

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

File Number:0000042579Submit Date:2018-02-20FRN:0004943189Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:02/20/2018Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name
0004943189	Spirit Communications, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 1887	Westerville	ОН	43086	+1 (614) 839- 7100	michael@radiou. com

2. Contact Representative

Name		Organization					
Michael Buckingham S		Spii	Spirit Communications, Inc.				
			Zip				
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email		

Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email
PO Box 1887	Westerville	ОН	43086	+1 (614) 839-7137	michael@radiou.com

3. Application Filing Fee Not Applicable

4. Control of Respondent

elationship to stations/permits	Licensee			
Is the Respondent's governing board (or other governing entity) directly or No indirectly under the control of another entity?				

(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.	

Licensee/Permitte	e Name	FRN		
Spirit Communications, Inc.			0004943189	
Fac. ID No.	Call Sign	City	State	Service
12527	WPRJ	COLEMAN	МІ	FM
20758	WUFM	COLUMBUS	ОН	FM

CA

WA

FΜ

FΜ

LOMPOC

GRANITE FALLS

Section II – Biennial Ownership Information

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

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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.

Document Information		
Description of contract or instrument	Articles of Incorporation	
Parties to contract or instrument	Spirit Communications, Inc.	
Date of execution	12/1993	
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	Bylaws
Parties to contract or instrument	Spirit Communications, Inc.
Date of execution	12/1993
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Bylaws

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	0004943189			
Entity Name	Spirit Communications, Inc.			
Address	PO Box	1887		
	Street 1			
	Street 2			
	City	Westerville		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	43086		
	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%		

that do not appear on this report?

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Ownership Information			
FRN	9990125786	9990125786	
Name	John Shumate, Sr.		
Address	PO Box		
	Street 1	8779 Birkdale Dr	
	Street 2		
	City	Sunbury	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43074	
	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	Development and construction		
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 14.3%		14.3%	
(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

9990125787 Kathy Shumate PO Box Street 1	8779 Birkdale Dr
PO Box Street 1	8779 Birkdale Dr
Street 1	8779 Birkdale Dr
	8779 Birkdale Dr
Stroot 2	
blieet Z	
City	Sunbury
State ("NA" if non-U.S. address)	ОН
Zip/Postal Code 43074	
Country (if non-U.S. address)	United States
Other Interest Holder	
Officer, Member of Governing Board (or other governing entity)	
Property and business management	
Membership	
Citizenship US	
Gender	Female
Ethnicity	Not Hispanic or Latino
Race	White
Voting 14.3%	
	tate ("NA" if non-U.S. ddress) ip/Postal Code country (if non-U.S. ddress) other Interest Holder officer, Member of Governing roperty and business manage lembership itizenship iender thnicity ace

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

that do not appear on this report?

Ownership Information FRN 9990125788 Name Karen Seidenschmidt Address PO Box 8311 Saybrook Dr Street 1 Street 2 City Westerville State ("NA" if non-U.S. OH address) 43082 **Zip/Postal Code** Country (if non-U.S. **United States** address) Other Interest Holder Listing Type Member of Governing Board (or other governing entity) **Positional Interests** (check all that apply) Principal Profession or Office manager Occupation Membership By Whom Appointed or Elected Citizenship, Gender, US Citizenship Ethnicity, and Race Gender Female **Information (Natural** Persons Only) Ethnicity Not Hispanic or Latino Race White **Interest Percentages** 14.3% Voting (enter percentage values 0.0% Equity from 0.0 to 100.0) 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	9990125789		
Name	Tammy Matias		
Address	PO Box		
	Street 1	996 Santana St	

	Street 2		
	City	Columbus	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43235	
	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	Social work		
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	14.3%	
(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?			No

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Owners	hip	Information	

FRN	9990125790		
Name	Robert Matias		
Address	PO Box		
	Street 1	996 Santana St	
	Street 2		
	CityColumbusState ("NA" if non-U.S. address)OHZip/Postal Code43235Country (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	Commercial real estate		
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have	Does interest holder have an attributable interest in one or more broadcast stations No		

that do not appear on this report?

Ownership Information			
FRN	9990125791		
Name	John Shumate, Jr.		
Address	PO Box		
	Street 1	972 Northstar Dr	
	Street 2		
	City	Sunbury	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43074	
	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	Real estate sales and management		
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	14.3%	
(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?

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

FRN	9990125792		
Name	Nicole Cantu		
Address	PO Box		
	Street 1	116 County Line Rd W	
	Street 2		
	City	Westerville	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43082	
	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	Operations manager		
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	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o report?	r more broadcast stations	No

(c) 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.

Licensee without a parent entity.

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: Spirit Communications, Inc. Name: John Shumate , Sr Phone: 6148397100 02/19/2018