

FRN

0017011867

Not Applicable

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

 File Number:
 0000096002
 Submit Date:
 2020-01-09
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 Purpose:
 Noncommercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/09/2020

 Filing Status:
 Active
 Status
 Status Date:
 01/09/2020

Section I - General Information

Calvary Chapel of Grangeville, Inc.

1. Respondent

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 507 517 W. North St	Grangeville	ID	83530	+1 (208) 983- 5433	dhuibreg@gmail. com

2. Contact Representative

Name	Organization
Dean Huibregtse	Calvary Chapel of Grangeville, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 507 517 W. North St	Grangeville	ID	83530	+1 (208) 983-5433	dhuibreg@gmail.com

3. Application Filing Fee

4. Control of Respondent

(a) Provide the following information	on about the Respondent	::			
Relationship to stations/permits	Entity required to file a F more Licensees or Perm		ds an attributable interest in one or		
Is the Respondent's governing board (or other governing entity) directly or No indirectly under the control of another entity?					
(b) Provide the following information	on about this report:				
Purpose		Biennial			
"As of" date		10/01/2019			
		and resubmitting a pri	ownership report or validating or biennial ownership report, this the year in which this report is		

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name			FRN	
Calvary Chapel of Grange	ville, Inc.		0017011867	
Fac. ID No.	Call Sign	City	State	Service
172786	KKRH	GRANGEVILLE	ID	FM
172903	KKAG	GRANGEVILLE	ID	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.

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) 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	0017011867		
Entity Name	Calvary Chapel of Grangeville, Inc.		
Address	PO Box	507	
	Street 1	517 W. North St	
	Street 2		
	City	Grangeville	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83530	
	Country (if non-U.S. address)	United States	

Ownership Information

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 0.0% Plus) 0.0%			
Does interest holder have that do not appear on this	an attributable interest in one o report?	or more broadcast stations	Yes

Ownership Information

FRN	0027198423	
Name	Dean Huibregtse	
Address	PO Box	
	Street 1	519 Dawn Drive
	Street 2	
	City	Grangeville
	State ("NA" if non-U.S. address)	ID
	Zip/Postal Code	83530
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Pastor	
By Whom Appointed or Elected	Board of Directors	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values	Voting	0.0%
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 No

Ownership Information			
FRN	0027198456		
Name	RICK KOPP		
Address	PO Box		
	Street 1	638 Burrell Av	
	Street 2		
	City	Lewiston	
	State ("NA" if non-U.S. address)	ID	
	Zip/Postal Code	83501	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Pastor		
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	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 a that do not appear on this r	n attributable interest in one o eport?	r more broadcast stations	No

Ownership Information		
FRN	0027198498	
Name	JOHN GARDNER	
Address	dress PO Box	
	Street 1	1786 4th Av
	Street 2	
	City	Clarkston
	State ("NA" if non-U.S. address)	WA
	Zip/Postal Code	99403

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Board Member		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,			
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
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	an attributable interest in one o	r more broadcast stations	No

that do not appear on this report?

FRN	0027198514	0027198514		
Name	DAVE BJUR			
Address	PO Box			
	Street 1	3428 8th St		
	Street 2			
	City	Lewiston		
	State ("NA" if non-U.S. address)	ID		
	Zip/Postal Code	83501		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Principal Profession or Occupation	Board Member			
By Whom Appointed or Elected	Board of Directors			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male		

	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?			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 "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.	

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: Pastor Exact Legal Title or Name of Respondent: Calvary Chapel of Grangeville, Inc. Name: Dean Huibregtse Phone: 2089835433 01/09/2020