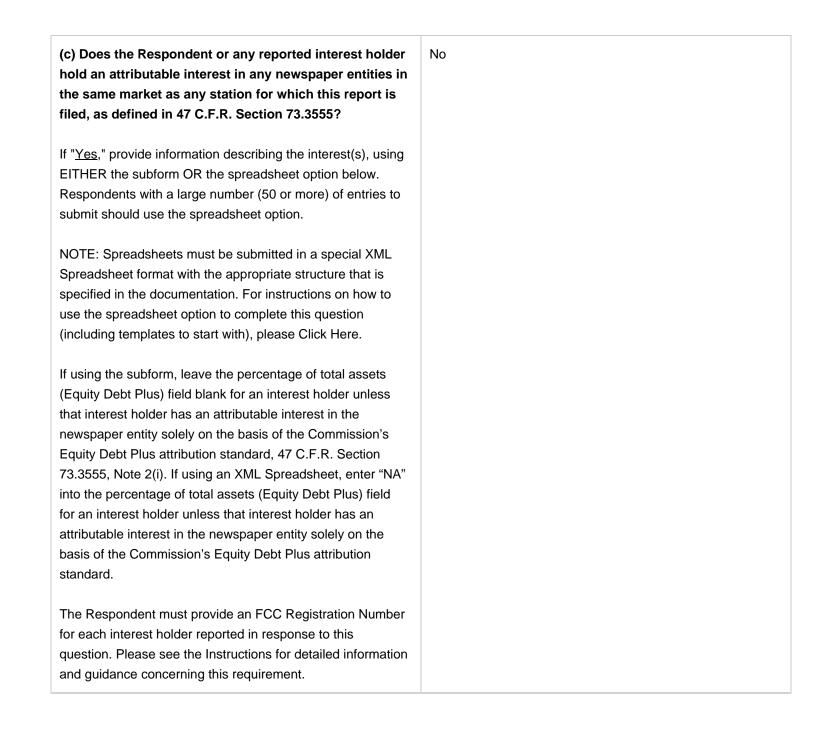
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes	

Ownership Information			
FRN	0005008289		
Entity Name	Bahakel Communications, Ltd.		
Address	PO Box		
	Street 1	c/o Beverly Poston	
	Street 2	One Television Place	
	City	Charlotte	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28205	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
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	100.0%	Jointly Held? No
	Equity	100.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes

Ownership Information		
FRN	0029125432	
Name	Amy E. Pittenger	
Address	PO Box	
	Street 1	One Television Place

	Street 2			
	City	Charlotte		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28205		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		more broadcast stations	Yes	
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.			Yes	

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



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

Family Relationships			
FRN	0029125465	Name	Suzanne B Pittenger
FRN	0029125432	Name	Amy E Pittenger
Relationship	Parent/Child		

Family Relationships

Family Relationships

FRN	0019312636	Name	Beverly B Poston
FRN	0029125465	Name	Suzanne B Pittenger
Relationship	Siblings		

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

If "<u>Yes</u>," 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: President Exact Legal Title or Name of Respondent: Iowa Broadcasters, Inc. Name: Beverly B Poston Phone: 7043724434 01/30/2020