

(REFERENCE COPY - Not for submission)

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

File Number: 0000124928 | Submit Date: 2020-10-21 | FRN: 0027161777

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

10/21/2020 Filing Status: Active

### **Section I - General Information**

### 1. Respondent

FF	RN	Entity Name
0	027161777	Community Radio Partners

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2890 Washington Avenue	Frankfort	IN	46041	+1 (765) 242- 3440	randy@randylawson.

## 2. Contact Representative

Name	Organization
Richard Carr, Esq.	J. Richard Consulting, Inc.

Stree	et Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
5528 Stre	3 Trent et	Chevy Chase	MD	20815	+1 (301) 656-7053	jrichardcarr@gmail.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	Transfer of control or assignment of license/permit	
"As of" date	10/14/2020	
	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.	

# /Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee Name	FRN
Community Radio Partners	0027161777

Fac. ID No.	Call Sign	City	State	Service
87829	WIRE	LEBANON	IN	FM
93231	WCNB	DAYTON	IN	FM

### **Section II – Non-Biennial Ownership Information**

### 1. 47 C.F.R. Section 73.3613 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. If the agreement is 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 Indiana	
Date of execution	02/2015	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other  Agreement Type: Articles of Incorporation as Indiana Non- profit Corporation	

## 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) 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	0027161777	
Entity Name	Community Radio Partners	
Address	PO Box	
	Street 1	2890 Washington Avenue

Street 2		
City	Frankfort	
State ("NA" if non-U.S. address)	IN	
Zip/Postal Code	46041	
Country (if non-U.S. address)	United States	
Respondent		
Positional Interests (check all that apply)  Respondent		
Voting	0.0%	
Total assets (Equity Debt Plus)	0.0%	
	City State ("NA" if non-U.S. address) Zip/Postal Code Country (if non-U.S. address) Respondent Respondent Voting Total assets (Equity Debt	City Frankfort  State ("NA" if non-U.S. IN address)  Zip/Postal Code 46041  Country (if non-U.S. United States address)  Respondent  Respondent  Voting 0.0%  Total assets (Equity Debt 0.0%

Ownership Information		
FRN	0027169325	
Name	Matthew E. Scheidler	
Address	PO Box	
	Street 1	131 W. First Street
	Street 2	
	City	Greensburg
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	47240
	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	Radio	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages	Voting	20.0%
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or more broadcast stations  Yes that do not appear on this report?		

Ownership Information		
FRN	0026630699	

Name	BRENT G. LEE		
Address	PO Box		
	Street 1	132 South Franklin Street	
	Street 2		
	City	Greensburg	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	47240-3005	
	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	Radio		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information		
FRN	0027169341	
Name	Heather Black	
Address	РО Вох	
	Street 1	11194 E. Johnson Street
	Street 2	
	City	Frankfort
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46041
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder  Member of Governing Board (or other governing entity)  Radio  Board of Directors	
Positional Interests (check all that apply)		
Principal Profession or Occupation		
By Whom Appointed or Elected		

Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this	an attributable interest in one oreport?	r more broadcast stations	No

Ownership Information			
FRN	0027170562		
Name	Jerry D. Curtis		
Address	РО Вох		
	Street 1	8646 Burrell Lane	
	Street 2		
	City	Indianapolis	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46256	
	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	Radio		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations	No

Ownership Information		
FRN	0027172881	
Name	Randy Lawson	
Address	PO Box	
	Street 1	2890 Washington Avenue
	Street 2	
	City	Frankfort
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code 46041	

	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Radio  Board of Directors			
By Whom Appointed or Elected				
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes	
` ' '	at any interests, including equi	ty, financial, or voting	Yes	
If "No," submit as an exhibit an explanation.				

(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: Member of Governing Board Exact Legal Title or Name of Respondent: Community Radio Partners Name: Randy Lawson Phone: 7652423440