Response

No



#### Federal Communications Commission (REFERENCE COPY - Not for submission)

# Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000101408Submit Date:2020-01-29FRN:0002325793Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:01/30/2020Filing Status:Active

## **Section I - General Information**

### 1. Respondent

FRN	Entity Name
0002325793	KNZA Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1828 US Hwy 73	Hiawatha	KS	66434	+1 (785) 547- 3461	gregbuser@rainbowtel. net

#### 2. Contact Representative

Name	Organization
David D. Oxenford	Wilkinson Barker Knauer, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW Suite 800N	Washington	DC	20036	+1 (202) 783- 4141	doxenford@wbklaw. com

### 3. Application Filing Fee

## Question

Is this application being submitted without a filing fee?

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	5	95	\$350.00
				•	Total	\$350.00

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	For-profit corporation	

(b) Provide the following information about this report:

Purpose	Biennial
"As of" date	10/01/2019
	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) and Station(s)

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

Licensee/Permittee Name	FRN
KNZA Inc.	0002325793

Fac. ID No.	Call Sign	City	State	Service
8081	KTNC	FALLS CITY	NE	AM
33397	KAIR-FM	HORTON	KS	FM
35285	KNZA	HIAWATHA	кs	FM
35286	KLZA	FALLS CITY	NE	FM
35287	KMZA	SENECA	KS	FM

## Section II – Biennial Ownership Information

#### 1. 47 C.F.R. Section 73.3613 and Other 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. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Document Information				
Description of contract or instrument	BUY/SELL AGREEMENT			
Parties to contract or instrument	GREGORY F. BUSER/ROBERT B. HILTON			
Date of execution	06/1992			

Date of expiration	No expiration date
Agreement type	Other
(check all that apply)	Agreement Type: Agreement

Document Information	
Description of contract or instrument	ARTICLES OF INCORPORATION
Parties to contract or instrument	ATCHISON COUNTY, KS
Date of execution	06/1983
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	By-Laws	
Parties to contract or instrument	Brown County, KS	
Date of execution	06/1983	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: By-Laws	

#### **Document Information**

Description of contract or instrument	PROMISSORY NOTE
Parties to contract or instrument	KNZA, INC & GREG BUSER
Date of execution	03/2013
Date of expiration	12/2021
Agreement type (check all that apply)	Other Agreement Type: Note

#### **Document Information**

Description of contract or instrument	Security Agreement
Parties to contract or instrument	Union State Bank
Date of execution	03/2017
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Agreement

#### **Document Information**

Description of contract or instrument FOX NEWS AFFILIATION AGREEMENT	
Parties to contract or instrument	KNZA, Inc.
Date of execution	02/2015
Date of expiration	03/2021

Agreement type (check all that apply)	Network Affiliation Agreement
Document Information	
Description of contract or instrument	FOX NEWS AFFILIATION AGREEMENT
Parties to contract or instrument	KNZA, Inc.
Date of execution	05/2015
Date of expiration	03/2021

Network Affiliation Agreement

#### **Document Information**

Agreement type (check all that apply)

Description of contract or instrument	FOX NEWS AFFILIATION AGREEMENT
Parties to contract or instrument	KNZA, Inc.
Date of execution	03/2015
Date of expiration	03/2021
Agreement type (check all that apply)	Network Affiliation Agreement

#### 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, directors, stockholders, non-insulated partners, non-insulated members, 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	0002325793	
Entity Name	KNZA Inc.	
Address	PO Box	
	Street 1	1828 US Hwy 73
	Street 2	
	City	Hiawatha
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	State ("NA" if non-U.S. address)	KS	
	Zip/Postal Code	66434	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
<b>Positional Interests</b> (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
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 c	r more broadcast stations	No

that do not appear on this report?

## **Ownership Information**

FRN	0019901958			
Name	Gregory F. Buser			
Address	PO Box			
	Street 1	2276 MULBERRY ROAD		
	Street 2			
	City	HIAWATHA		
	State ("NA" if non-U.S. address)	KS	KS	
	Zip/Postal Code	66434		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Officer, Director, Stockholder			
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	51.0% Jointly Held? No		
	Equity	51.0%		
	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	0012639340		
Name	Robert B. Hilton		
Address	PO Box		
	Street 1	431 SEAPORT CIRCLE	
	Street 2		
	City	Liberty	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	64068	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director, Stockholder		
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	0.0%	Jointly Held? No
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	No

**Ownership Information** 

that do not appear on this report?

FRN	0025045824	
Name	Justin D. Fluke	
Address	PO Box	
	Street 1	11168 TIMBER RIDGE DRIVE
	Street 2	
	City	Holton
	State ("NA" if non-U.S. address)	KS
	Zip/Postal Code	66436

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Stockholder		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.0%	Jointly Held? No
	Equity	8.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations			No

# **Ownership Information**

that do not appear on this report?

FRN	0027119874			
Entity Name	ROBERT B. HILTON AND KAY L. HILTON TRUST DATED JUNE 3, 2008			
Address	PO Box			
	Street 1	1828 US Hwy 73		
	Street 2			
	City	HIAWATHA		
	State ("NA" if non-U.S. address)	KS		
	Zip/Postal Code	66434		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	41.0%	Jointly Held? No	
	Equity	41.0%		
	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?				

(c) Does the Respondent or any reported interest holder No hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555? If "Yes," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option. NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here. If using the subform, 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 newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard. 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.

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

(e) 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.	

#### 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.

KNZA, Inc. has a parent, Robert B. Hilton and Kay L. Hilton Trust dated June 3, 2008

# 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: <b>President</b> Exact Legal Title or Name of Respondent: <b>KNZA, Inc.</b> Name: <b>Gregory F Buser</b> Phone: <b>7855473461</b> 01/29/2020