



(REFERENCE COPY - Not for submission)

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

File Number: **0000046097** | Submit Date: **2018-03-01** | FRN: **0025820580**

Purpose: **Noncommercial Broadcast Stations Non-Biennial Ownership Report** | Status: **Received** | Status Date:

03/01/2018 | Filing Status: **Active**

Section I - General Information

1. Respondent

FRN		Entity Name			
0025820580		Boise Community Radio Project			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1020 W. Main St Suite #50	Boise	ID	83702	+1 (208) 258-2072	ballred@radioboise.org

2. Contact Representative

Name		Organization			
Brian D. Allred		Boise Community Radio Project			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
28 N. Greenleaf St.	Nampa	ID	83651	+1 (208) 477-9499	ballred@radioboise.org

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Entity required to file a Form 323-E because it holds an attributable interest in one or more Licensees or Permittees
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	Transfer of control or assignment of license/permit
"As of" date	03/01/2018 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) /Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee Name	FRN
Boise Community Radio Project	0025820580

Fac. ID No.	Call Sign	City	State	Service
173448	KRBX	CALDWELL	ID	FM

Section II – Non-Biennial Ownership Information

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

Licensee/Permittee Respondents 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/Permittee 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) or Permittee(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) or Permittee(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	0025820580	
Entity Name	Boise Community Radio Project	
Address	PO Box	
	Street 1	1020 W. Main St
	Street 2	Suite #50
	City	Boise
	State ("NA" if non-U.S. address)	ID
	Zip/Postal Code	83702
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
Positional Interests (check all that apply)	Respondent	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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?			No

Ownership Information			
FRN	9990132371		
Name	Dave Foster		
Address	PO Box		
	Street 1	6458 W. Wintergard St.	
	Street 2		
	City	Boise	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83714	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Senior Director of Solution Innovations, Healthwise		
By Whom Appointed or Elected	Elected		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	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	9990132392		
Name	Kristen Cheney		
Address	PO Box		
	Street 1	409 N. Bacon Dr	
	Street 2		
	City	Boise	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83712	

	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Retired	
By Whom Appointed or Elected	Elected	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%
	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	9990132406	
Name	Rochelle Nystrom	
Address	PO Box	
	Street 1	200 N. Third
	Street 2	
	City	Boise
	State ("NA" if non-U.S. address)	ID
	Zip/Postal Code	83702
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	CEO, Nystrom Consulting	
By Whom Appointed or Elected	Elected	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%
	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	9990132410
Name	Dave Petty

Address	PO Box		
	Street 1	1809 N. 3rd St	
	Street 2		
	City	Boise	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83702	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	CFO, Mirage Enterprises		
By Whom Appointed or Elected	Elected		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	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	9990132445		
Name	Beth Markley		
Address	PO Box		
	Street 1	5660 Drawbridge Drive	
	Street 2		
	City	Boise	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83703	
	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	Independent nonprofit development consultant		
By Whom Appointed or Elected	Elected		
Interest Percentages (enter percentage values	Voting	8.3%	

from 0.0 to 100.0)	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	9990132450	
Name	Francisco Salinas	
Address	PO Box	
	Street 1	869 South Patrick Place
	Street 2	
	City	Boise
	State ("NA" if non-U.S. address)	ID
	Zip/Postal Code	83709
	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	Director of Student Diversity and Inclusion, Boise State University	
By Whom Appointed or Elected	Elected	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%
	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	9990132464	
Name	James Lineberger	
Address	PO Box	
	Street 1	2717 W. Edgemore Lane
	Street 2	
	City	Boise
	State ("NA" if non-U.S. address)	ID
	Zip/Postal Code	83702
	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	Executive Director, Anesthesia Associates of Boise		
By Whom Appointed or Elected	Elected		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	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	9990132470		
Name	Alex Davis		
Address	PO Box		
	Street 1	1320 E. Warm Springs Ave	
	Street 2		
	City	Boise	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83712	
	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	Creative Strategist		
By Whom Appointed or Elected	Elected		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	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	9990132474	
Name	Daniel Glynn	
Address	PO Box	
	Street 1	3910 W. Hillcrest Drive

	Street 2		
	City	Boise	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83705	
	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	Attorney		
By Whom Appointed or Elected	Elected		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	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	9990132484		
Name	John Reusser		
Address	PO Box		
	Street 1	2409 N. 33rd St	
	Street 2		
	City	Boise	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83703	
	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	Director, Idaho Suicide Prevention Hotline		
By Whom Appointed or Elected	Elected		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	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
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Ownership Information		
FRN	9990132495	
Name	Daniel Felkins	
Address	PO Box	
	Street 1	506 Coston St
	Street 2	
	City	Boise
	State ("NA" if non-U.S. address)	ID
	Zip/Postal Code	83712
	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	
By Whom Appointed or Elected	Elected	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%
	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	9990132500	
Name	Jason Prettyboy	
Address	PO Box	
	Street 1	1661 W. 4th
	Street 2	
	City	Kuna
	State ("NA" if non-U.S. address)	ID
	Zip/Postal Code	83634
	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	Organizer, Snake River Alliance		
By Whom Appointed or Elected	Elected		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	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	

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(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.	No
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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 LICENSE --OR 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: Operations Manager Exact Legal Title or Name of Respondent: Boise Community Radio Project Name: Brian Allred Phone: 2084779499 03/01/2018