



(REFERENCE COPY - Not for submission)

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

File Number: 0000104318 | Submit Date: 2020-01-31 | FRN: 0014078794

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 01/31/2020

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0014078794		Koahnic Broadcast Corporation			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3600 San Jeronimo Suite 480	Anchorage	AK	99508	+1 (907) 793-3500	csather@knba.org

2. Contact Representative

Name		Organization			
Melodie A. Virtue		Foster Garvey PC			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac St. NW 2nd Floor	Washington	DC	20007	+1 (202) 965-7880	melodie.virtue@foster.com

3. Application Filing Fee

Not Applicable

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	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
Koahnic Broadcast Corporation	0014078794

Fac. ID No.	Call Sign	City	State	Service
35289	KNBA	ANCHORAGE	AK	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.

Document Information	
Description of contract or instrument	Articles of Incorporation
Parties to contract or instrument	Alaska Non-Profit Corporation
Date of execution	02/1992
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	Amended and Restated By-Laws
Parties to contract or instrument	Alaska Non-Profit Corporation
Date of execution	11/2003
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Amended and Restated By-Laws

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	0014078794	
Entity Name	Koahnic Broadcast Corporation	
Address	PO Box	
	Street 1	3600 San Jeronimo
	Street 2	Suite 480
	City	Anchorage
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99508
	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 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

Ownership Information		
FRN	9990133314	
Name	Jaclyn Sallee	
Address	PO Box	
	Street 1	3322 West 72nd
	Street 2	
	City	Anchorage
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99502
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - President and CEO	
Principal Profession or	CEO of Koahnic Broadcast Corporation	

Occupation		
By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Equity	0.0%
	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	9990133317	
Name	Debra Call	
Address	PO Box	
	Street 1	10100 Schneiter Circle
	Street 2	
	City	Anchorage
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99507
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - ChairMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired - Non-Profit Executive, Operations	
By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%
	Equity	0.0%
	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
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Ownership Information		
FRN	9990133339	
Name	Emily Cross	
Address	PO Box	
	Street 1	4820 Leah Court
	Street 2	
	City	Anchorage
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99508
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - ChairMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Director of Operations for NANA Management Services	
By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native, White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%
	Equity	0.0%
	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	9990133341	
Name	Renea Saade	
Address	PO Box	
	Street 1	2138 Churchill Dr.
	Street 2	
	City	Anchorage
	State ("NA" if non-U.S. address)	AK

	Zip/Postal Code	99517
	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	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%
	Equity	0.0%
	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	9990133344	
Name	Inez Bielefeld	
Address	PO Box	
	Street 1	8306 Loganberry St.
	Street 2	
	City	Anchorage
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99502
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - SecretaryMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Alaska Native Corporation Administrative Manager	
By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race	Citizenship	US
	Gender	Female

Information (Natural Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	American Indian or Alaska Native, White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%	
	Equity	0.0%	
	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	9990133345		
Name	Denise Morris		
Address	PO Box	670183	
	Street 1		
	Street 2		
	City	Chugiak	
	State ("NA" if non-U.S. address)	AK	
	Zip/Postal Code	99567	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Vice ChairMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Director, Corporate Compliance, Health Care		
By Whom Appointed or Elected	Board		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	American Indian or Alaska Native	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%	
	Equity	0.0%	
	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	9990140461		

Name	Blake Beatty	
Address	PO Box	
	Street 1	8100 E. 6th Ave.
	Street 2	
	City	Anchorage
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99504
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - TreasurerMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Accountant, Controller	
By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%
	Equity	0.0%
	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	9990140462	
Name	Cynthia Ahwinona	
Address	PO Box	
	Street 1	1201 Denali St.
	Street 2	#113
	City	Anchorage
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99501
	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	
By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%
	Equity	0.0%
	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	9990140463	
Name	Allison Knox	
Address	PO Box	
	Street 1	11739 Birch Knoll Loop
	Street 2	
	City	Anchorage
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99515
	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	Vice President of Customer Experience, Health Care	
By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages (enter percentage values	Voting	12.5%

from 0.0 to 100.0)	Equity	0.0%
	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	9990140464	
Name	Charles Sather	
Address	PO Box	
	Street 1	17916 Sauvignon Circle
	Street 2	
	City	Eagle River
	State ("NA" if non-U.S. address)	AK
	Zip/Postal Code	99577
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Chief Operating Officer	
Principal Profession or Occupation	Chief Operating Officer of Koahnic Broadcast Corporation	
By Whom Appointed or Elected	CEO	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Equity	0.0%
	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

(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)?	No
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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.	
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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.

Licensee does not have a parent entity.

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 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: President and Chief Executive Officer Exact Legal Title or Name of Respondent: Koahnic Broadcast Corporation Name: Jaclyn Sallee Phone: 9077933501 01/31/2020