

(REFERENCE COPY - Not for submission)

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

File Number: 0000045063 | Submit Date: 2018-02-28 | FRN: 0020030748

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/28/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	ı	Entity Name
002	0030748	St. Gabriel Communications

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
2900 Westown Parkway Suite 220	West Des Moines	IA	50266- 1300	+1 (515) 223-1150	contact@lowaCatholicRadio.

2. Contact Representative

Name	Organization
Dennis J. Kelly	Law Office of Dennis J. Kelly

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
Post Office Box 41177	Washington	DC	20018- 0577	+1 (202) 293- 2300	dkellyfcclaw1@comcast. net

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.	

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN
St. Gabriel Communications	0020030748

Fac. ID No.	Call Sign	City	State	Service
92489	KIHS	ADEL	IA	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.

Document Information		
Description of contract or instrument	Articles of Incorporation	
Parties to contract or instrument	State of Iowa	
Date of execution	11/2004	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate	

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	0020030748			
Entity Name	St. Gabriel Communications			
Address	РО Вох			
	Street 1	2900 Westown Parkway		
	Street 2	Suite 220		

	City	West Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50266-1300	
	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 that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	9990040330		
Name	Mark R. Adams		
Address	PO Box		
	Street 1	4201 Westown Parkway	
	Street 2	Suite 250	
	City	West Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50266-6720	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Attorney at Law		
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 from 0.0 to 100.0)	Voting	0.0%	
	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?			Yes

Ownership Information			
FRN	9990110851		
Name	Rick Ball		
Address	РО Вох		
	Street 1	10550 New York Avenue	
	Street 2	Suite 100	
	City	Urbandale	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50322-3744	
	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	President, Ball Team Construction		
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	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	Yes

Ownership Information		
FRN	9990040421	
Name	Brett Bosworth	
Address	PO Box	

	Street 1	1225 Jordan Creek Parkway	
	Street 2		
	City	West Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50266-2345	
	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	President, R and R Equity Partners		
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	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information		
FRN	9990110869	
Name	Julie Carmody	
Address	PO Box	
	Street 1	14162 Willow Drive
	Street 2	
	City	Clive
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50325-8318
	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	Physician		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	er more broadcast stations Yes	

Ownership Information			
FRN	9990131072		
Name	Brad Duffy		
Address	PO Box		
	Street 1	795 SE Oak Leaf Drive	
	Street 2		
	City	Waukee	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50263-8190	
	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	Division President, Per Mar Security Services		
By Whom Appointed or Elected	Board of Directors	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	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

Total assets (Equi	y Debt 0.	.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or mo	ore broadcast stations	Yes

Ownership Information			
FRN	9990110885		
Name	Dave Freeseman		
Address	РО Вох		
	Street 1	5700 University Avenue	
	Street 2	Suite 222	
	City	West Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50266-8276	
	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	Regional Director, Rock Valley Physical Therapy		
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	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this r	n attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	9990068778		
Name	Tim Jameson		
Address	РО Вох		
	Street 1	3101 SW 61st Street	
	Street 2		

	City	Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50321-1212	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Outdoor Advertising Executive		
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	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations Yes	

Ownership Information			
FRN	9990110901		
Name	Rev. Zach Kautzky		
Address	PO Box		
	Street 1	1400 Buffalo Road	
	Street 2		
	City	West Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50265-1626	
	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	Roman Catholic Priest		

By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.7%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations Yes	

Ownership Information			
FRN	9990040397		
Name	Joe Lane	Joe Lane	
Address	PO Box		
	Street 1	4165 - 120th Street	
	Street 2		
	City	Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50323-2314	
	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	Chairman, Merit Resources		
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	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt 0.0% Plus)		

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

Yes

Ownership Information			
FRN	9990110919		
Name	Terry McGonegle	Terry McGonegle	
Address	PO Box		
	Street 1	5930 Grand Avenue	
	Street 2		
	City	West Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50266-5302	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	CFO, Wright Tree Service		
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	Race White	
Interest Percentages	Voting	7.7%	
(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 Yes that do not appear on this report?			

Ownership Information			
FRN	9990092596	9990092596	
Name	Tom Moreland	Tom Moreland	
Address	РО Вох	PO Box	
	Street 1	Post Office Box 838	
	Street 2		
	City	Des Moines	

	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50304-0838	
	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	CEO, home healthcare comp	CEO, home healthcare company	
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	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one or	or more broadcast stations	Yes

Ownership Information		
FRN	9990040249	
Name	Joseph E. Teeling	
Address	РО Вох	
	Street 1	715 South Fork Drive
	Street 2	
	City Waukee	
	State ("NA" if non-U.S. IA address)	
	Zip/Postal Code 50263-9581	
	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	Chairman and CEO,Bearence Management Group	
By Whom Appointed or Elected	Board of Directors	

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.7%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations Yes	

Ownership Information			
FRN	9990040256		
Name	Michael J. Vasquez	Michael J. Vasquez	
Address	РО Вох		
	Street 1	3807 Thornton Drive	
	Street 2		
	City	Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50321-1862	
	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 Governing Board (or other governing entity)		
Principal Profession or Occupation	CEO, St. Gregory Centers		
By Whom Appointed or Elected	Board of Directors	Board of Directors	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations Yes	

Ownership Information			
FRN	9990131098		
Name	Laura Wenman		
Address	PO Box		
	Street 1	1111 6th Avenue	
	Street 2		
	City	Des Moines	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50314	
	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	Vice President, Mission Integration, Mercy Medical Center		
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	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
Total assets (Equity Debt 0.0% Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes
	at any interests, including equitions filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," 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.	

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 is a non-profit corporation controlled by its board of directors.

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: St. Gabriel Communications Name: Joseph E. Teeling Phone: 5152231150 02/28/2018