

(REFERENCE COPY - Not for submission)

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

File Number: 0000176257 | Submit Date: 2021-12-01 | FRN: 0011873114

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 12/01/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0011873114	Real Presence Radio	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
503 7th Street, North Suite 101	Fargo	ND	58102	+1 (701) 795-0122	joyce@realpresenceradio. com

2. Contact Representative

Name	Organization
Dennis J. Kelly	Law Office of Dennis J. Kelly

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
Post Office Box 41177	Washington	DC	20018- 0577	+1 (202) 293- 2300	dkellyfcclaw1@comcast. net

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	ts 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	10/01/2021
	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
Real Presence Radio	0011873114

Fac. ID No.	Call Sign	City	State	Service
18530	KZJZ	BABBITT	MN	FM
35863	KVXR	MOORHEAD	MN	AM
56811	KQAQ	AUSTIN	MN	AM
58590	KSMR	WINONA	MN	FM
60487	KGWD	SIOUX FALLS	SD	FM
69201	KWTL	GRAND FORKS	ND	AM
88658	WWEN	WENTWORTH	WI	FM
90269	KXRP	BISMARCK	ND	FM
90517	KJRC	RAPID CITY	SD	FM
91479	KBPG	MONTEVIDEO	MN	FM
122432	KGLL	GILLETTE	WY	FM
160559	WBKK	WILTON	MN	AM
172316	КРНА	MANDAN	ND	FM
174859	KSJP	IPSWICH	SD	FM
175622	KSTJ	HARTFORD	SD	FM
189545	KZZQ	RICHARDTON	ND	FM
190440	KZTW	TIOGA	ND	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	State of North Dakota	
Date of execution	12/2000	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate	

(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	0011873114		
Entity Name	Real Presence Radio		
Address	PO Box		
	Street 1	503 7th Street, North	
	Street 2	Suite 101	
	City	Fargo	
	State ("NA" if non-U.S. address)	ND	
	Zip/Postal Code	58102	
	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	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 or more broadcast stations that do not appear on this report?			

Ownership Information			
FRN	9990120475		
Name	Chuck Huber		
Address	PO Box		

	Street 1	4619 Blue Spruce Road	
	Street 2		
	City	Bismarck	
	State ("NA" if non-U.S. address)	ND	
	Zip/Postal Code	58503	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Real Estate Broker		
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	33.3%	
(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	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	9990120473		
Name	Jack Kennelly	Jack Kennelly	
Address	PO Box		
	Street 1	3013 Par Street, NE	
	Street 2		
	City Fargo State ("NA" if non-U.S. ND address)		
	Zip/Postal Code	58102-1729	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	Vice-President of Mission, SMP Health System	
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	33.3%
(enter percentage values 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	9990120471	
Name	Steve Loegering	
Address	PO Box	
	Street 1	16055 35th Street, SW
	Street 2	
	City	Casselton
	State ("NA" if non-U.S. address)	ND
	Zip/Postal Code	58012-9736
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Businessman	
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	Voting	33.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt	0.0%

	Plus)		
Does interest holder have that do not appear on this	an attributable interest in one or report?	more broadcast stations	No

Ownership Information			
FRN	9990144586		
Name	Mark Hollcraft		
Address	PO Box		
	Street 1	503 7th Street, North	
	Street 2	Suite 101	
	City	Fargo	
	State ("NA" if non-U.S. address)	ND	
	Zip/Postal Code	58102	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Executive Director, Real Presence Radio		
By Whom Appointed or Elected	Board of Directors	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	an attributable interest in one o	or more broadcast stations No	

Ownership Information		
FRN	0027173939	
Name	John S. Hajostek	
Address	PO Box Street 1 1206 47th Ave. North	
	Street 2	
	City	Fargo

	State ("NA" if non-U.S. address)	ND	
	Zip/Postal Code	58102	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer	Officer	
Principal Profession or Occupation	Chief Financial Officer		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	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 that do not appear on this	an attributable interest in one o	r more broadcast stations	No
	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	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.	

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.

 $\label{lem:constraint} \mbox{Applicant is a non-profit corporation governed by its board of directors.}$

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 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: Real Presence Radio Name: Chuck Huber Phone: 7017950122 12/01/2021