

(REFERENCE COPY - Not for submission)

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

File Number: 0000035993 | Submit Date: 2017-12-05 | FRN: 0005005699

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 12/05/2017

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0005005699	Calvary Chapel of Twin Falls, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
4002 N 3300 E	Twin Falls	ID	83301	+1 (208) 733- 3133	loism@csnradio.

2. Contact Representative

Name	Organization
Cary S. Tepper, ESQ.	Tepper Law Firm, LLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4900 Auburn Avenue Suite 2	Bethesda	MD	20814	+1 (301) 718-1818	tepperlaw@aol.com

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	10/01/2017	
	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.	

and Station(s)

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

Licensee/Permittee Name	FRN	
Calvary Chapel of Twin Falls, Inc.	0005005699	

Fac. ID No.	Call Sign	City	State	Service
2868	WIFF	WINDSOR	NY	FM
5391	WSFW	SENECA FALLS	NY	AM
8414	KAWZ	TWIN FALLS	ID	FM
8417	KAWS	MARSING	ID	FM
8432	KEFX	TWIN FALLS	ID	FM
16523	WWUN-FM	FRIAR'S POINT	MS	FM
18887	WCBX	BASSETT	VA	AM
22672	WWYC	TOLEDO	ОН	AM
37433	KGNR	JOHN DAY	OR	FM
64664	WTZE	TAZEWELL	VA	AM
64665	WKQY	TAZEWELL	VA	FM
72657	КМНІ	MOUNTAIN HOME	ID	AM
73191	WKTR	EARLYSVILLE	VA	AM
76989	KTBJ	FESTUS	MO	FM
81138	KHJC	LIHUE	Н	FM
84184	KLWD	GILLETTE	WY	FM
87267	KWYC	CHEYENNE	WY	FM
90263	KJCH	COOS BAY	OR	FM
90500	KWRC	HERMOSA	SD	FM
90842	KWCF	SHERIDAN	WY	FM
91804	KVJC	GLOBE	AZ	FM
91952	KVIR	BULLHEAD CITY	AZ	FM
92285	KKJA	REDMOND	OR	FM
92487	KTJC	KELSO	WA	FM
92491	KPIJ	JUNCTION CITY	OR	FM
92987	KGSF	HUNTSVILLE	AR	FM
93587	KJFT	ARLEE	MT	FM
106475	KJCF	ASOTIN	WA	FM
121839	KDJC	BAKER	OR	FM
122010	WYJC	GREENVILLE	FL	FM
122202	WSMA	SCITUATE	MA	FM
122209	WUJC	ST. MARKS	FL	FM

122517	KJCC	CARNEGIE	OK	FM
122932	KNMA	TULAROSA	NM	FM
122934	KEFS	NORTH POWDER	OR	FM
172645	KGFJ	BELT	MT	FM
172973	WGWS	ST. MARY'S CITY	MD	FM
174458	KQDL	HINES	OR	FM
174640	KBJF	NEPHI	UT	FM
174802	KOGJ	KENAI	AK	FM
176566	KNGW	JUNEAU	AK	FM
176981	KLWL	CHILLICOTHE	МО	FM
191575	KIMW	HEFLIN	LA	FM

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	0005005699	0005005699		
Entity Name	Calvary Chapel of 1	win Falls, Inc.		
Address	РО Вох			
	Street 1	4002 N 3300 E		
	Street 2			
	City	Twin Falls		

	State ("NA" if non-U.S. address)	ID		
	Zip/Postal Code	83301		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	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 that do not appear on this report?				

Ownership Information				
FRN	0025012543	0025012543		
Name	Michael Kestler	Michael Kestler		
Address	РО Вох	1183		
	Street 1			
	Street 2			
	City	Twin Falls		
	State ("NA" if non-U.S. address)	ID		
	Zip/Postal Code	83301		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governin	g Board (or other governing entity)		
Principal Profession or Occupation	Pastor			
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 (enter percentage values	Voting	90.0%		
from 0.0 to 100.0)				

Equity	00.0%	
Total assets (Equity Debt Plus)	00.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information				
FRN	0025012550	0025012550		
Name	Ariel Kestler			
Address	РО Вох	1183		
	Street 1			
	Street 2			
	City	Twin Falls		
	State ("NA" if non-U.S. address)	ID		
	Zip/Postal Code	83301		
	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	None			
By Whom Appointed or Elected	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	10.0%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No		
(b) Respondent certifies th	at any interests, including equi	ty, financial, or voting	Yes	

interests, not reported in this filing are non-attributable.

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

(c) Is Respondent seeking an attribution exemption for any officer or director w duties wholly unrelated to the Licensee(s)?	ith No
If "Yes," complete the information in the required fields and submit an Exhibit fully des	scribing
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.

File Name	Uploaded By	Attachment Type	Description
Biennial report 2017.pdf	Applicant	Ownership Chart	

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: Application Technician Exact Legal Title or Name of Respondent: Calvary Chapel of Twin Falls, Inc. Name: Lois Mills Phone: 2087333133