

(REFERENCE COPY - Not for submission)

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

File Number: 0000169694 Submit Date: 2021-11-19 FRN: 0020030748

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/19/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	ı	Entity Name
002	0030748	St. Gabriel Communications

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1355 50th St Suite 500	West Des Moines	IA	50266	+1 (515) 223- 1150	John@JWKingLaw.

2. Contact Representative

Name	Organization
JOHN WELLS KING, ESQ.	Law Office of John Wells King, PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4051 Shoal Creek Lane East	Jacksonville	FL	32225- 4792	+1 (904) 647- 9610	John@JWKingLaw.

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	10/01/2021	
	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):

Li	icensee/Permittee Name	FRN	
S	St. Gabriel Communications	0020030748	

Fac. ID No.	Call Sign	City	State	Service
91587	KLOX	CRESTON	IA	FM
92489	KIHS	ADEL	IA	FM
141180	K233BT	DES MOINES	IA	FX

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 Iowa	
Date of execution	11/2004	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate	

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	0020030748	
Entity Name	St. Gabriel Communications	
Address	PO Box	
	'	

	Street 1	1355 50th St	
	Street 2	Suite 500	
	City	West Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50266	
	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	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 an attributable interest in one or more broadcast stations Yes that do not appear on this report?			

Ownership Information				
FRN	0030919021			
Name	Mark Adams			
Address	РО Вох			
	Street 1	4201 Westown Parkway		
	Street 2	Suite 250		
	City	West Des Moines		
	State ("NA" if non-U.S. address)	IA		
	Zip/Postal Code	50266-6720		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply) Officer				
Principal Profession or Occupation				
By Whom Appointed or Elected	Board of Directors			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)				

Interest Percentages (enter percentage values from 0.0 to 100.0)	Ethnicity	Not Hispanic or Latino	
	Race	White	
	Voting	0.0%	
	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?		Yes	

Ownership Information			
FRN	0030919252		
Name	Rick Ball		
Address	РО Вох		
	Street 1	10550 New York Avenue	
	Street 2	Suite 100	
	City	Urbandale	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50322-3744	
	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	President, Ball Team Construction		
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	White	
Interest Percentages	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	7.7%	
	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 Yes	

Ownership Information	
FRN	0030919179

Brett Bosworth	
1225 Jordan Creek Parkway	
West Des Moines	
IA	
50266-2345	
United States	
Other Interest Holder	
Member of Governing Board (or other governing entity)	
President, R and R Equity Partners	
Board of Directors	
US	
Male	
Not Hispanic or Latino	
White	
7.7%	
0.0%	
0.0%	

Ownership Information		
FRN	0030919393	
Name	Brad Duffy	
Address	PO Box	
	Street 1	795 SE Oak Leaf Drive
	Street 2	
	City Waukee	
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50263-8190
	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	Division President, Per Mar Security Services		
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	7.7%	
(enter percentage values 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?			

Ownership Information		
FRN	0030919435	
Name	Dave Freeseman	
Address	РО Вох	
	Street 1	5700 University Avenue
	Street 2	Suite 222
	City	West Des Moines
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50266-8276
	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	Regional Director, Rock Valley Physical Therapy	
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	White
Interest Percentages	Voting 7.7%	
(enter percentage values		

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?		Yes	

Ownership Information		
FRN	0030919211	
Name	Tim Jameson	
Address	PO Box	
	Street 1	4131 109th Street
	Street 2	
	City	Urbandale
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50321
	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	Outdoor Advertising Executive	
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	White
Interest Percentages	Voting	7.7%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have a	an attributable interest in one oreport?	or more broadcast stations Yes

Ownership Information		
FRN	0030919195	
Name	Joe Lane	
Address	РО Вох	
	Street 1	720 S. 32nd Ct.

	Street 2		
	City	West Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50265	
	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	Retired		
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	White	
Interest Percentages	Voting	7.7%	
(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 Yes	

Ownership Information		
FRN	0030919583	
Name	Terry McGonegle	
Address	PO Box	
	Street 1	5930 Grand Avenue
	Street 2	
	City	West Des Moines
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50266-5302
	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	CFO, Wright Tree Service		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.7%	
(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	er more broadcast stations Yes	

Ownership Information			
FRN	0030918882		
Name	Joseph E. Teeling		
Address	PO Box		
	Street 1	715 SE Southfork Dr.	
	Street 2		
	City	Waukee	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50263	
	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	Chairman and CEO,Bearence	Chairman and CEO,Bearence Management Group	
By Whom Appointed or Elected	Board of Directors	Board of Directors	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.7%	
(enter percentage values 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 that do not appear on this report?	or more broadcast stations	Yes

Ownership Information			
FRN	0030919641		
Name	Mark Parrish		
Address	PO Box		
	Street 1	8201 Hickman Rd.	
	Street 2		
	City	Urbandale	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50322	
	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	Owner and Operator of Funeral Home		
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	White	
Interest Percentages	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one or report?	or more broadcast stations	Yes

Ownership Information			
FRN	0030919476		
Name	Angel Grubb		
Address	PO Box		
	Street 1	685 SE Southfork Drive	
	Street 2		

	City	Waukee		
	State ("NA" if non-U.S. address)	IA		
	Zip/Postal Code	50265		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Owner of Custom Homebuilder firm			
By Whom Appointed or Elected	Board of Directors	Board of Directors		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	7.7%		
(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	r more broadcast stations	Yes	

Ownership Information		
FRN	0030919369	
Name	Eric Donels, MD.	
Address	PO Box	
	Street 1	4323 NW Urbandale Dr.
	Street 2	
	City Urbandale	
	State ("NA" if non-U.S. IA address) Zip/Postal Code 50322	
	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	Medical Doctor	

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	Voting	7.7%	
(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 creport?	or more broadcast stations Yes	

Ownership Information			
FRN	0030919526		
Name	Mark McGeary		
Address	PO Box		
	Street 1	1401 1st Ave. S.	
	Street 2		
	City	Altoona	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50009	
	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	Roman Catholic Priest		
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	White	
Interest Percentages	Voting	7.7%	
(enter percentage values 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?

Yes

Ownership Information				
FRN	0030919690			
Name	Scott Prickett			
Address	PO Box			
	Street 1	1350 NW 138th St.		
	Street 2	Suite 300		
	City	Clive		
	State ("NA" if non-U.S. address)	IA		
	Zip/Postal Code	50325		
	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	Business Executive			
By Whom Appointed or Elected	Board of Directors	Board of Directors		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	7.7%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this	an attributable interest in one o	or more broadcast stations Yes		

Ownership Information		
FRN	0030919138	
Name	Matthew Willkom	
Address	PO Box Street 1 2900 Westown Parkway Street 2 Suite 220	
	City	West Des Moines

	State ("NA" if non-U.S. address)	IA		
	Zip/Postal Code	50266		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer			
Principal Profession or Occupation	Executive Director, Iowa Cath	Executive Director, Iowa Catholic Radio		
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	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt 0.0% Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes	
	at any interests, including equi nis 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.	

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.

Licensee is governed by a board of directors.

Section III - Certification

Certification	Section	Question	Response
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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: St. Gabriel Communications Name: Joseph E. Teeling Phone: 5152231150 11/19/2021