

### (REFERENCE COPY - Not for submission)

FRN

Not Applicable

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

File Number:0000090353Submit Date:2019-11-19FRN:0003786696Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:11/19/2019Filing Status:Active

# **Section I - General Information**

### 1. Respondent

# Entity Name

0026494930	THE CHRISTINE SEATON EPP TRUST

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
2404 Farmers Valley Road	Henderson	NE	68371	+1 (785) 776-1350	corey@manhattanbroadcasting. com

### 2. Contact Representative

Name	Organization	
David D. Oxenford	Wilkinson Barker Knauer, LLP	

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

## 3. Application Filing Fee

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees			
Nature of Respondent	Other Trust			

(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
Manhattan Broadcasting Company	0003786696

Fac. ID No.	Call Sign	City	State	Service
37775	KXBZ	MANHATTAN	KS	FM
39783	KMAN	MANHATTAN	KS	AM
39784	KMKF	MANHATTAN	KS	FM
65598	KBLS	NORTH FORT RILEY	KS	FM
88543	KACZ	RILEY	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.

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, 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	0026494930			
Entity Name	THE CHRISTINE SEATON EPP TRUST			
Address	PO Box			
	Street 1	2404 Farmers Valley Road		
	Street 2			
<b>City</b> Henderson		Henderson		

	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68371	
	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 (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?

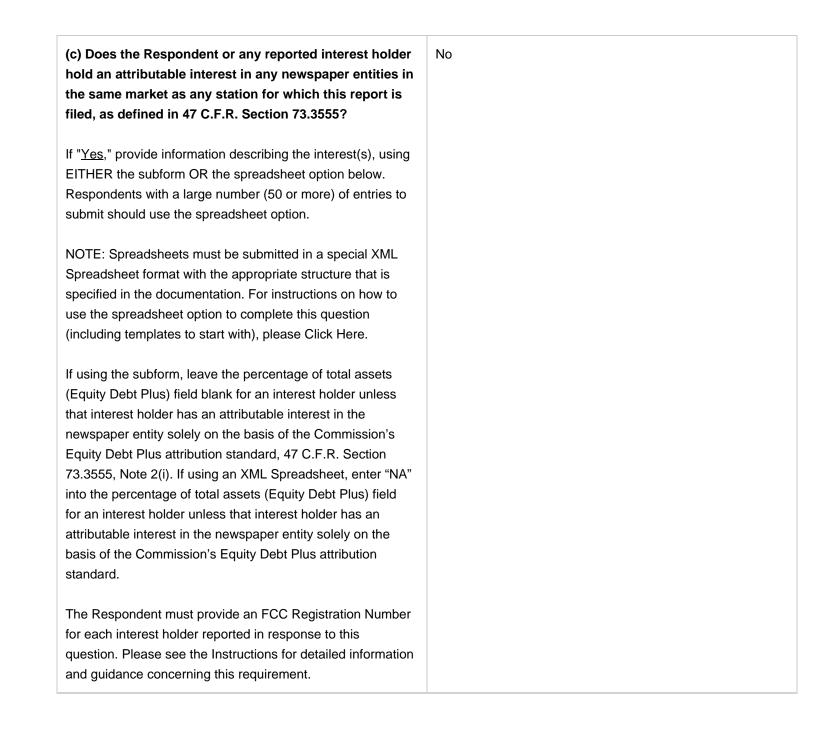
### **Ownership Information**

FRN	0027259456			
Name	Johanna C. Epp	Johanna C. Epp		
Address	PO Box			
	Street 1	2404 Farmers Valley Road		
	Street 2			
	City	Henderson		
	State ("NA" if non-U.S. address)	NE		
	Zip/Postal Code	68371	68371	
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Other - Trustee			
Citizenship, Gender,	Citizenship	enship US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	50.0%		
	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	0019501782				
Name	Monica M. Seaton				
Address	PO Box	909			
	Street 1				
	Street 2				
	City	Dodge City			
	State ("NA" if non-U.S. address)	KS			
	Zip/Postal Code	67801			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Other - Trustee				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Female			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	White			
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	50.0%			
Total assets (Equity Debt Plus)					
Does interest holder have an attributable interest in one or more broadcast stations No hat do not appear on this report?					
b) Respondent certifies that any interests, including equity, financial, or voting Interests, not reported in this filing are non-attributable. "No," submit as an exhibit an explanation.					



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

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

ramity relationships			
FRN	0019501782	Name	Monica M Seaton
FRN	0027259456	Name	Johanna C Epp
Relationship	Siblings		

#### Family Relationships

(e) 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.	

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>Trustee</b> Exact Legal Title or Name of Respondent: <b>The</b> <b>Christine Seaton Epp Trust</b> Name: <b>Cristine Epp</b> Phone: <b>7857761350</b> 11/19/2019