

FRN

0011397072

Not Applicable

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

 File Number:
 0000069100
 Submit Date:
 2019-04-02
 FRN:
 0011397072

Purpose: Noncommercial Broadcast Stations Non-Biennial Ownership ReportStatus: ReceivedStatus Date:04/02/2019Filing Status: Active

Section I - General Information

1. Respondent

Entity Name

Kansas Nebraska Good News Broadcasting Corporation

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
38005 Road 717	McCook	NE	69001	+1 (308) 345- 2006	ree@kngn. org

2. Contact Representative

Name	Organization
John S. Neely, Esq.	Miller and Neely PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
3750 University Blvd., West Suite 203	Kensington	MD	20895	+1 (301) 933-6304	johnsneely@yahoo.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	Transfer of control or assignment of license/permit
"As of" date	04/01/2019
	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
Kansas Nebraska Good News Broadcasting Corporation				0011397072
Fac. ID No.	Call Sign	City	State	Service

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.

Document Information		
Description of contract or instrument	Bylaws (amended)	
Parties to contract or instrument	company	
Date of execution	10/2007	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: organization document	

Document Information		
Description of contract or instrument	Articles of Incorporation	
Parties to contract or instrument	company	
Date of execution	10/1992	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: organization document	

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	0011397072			
Entity Name	Kansas Nebraska Good News Broadcasting Corporation			
Address	PO Box			
	Street 1	38005 Road 717		
	Street 2			
	City	McCook		
	State ("NA" if non-U.S. address)	NE		
	Zip/Postal Code	69001		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information			
FRN	9990116015		
Name	Loyd Christner		
Address	PO Box		
	Street 1	38005 Road 717	
	Street 2		
	City	McCook	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	69001	
	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 farmer		
By Whom Appointed or Elected	board of directors		
Interest Percentages	Voting 16.6%		

(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an that do not appear on this re	r more broadcast stations	No	

Ownership Information				
FRN	9990115983			
Name	Larry Ruppert			
Address	PO Box			
	Street 1	38005 Road 717		
	Street 2			
	City	McCook		
	State ("NA" if non-U.S. address)	NE		
	Zip/Postal Code	69001		
	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	farmer			
By Whom Appointed or Elected	board of directors			
Interest Percentages	Voting	16.6%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information			
FRN	9990116007		
Name	Judy Schow		
Address	PO Box		
	Street 1	38005 Road 717	
	Street 2		
	City McCook		
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	69001	
	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	retied		
By Whom Appointed or Elected	board of directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information			
FRN	9990135716		
Name	Bobbie Ziebell		
Address	PO Box		
	Street 1	38005 Road 717	
	Street 2		
	City	McCook	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	69001	
	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	Retail Manager		
By Whom Appointed or Elected	board of directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership InformationFRN9990135717NameRuss AnkersonAddressPO BoxStreet 138005 Road 717

	Street 2		
	City	McCook	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	69001	
	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	Manufacturer Quality-Control		
By Whom Appointed or Elected	board of directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	
	Total assets (Equity Debt Plus)	0.0%	
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	9990135718	
Name	Rev. Justin Hildebrand	
Address	PO Box	
	Street 1	38005 Road 717
	Street 2	
	City	McCook
	State ("NA" if non-U.S. address)	NE
	Zip/Postal Code	69001
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	clergy	
By Whom Appointed or Elected	board of directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%
	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
(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

(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.	

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: Reverend Exact Legal Title or Name of Respondent: Kansas Nebraska Good News Broadcasting Corp Name: Justin Hildebrand Phone: 3083452006 04/02/2019