

Federal (REFERENCE COPY - Not for submission) Communications Operations

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000167567
 Submit Date:
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 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 11/09/2021

 Filing Status:
 Active
 Status
 Status Date:
 11/09/2021

Section I - General Information

1. Respondent

FRN Entity Name 0031591969 The LEK90 Trust

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
PO Box 788	Baton Rouge	LA	70821	+1 (225) 922-5117	dwarrington@powellbroadcasting. com

2. Contact Representative

Name	Organization
Charles L. Spencer	Phelps Dunbar, L.L.P.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
400 Convention Street Suite 1100	Baton Rouge	LA	70802- 5692	+1 (225) 376- 0235	Charles.Spencer@Phelps. com

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees		
Nature of Respondent	Other Trust		

(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.

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

•		0 ()		
Licensee/Permittee	Name		FRN	
Powell Broadcasting	000503	4467		
Fac. ID No.	Call Sign	City	State	Service
3971	KQNU	ONAWA	IA	FM
32998	KLEM	LE MARS	IA	AM
35055	ККМА	LE MARS	IA	FM
63940	ККҮҮ	WHITING	IA	FM
152251	K245AM	LE MARS	IA	FX

Section II – Biennial Ownership Information

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, as well as 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.

Not Applicable.

2. Ownership Interests

1.47 C.F.R.

and Other

Documents

Section 73.3613

(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.

Ownership Information			
FRN	0031591969)31591969	
Entity Name	The LEK90 Trust	ne LEK90 Trust	
Address	PO Box	788	
	Street 1		
	Street 2		
	City	Baton Rouge	

	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	70821	
	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	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 attributable interest in one c	or more broadcast stations	Yes

that do not appear on this report?

Ownership Information				
FRN	9990005978	9990005978		
Name	NANETTE NOLAND	NANETTE NOLAND		
Address	PO Box			
	Street 1	7 Country Club Place		
	Street 2			
	City	Baton Rouge		
	State ("NA" if non-U.S. address)	LA		
	Zip/Postal Code	70809		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee	Other - Trustee		
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	Voting	100.0%	Jointly Held? Yes	
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?

Yes

Ownership Information				
FRN	9990141969			
Name	Anne Thompson Kurz			
Address	PO Box			
	Street 1	9147 U.S. Highway 51		
	Street 2			
	City	St. Francisville		
	State ("NA" if non-U.S. address)	LA		
	Zip/Postal Code	70775		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Trustee			
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	Voting	100.0%	Jointly Held? Yes	
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 No that do not appear on this report?				

Ownership Information

FRN	9990141970		
Name	Nancy Price		
Address	PO Box		
	Street 1	12 Chenal Circle	
	Street 2		
	City	Little Rock	
	State ("NA" if non-U.S. address)	AR	
	Zip/Postal Code	72223	

	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Trustee			
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	Voting	100.0%	Jointly Held? Yes	
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 No that do not appear on this report?				
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.If "No," submit as an exhibit an explanation.				

(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 " <u>Yes</u> ," 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.
and guidance concerning this requirement.

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

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: Trustee Exact Legal Title or Name of Respondent: The LEK90 Trust Name: Nanette Noland Phone: 2259224665 11/09/2021

No

No