

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: 0000108026 | Submit Date: 2020-03-16 | FRN: 0003771409

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

03/16/2020 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0003771409	Silver Rock Communications Inc.	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 1678	Red Lodge	MT	59068	+1 (406) 446- 1199	lboliphant@hotmail.

2. Contact Representative

Name	Organization
Leslie Brent Oliphant	Silver Rock Communications

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
5 Beaver Springs Lane	Red Lodge	MT	59068	+1 (406) 208-6005	lboliphant@hotmail.com

3. Application Filing Fee

Not Applicable

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	Transfer of control or assignment of license/permit		
"As of" date 02/25/2020			
	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) /Permittees(s) and Station(s)

/Permit(s)

Licensee/Permittee Name	FRN
Silver Rock Communications Inc.	0003771409

Fac. ID No.	Call Sign	City	State	Service
60408	KMXE-FM	RED LODGE	MT	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee/Permittee Respondents 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/Permittee 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	State of Montana, Silver Rock Communications Inc.
Date of execution	12/1989
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Corporate founding documents

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) or Permittee(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) or Permittee(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	0003771409		
Entity Name	Silver Rock Communications Inc.		
Address	PO Box 1678		
	Street 1		
Street 2			
	City	Red Lodge	

	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59068	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No

Ownership Information				
FRN	0006795405			
Name	LESLIE B. OLIPHANT			
Address	РО Вох			
	Street 1	5 Beaver Springs Lane		
	Street 2			
City Red Lodge State ("NA" if non-U.S. MT address)				
	Zip/Postal Code 59068			
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director, Stockholder			
Interest Percentages Voting 51.0% (enter percentage values		Jointly Held? No		
from 0.0 to 100.0) Total assets (Equity Debt 51.0% Plus)				
Does interest holder have a that do not appear on this r	n attributable interest in one ceport?	or more broadcast stations	No	

Ownership Information			
FRN	0020569349		
Name	Jeffrey S. Oliphant		
Address	РО Вох		
	Street 1	4 Rabbit Crossing Road	
	Street 2		

	City	Joliet		
	State ("NA" if non-U.S. address)	MT		
	Zip/Postal Code	59041		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director, Stockholder			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	49.0%	Jointly Held? No	
	Total assets (Equity Debt Plus)	49.0%		
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 interests, not reported in the If "No," submit as an exhibit a	Yes			

(c) Does the Respondent or any reported interest holder 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.

No

Yes

If " $\underline{\text{Yes}}$," provide the following information for each such the relationship.

Family Relationships					
FRN	0006795405	Name	LESLIE B OLIPHANT		
FRN	0020569349	Name	Jeffrey S Oliphant		
Relationship	Siblings				

(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.	

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: President Exact Legal Title or Name of Respondent: Sliver Rock Communications Inc. Name: Leslie Brent Oliphant Phone: 4064461199 03/16/2020