

#### (REFERENCE COPY - Not for submission)

FRN

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0004936134

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

 File Number:
 0000103805
 Submit Date:
 2020-01-31
 FRN:
 0004936134

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

 Filing Status:
 Active
 Status:
 Status Date:
 01/31/2020

## **Section I - General Information**

Chinook Concert Broadcasters, 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
165 E. 56th Avenue	Anchorage	АК	99518	+1 (907) 562- 4434	klef@klef. com

#### 2. Contact Representative

James R. Goodfellow Chinook Concert Broadcasters, Inc.	Name	Organization
	James R. Goodfellow	Chinook Concert Broadcasters, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
165 E. 56th Avenue	Anchorage	AK	99518	+1 (907) 562-4434	klef@klef.com

## 3. Application Filing Fee

#### Question

Is this application being submitted without a filing fee?	d without a filing fee?
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Response No

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	1	95	\$70.00
		·		·	Total	\$70.00

# 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	Validation and resubmission of a previously filed biennial report (certifying no changes from the previously filed biennial report) 0000042638
"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					
Chinook Concert Broadcasters, Inc.			000493613	0004936134	
Fac. ID No.	Call Sign	City	State	Service	
10839	KLEF	ANCHORAGE	AK	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 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	Articles of Incorporation		
Parties to contract or instrument	Shareholders/State of Alaska		
Date of execution	09/1995		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation		

### 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.

FRN	0004936134				
Entity Name	Chinook Concert Broadcasters, Inc.				
Address	PO Box				
	Street 1	165 E. 56th Avenue			
	Street 2				
	City	Anchorage			
	State ("NA" if non-U.S. address)	AK			
	Zip/Postal Code	99518			
	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 i	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 that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	No		

**Ownership Information** 

FRN	0020028189

Name	James R. Goodfellow			
Address	PO Box			
	Street 1	1200 I Street, #410		
	Street 2			
	City	Anchorage		
	State ("NA" if non-U.S. address)	АК		
	Zip/Postal Code	99501		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (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	62.8%	Jointly Held? Yes	
from 0.0 to 100.0)	Equity	62.8%		
	Total assets (Equity Debt Plus)	62.8%		
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

FRN	9990109390	
Name	Janice I. Goodfellow	
Address	PO Box	
	Street 1	1200 I Street, #410
	Street 2	
	City Anchorage	
	State ("NA" if non-U.S.AKaddress)	
	Zip/Postal Code 99501	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Stockholder	
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 from 0.0 to 100.0)	Voting	0.0%	<b>Jointly Held?</b> Yes
	Equity	62.8%	
	Total assets (Equity Debt Plus)	62.8%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information					
FRN	0020028312				
Name	Richard V. McClear				
Address	<b>PO Box</b> 796				
	Street 1				
	Street 2				
	City	Sitka			
	State ("NA" if non-U.S. address)	AK	АК		
	Zip/Postal Code	99835	99835		
	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	27.1%	Jointly Held? Yes		
	Equity	27.1%			
	Total assets (Equity Debt Plus)	27.1%			
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No		

FRN	0020028429
Name	Laura Olson

Address	PO Box			
	Street 1	1661 Pine Street, #636		
	Street 2			
	City	San Francisco		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	94109		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director, Stockholder			
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 from 0.0 to 100.0)	Voting	10.1%	Jointly Held? No	
	Equity	10.1%		
	Total assets (Equity Debt Plus)	10.1%		

FRN	9990124743	
Name	Suzi McClear	
Address	<b>PO Box</b> 796	
	Street 1	
	Street 2	
	City	Sitka
	State ("NA" if non-U.S. address)	АК
	Zip/Postal Code	99835
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Stockholder	
Citizenship, Gender,	Citizenship     US       Gender     Female	
Ethnicity, and Race Information (Natural		

Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? Yes
from 0.0 to 100.0)	Equity	27.1%	
	Total assets (Equity Debt Plus)	27.1%	
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No
	at any interests, including equi nis filing are non-attributable. an explanation.	ty, financial, or voting	Yes
hold an attributable interest the same market as any sta filed, as defined in 47 C.F.F. If "Yes," provide information EITHER the subform OR the Respondents with a large nu submit should use the spread NOTE: Spreadsheets must b Spreadsheet format with the specified in the documentation use the spreadsheet option t (including templates to start of If using the subform, leave the (Equity Debt Plus) field blanks that interest holder has an at newspaper entity solely on th Equity Debt Plus attribution s 73.3555, Note 2(i). If using a into the percentage of total a for an interest holder unless attributable interest in the ne basis of the Commission's Ex- standard.	describing the interest(s), using spreadsheet option below. mber (50 or more) of entries to dsheet option. we submitted in a special XML appropriate structure that is on. For instructions on how to o complete this question with), please Click Here. he percentage of total assets a for an interest holder unless tributable interest in the he basis of the Commission's standard, 47 C.F.R. Section in XML Spreadsheet, enter "NA" ssets (Equity Debt Plus) field that interest holder has an wspaper entity solely on the quity Debt Plus attribution	No	
for each interest holder report	rted in response to this tructions for detailed information		

(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.

#### Family Relationships

FRN	0020028312	Name	Richard V McClear
Relationship	Spouses		
Family Relationships			

raminy Relationships			
FRN	9990109390	Name	Janice I Goodfellow
FRN	0020028189	Name	James R Goodfellow
Relationship	Spouses		

(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.	

## 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**

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>Chinook Concert Broadcasters, Inc.</b> Name: <b>James R. Goodfellow</b> Phone: <b>9075624434</b> 01/31/2020

## Certification