

Amendment to a Commercial Broadcast Stations Biennial Ownership Report

 File Number:
 0000040561
 Submit Date:
 2018-02-15
 FRN:
 0001636588

Purpose: Commercial Broadcast Stations Biennial Ownership Report AmendmentStatus: ReceivedStatus Date:02/15/2018Filing Status: Active

Section I - General Information

1. Respondent

	FRN	Entity Name
0001636588 IdaVend Co Inc	0001636588	IdaVend Co Inc

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
805 Stewart Avenut	Lewiston	ID	83501	+1 (208) 743- 1551	rprasil@idavend. com

2. Contact Representative

Name	Organization
Patricia Chuh	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) 783-4141	pchuh@wbklaw.com

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	3	95	\$210.00
		·	·	•	Total	\$210.00

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	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.
Reason for Amendment	Correct ownership information section.

5. Licensee(s) and Station(s)

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

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Licensee/Permittee	Name	FRN				
IdaVend Co Inc			0001636588	0001636588		
Fac. ID No.	Call Sign	City	State	Service		
28214	КМОК	LEWISTON	ID	FM		
28216	KRLC	LEWISTON	ID	АМ		
57193	KVTY	LEWISTON	ID	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, 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	Bylaws		
Parties to contract or instrument	Not Applicable		
Date of execution	12/1980		
Date of expiration	No expiration date		

Agreement type	Other
(check all that apply)	Agreement Type: Bylaws
Document Information	

Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation
Date of expiration	No expiration date
Date of execution	12/1980
Parties to contract or instrument	Idaho
Description of contract or instrument	Articles of Incorporation

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	0001636588		
Entity Name	Ida-Vend Company, Inc.		
Address	PO Box		
	Street 1	805 Stewart Avenut	
	Street 2		
	City Lewiston		
	State ("NA" if non-U.S.IDaddress)		
	Zip/Postal Code 83501		
	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		

Ownership Information

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 a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

FRN	0019298009	0019298009		
Name	Cheri C. Prasil			
Address	PO Box			
	Street 1	1617 Cherry Street		
	Street 2			
	City	Asotin		
	State ("NA" if non-U.S. address)	WA		
	Zip/Postal Code	99403		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Stockholder			
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	26.0%	Jointly Held? Yes	
from 0.0 to 100.0)	Equity	26.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No	

Ownership Information		
FRN	0019297928	
Name	Gary D. Prasil	
Address	PO Box	
	Street 1	1617 Cherry Street
	Street 2	

	City	Asotin	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	99403	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Stockholder, Other - 2	26 percent jointly with Cheri C. F	Prasil
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	37.0%	Jointly Held? Yes
from 0.0 to 100.0)	Equity	37.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	0019297597		
Name	Robert W. Prasil		
Address	PO Box		
	Street 1	1907 Burrell Avenue	
	Street 2		
	City	Lewiston	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83501	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Stockholder, Other - 26 percent jointly with Melva R. Prasil		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	

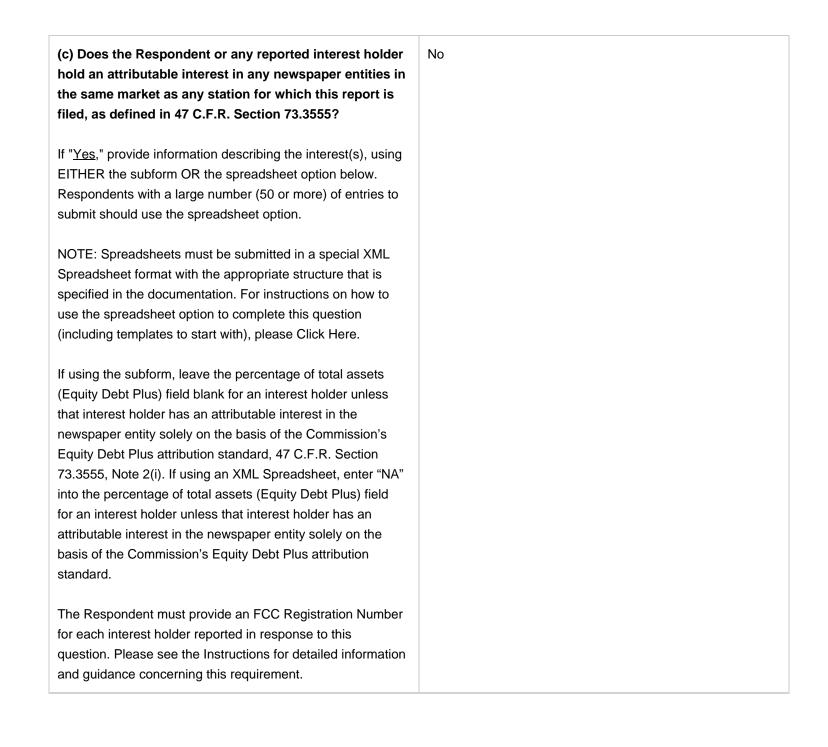
Ownership Information

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	37.0%	Jointly Held? Yes	
	Equity	37.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes	

Ownership Information	Ownershi	Informati	on
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FRN	0019297662		
Name	Melva R. Prasil		
Address	PO Box		
	Street 1	1907 Burrell Avenue	
	Street 2		
	City	Lewiston	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83501	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Stockholder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	26.0%	Jointly Held? Yes
	Equity	26.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this r	an attributable interest in one o	r more broadcast stations	Yes

(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	0019297928	Name	Gary D Prasil
FRN	0019298009	Name	Cheri C Prasil
Relationship	Spouses		

Family Relationships

FRN	0019297597	Name	Robert W Prasil
FRN	0019297928	Name	Gary D Prasil
Relationship	Siblings		

Family Relationships

FRN	0019297597	Name	Robert W Prasil
FRN	0019297662	Name	Melva R Prasil
Relationship	Spouses		

(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.

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.

No

Non-Licensee Respondents should select "N/A" in response to this question.

The licensee entity is not owned by any parent entities.

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: Ida- Vend Company, Inc. Name: Robert W. Prasil , Jr Phone: 2088431551 02/15/2018