

FRN

Not Applicable

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

File Number: 0000041148 Submit Date: 2018-02-01 FRN: 0005022553 Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status Date: 02/01/2018 Status: Received Filing Status: Active

Section I - General Information

1. Respondent

Entity Name 0005022553 Kachemak Bay Broadcasting, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3913 Kachemak Way	Homer	AK	99603	+1 (907) 235- 7721	terry@kbbi. org

2. Contact Representative

Name	Organization
Lawrence M. Miller	Schwartz, Woods & Miller

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2001 L Street, N.W. Suite 900A	Washington	DC	20036-4940	+1 (202) 833-1700	miller@swmlaw.com

3. Application **Filing Fee**

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.

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

Licensee/Permittee Name FRN				
Kachemak Bay Broadcasting, Inc. 0005022553				
Fac. ID No.	Call Sign	City	State	Service
33256	КВВІ	HOMER	AK	АМ

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	0005022553		
Entity Name	Kachemak Bay Broadcasting, Inc.		
Address PO Box			
	Street 1	3913 Kachemak Way	
	Street 2		
	City	Homer	
	State ("NA" if non-U.S. address)	AK	
	Zip/Postal Code	99603	
	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 that do not appear on this re	attributable interest in one or port?	more broadcast stations	No

Ownership Information				
FRN	9990121347			
Name	Nicole Arevalo			
Address	PO Box	2099		
	Street 1			
	Street 2			
	City	Homer		
	State ("NA" if non-U.S. address)	АК		
	Zip/Postal Code	99603		
	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	Chef and Bartender			
By Whom Appointed or Elected	Membership			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	9.9%		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	No	

Ownership Information FRN 9990121350 Name Wayne Aderhold

Address	PO Box		
	Street 1	353 Grubstake	
	Street 2		
	City	Homer	
	State ("NA" if non-U.S. address)	АК	
	Zip/Postal Code	99603	
	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	membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.9%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Information			
FRN	9990121352	9990121352	
Name	Suzanne Bishop	Suzanne Bishop	
Address	PO Box	15237	
	Street 1		
	Street 2		
	City	Fritz Creek	
	State ("NA" if non-U.S. address)	AK	
	Zip/Postal Code	99603	
	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	teacher		
By Whom Appointed or Elected	membership		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.9%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

No

Ownership Information

FRN	9990121353	9990121353	
Name	Dave Eckwert		
Address	PO Box		
	Street 1	53243 McNeil Canyon Rd	
	Street 2		
	City	Homer	
	State ("NA" if non-U.S. address)	AK	
	Zip/Postal Code	99603	
	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	social services manager		
By Whom Appointed or Elected	membership		
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	9.9%	
(Free Free Standard			

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have	e an attributable interest in one o	more broadcast stations	No

that do not appear on this report?

Ownership Information			
FRN	9990121354		
Name	Genie Hambrick		
Address	PO Box	2767	
	Street 1		
	Street 2		
	City	Homer	
	State ("NA" if non-U.S. address)	АК	
	Zip/Postal Code	99603	
	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	business consultant		
By Whom Appointed or Elected	memebrship		
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	9.9%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information		
FRN	9990121355	
Name	Jenny Martin	
Address	PO Box	
	Street 1	58975 Ohlson Mountain Rd

	Street 2		
	City	Homer	
	State ("NA" if non-U.S. address)	АК	
	Zip/Postal Code	99603	
	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	Legislative Aide		
By Whom Appointed or Elected	membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.9%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownersh	nio Int	forma	tion

FRN	9990121356	
Name	Rudy Multz	
Address	PO Box	
	Street 1	64615 Shelton Dr
	Street 2	
	City	Homer
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99603
	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	mental health services		
By Whom Appointed or Elected	membership	membership	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.9%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No			No

that do not appear on this report?

Ownership Information			
FRN	9990121357		
Name	Robert Purcell		
Address	PO Box	15006	
	Street 1		
	Street 2		
	City	Fritz Creek	
	State ("NA" if non-U.S. address)	АК	
	Zip/Postal Code	99603	
	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	membership	membership	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.9%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have an	attributable interest in one or	more broadcast stations	No

that do not appear on this report?

Ownership Information			
FRN	9990121358		
Name	Kyle Schneider		
Address	PO Box		
	Street 1	135 Lee Dr.	
	Street 2	Apt 1B	
	City	Homer	
	State ("NA" if non-U.S. address)	АК	
	Zip/Postal Code	99603	
	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	teacher		
By Whom Appointed or Elected	membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.9%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have	an attributable interest in one o	or more broadcast stations	No

Ownership Information		
FRN	9990121359	
Name	Debbie Speakman	
Address	PO Box	93
	Street 1	
	Street 2	

	City	Homer	
	State ("NA" if non-U.S. address)	АК	
	Zip/Postal Code	99603	
	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	non profit executive director		
By Whom Appointed or Elected	membership		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.9%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?		No	

Ownership Information		
FRN	9990121360	
Name	Kelly Jackman	
Address	PO Box 3145	
	Street 1	
	Street 2	
	CityHomerState ("NA" if non-U.S. address)AKZip/Postal Code99603	
	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	self employed	

Citizenship Gender	US	
Gender		
	Female	
Ethnicity	Not Hispanic or Latino	
Race	White	
Voting	9.9%	
Equity	0.0%	
Total assets (Equity Debt Plus)		
attributable interest in one o port?	r more broadcast stations	No
	Voting Equity Total assets (Equity Debt Plus) attributable interest in one o	Voting 9.9% Equity 0.0% Total assets (Equity Debt Plus) Image: Comparison of the second comparison of

(b) Respondent certifies that any interests, including equ	uity, 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 with duties wholly unrelated to the Licensee(s)?	No
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.

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

Licensee has no other ownership interests.

Section III - 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).	
		Authorized Party to SignWILLFUL 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,

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: General Manager Exact Legal Title or Name of Respondent: Kachemak Bay Broadcasting, Inc. Name: Terry Rensel Phone: 9072357721 02/01/2018