

(REFERENCE COPY - Not for submission)

FRN

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000181209
 Submit Date:
 2022-01-25
 FRN:
 0005011127

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/25/2022

 Filing Status:
 Active
 Status:
 Status Date:
 01/25/2022

Section I - General Information

1. Respondent

Entity Name

0005011127 Jacobson Broadcasting Company,			dcasting Company, Inc				
Street	City (and Count	try if non U.S.	State ("NA" if non-U.S.	Zip			
Address	address)		address)	Code	Phone	Email	

Address	address)	address)	Code	Phone	Email
PO Box 453	Estherville	IA	51334	+1 (712) 362- 2644	jbci@yourstarnet. net

2. Contact Representative

Name	Organization		
John C. Trent, Esq.	Putbrese Hunsaker & Trent, P.C.		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
200 S. Church Street	Woodstock	VA	22664	+1 (540) 459-7646	fccman3@shentel.net

3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	No

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	2	95	\$170.00
		·	·	•	Total	\$170.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Licensee			
Nature of Respondent	For-profit corporation			

(b) Provide the following information about this report:

Purpose	Validation and resubmission of a previously filed biennial report (certifying no changes from the previously filed biennial report) 0000093120				
"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):

Licensee/Permittee Nam	FRN				
Jacobson Broadcasting C	0005011127				
Fac. ID No.	Call Sign	City	State	Service	
29725	KILR-FM	ESTHERVILLE	IA	FM	
29726	KILR	ESTHERVILLE	IA	АМ	

ESTHERVILLE

IA

FΧ

Section II – Biennial Ownership Information

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1. 47 C.F.R. Section 73.3613 and Other Documents 82828

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, as well as 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.

Document Information				
Description of contract or instrument	Articles of Incorporation and Bylaws			
Parties to contract or instrument	State of Iowa			
Date of execution	02/1982			

Date of expiration	No expiration date
Agreement type	Other
(check all that apply)	Agreement Type: Other

Document Information					
Description of contract or instrument	Contract				
Parties to contract or instrument	ABC News				
Date of execution	10/2015				
Date of expiration	No expiration date				
Agreement type (check all that apply)	Network Affiliation Agreement				

Document Information	
Description of contract or instrument	Contract
Parties to contract or instrument	Premiere Networks
Date of execution	10/2002
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Contract
Parties to contract or instrument	Hawkeye Network
Date of execution	05/2008
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Contract
Parties to contract or instrument	Salem Radio Network
Date of execution	06/1999
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Contract
Parties to contract or instrument	Genesis Communications Network
Date of execution	09/2013
Date of expiration	No expiration date

Agreement type (check all that apply)	Network Affiliation Agreement
Decument Information	

Document Information	
Description of contract or instrument	Contract
Parties to contract or instrument	Iowa Agribusiness Radio Network
Date of execution	01/2012
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Contract
Parties to contract or instrument	Compass Media Network
Date of execution	09/2010
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Contract
Parties to contract or instrument	Learfield Communications, Inc.
Date of execution	01/2013
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Contract
Parties to contract or instrument	MJI Interactive, Inc.
Date of execution	01/2008
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Contract
Parties to contract or instrument	Outdoor Network
Date of execution	07/2006
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	Contract
Parties to contract or instrument	Living the Country Life
Date of execution	11/2009
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Description of contract or instrument	Contract
Parties to contract or instrument	Premiere - Bill Cunningham
Date of execution	05/2010
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information

Description of contract or instrument	Contract
Parties to contract or instrument	Westwood One - Mainstream Country
Date of execution	10/2015
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

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	0005011127	
Entity Name	Jacobson Broadcasting Company, Inc	

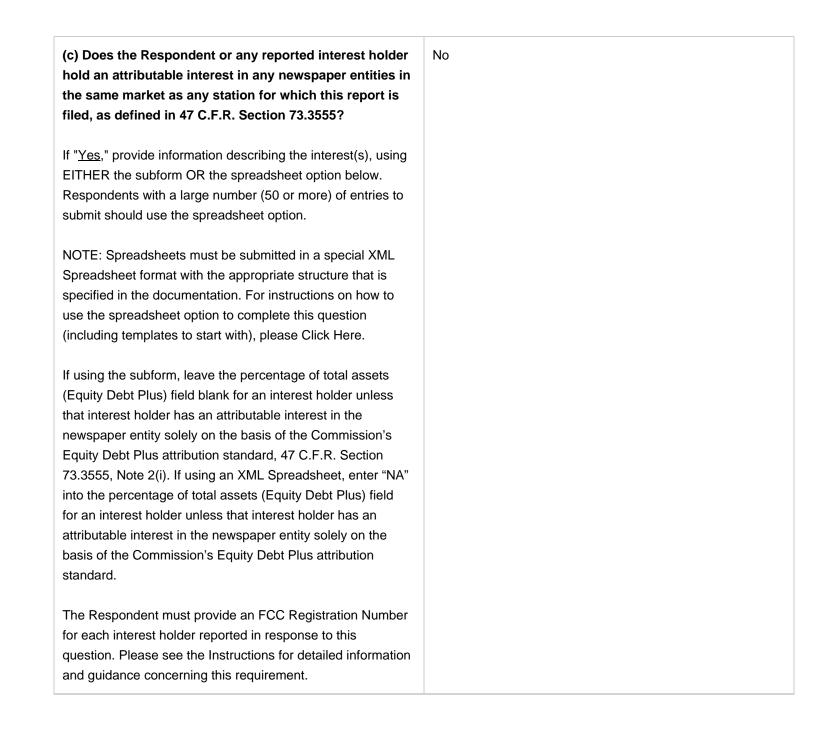
Address	PO Box	453		
	Street 1			
	Street 2			
	City	Estherville		
	State ("NA" if non-U.S. address)	ΙΑ		
	Zip/Postal Code	51334		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest 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 that do not appear on this	an attributable interest in one o	r more broadcast stations	No	

Ownership Information			
FRN	0020019451	0020019451	
Name	Roger Jacobson	Roger Jacobson	
Address	PO Box		
	Street 1	320 N. 17th Court	
	Street 2		
	City	Estherville	
	State ("NA" if non-U.S. address)	ΙΑ	
	Zip/Postal Code	51334	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Director, Stockholder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	

Interest Percentages (enter percentage values	Voting	51.0% Jointly Held? No		
from 0.0 to 100.0)	Equity	51.0%		
	Total assets (Equity Debt Plus)	51.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No		

FRN	0020019493	0020019493		
Name	Barbara J. Jacobson			
Address	PO Box			
	Street 1	320 N. 17th Court		
	Street 2			
	City	Estherville		
	State ("NA" if non-U.S. address)	ΙΑ		
	Zip/Postal Code	51334		
	Country (if non-U.S. United States address) United States			
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Stockholder			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Race White		
Interest Percentages (enter percentage values	Voting	49.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	49.0%		
	Total assets (Equity Debt Plus)	49.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
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	0020019451	Name	Roger Jacobson
FRN	0020019493	Name	Barbara J Jacobson
Relationship	Spouses		

No

Family Relationships

(e) Is Respondent seeking an attribution exemption for any officer or director with 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.

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.

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: President Exact Legal Title or Name of Respondent: Jacobson Broadcasting Company, Inc Name: Roger Jacobson Phone: 7123622644 01/25/2022