



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Non-Biennial
Ownership Report (FCC Form 323)

File Number: 0000239015 | Submit Date: 2024-02-14 | FRN: 0003911377

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report | Status: Received | Status Date:

02/14/2024 | Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0003911377		Radio Dubuque, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 1055	Dubuque	IA	54935	+1 (920) 979-8634	lrabb34@aol.com

2. Contact Representative

Name		Organization			
Gregg P. Skall, Esq.		Telecommunications Law Professionals PLLC			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1025 Connecticut Ave, NW Suite 1011	Washington	DC	20036	+1 (202) 789-3121	gskall@tlp.law

3. Application Filing Fee

Not Applicable

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	Transfer of control or assignment of license/permit
"As of" date	02/14/2024 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) /Permittees(s)

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

and Station(s)
/Permit(s)

Licensee/Permittee Name	FRN
Radio Dubuque, Inc.	0003911377

Fac. ID No.	Call Sign	City	State	Service
26898	KGRR	EPWORTH	IA	FM
73661	KATF	DUBUQUE	IA	FM
73662	KDTH	DUBUQUE	IA	AM
77086	WVRE	DICKEYVILLE	WI	FM

Section II – Non-Biennial Ownership Information

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

Licensee/Permittee Respondents 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/Permittee 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	03/2000
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	Stockholders
Date of execution	03/2000
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, 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) or Permittee(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) or Permittee(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	0003911377		
Entity Name	Radio Dubuque, Inc.		
Address	PO Box	1055	
	Street 1		
	Street 2		
	City	Dubuque	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	54935	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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?			No

Ownership Information		
FRN	0019272582	
Name	Lynne R. Schibbelhut	
Address	PO Box	
	Street 1	1077 Meadow Lane
	Street 2	
	City	Fond du Lac
	State ("NA" if non-U.S. address)	WI
	Zip/Postal Code	54935
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Stockholder	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No
	Total assets (Equity Debt Plus)	33.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0019272574		
Name	Ann R. Woods		
Address	PO Box		
	Street 1	756 Connolly Drive	
	Street 2		
	City	Red Lion	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	17356	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No
	Total assets (Equity Debt Plus)	33.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information		
FRN	0019272590	
Name	Brian Rabbitt	
Address	PO Box	
	Street 1	955 Rae Dr.
	Street 2	
	City	Hartland
	State ("NA" if non-U.S. address)	WI
	Zip/Postal Code	53029
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

Positional Interests (check all that apply)	Stockholder		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No
	Total assets (Equity Debt Plus)	33.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(c) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings? If " <u>Yes</u> ," provide the following information for each such the relationship.	Yes
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Family Relationships			
FRN	0019272574	Name	Ann R Woods
FRN	0019272590	Name	Brian Rabbitt
Relationship	Siblings		

Family Relationships			
FRN	0019272582	Name	Lynne R Schibbelhut
FRN	0019272574	Name	Ann R Woods
Relationship	Siblings		

Family Relationships			
FRN	0019272582	Name	Lynne R Schibbelhut
FRN	0019272590	Name	Brian Rabbitt
Relationship	Siblings		

(d) 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.	No
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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	

	LICENSE --OR 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: Officer/Member of Governing Board Exact Legal Title or Name of Respondent: Radio Dubuque, Inc. Name: Lynne Schibbelhut Phone: 9209798634 02/14/2024