

### (REFERENCE COPY - Not for submission)

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

 File Number:
 0000168432
 Submit Date:
 2021-11-12
 FRN:
 003749124

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 11/12/2021

 Filing Status:
 Active
 Status:
 Received
 Status Date:
 11/12/2021

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

### 1. Respondent

 FRN
 Entity Name

 0003749124
 IED.COM, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 41	Marion	IL	62959	+1 (618) 997- 1500	wbvn@midwest. net

### 2. Contact Representative

Kenneth W. Anderson		ied.c	ied.com			
<b>0</b>		<b>.</b>	Zip			
Street Address	City (and Country if non U.S. address)	State	Code	Phone	Email	
PO Box 41	Marion	IL	62959	+1 (618) 997-1500	wbvn@midwest.net	

Organization

### 3. Application Filing Fee

### Question

Name

Is this application being submitted without a filing fee?

Response No

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	1	95	\$85.00
		•	•	*	Total	\$85.00

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Not-for-profit corporation	

(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	
IED.COM, Inc.	0003749124	

Fac. ID No.	Call Sign	City	State	Service
34015	WBVN	CARRIER MILLS	IL	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, 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.

Document Information				
Description of contract or instrument	Marketing Agreement			
Parties to contract or instrument	IED.Com Believers Voice Network, Inc.			
Date of execution	01/2021			
Date of expiration	01/2022			
Agreement type (check all that apply)	Attributable LMA			

(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	0003749124			
Entity Name	IED.COM, Inc.			
Address	<b>PO Box</b> 41			
	Street 1			
	Street 2			
	City	Marion		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62959		
	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 n	ation 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 or more broadcast stations No that do not appear on this report?			

**Ownership Information** 

FRN	0027275015	
Name	Kenneth W. Anderson	
Address	<b>PO Box</b> 41	

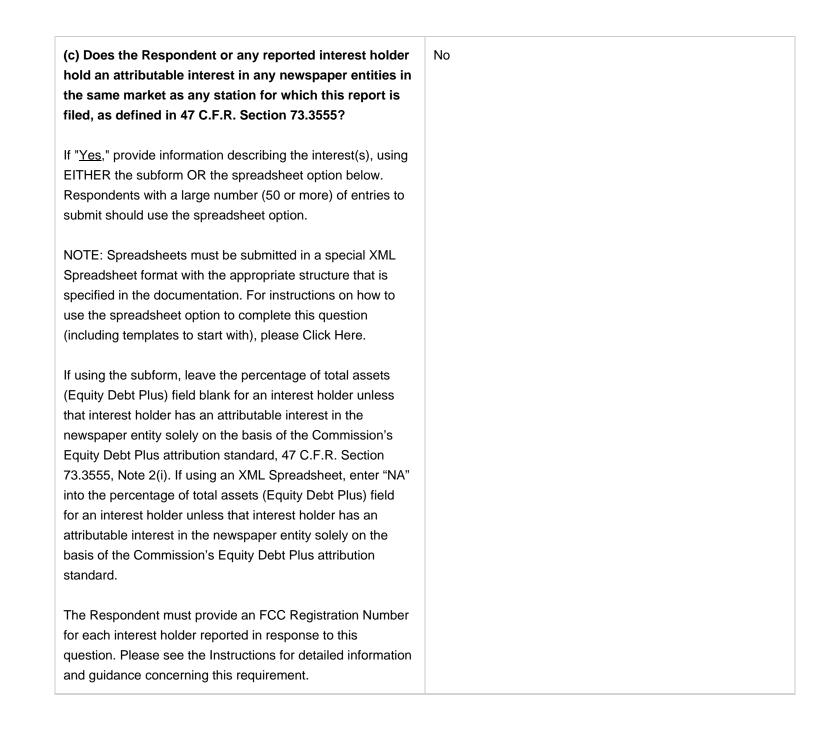
	Street 1				
	Street 2				
	City	Marion			
	State ("NA" if non-U.S. address)	IL			
	Zip/Postal Code	62959	62959		
	Country (if non-U.S. address)	f non-U.S. United States			
Listing Type	Other Interest Holder				
<b>Positional Interests</b> (check all that apply)	Officer, Director, Stockholder				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	White			
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? Yes		
from 0.0 to 100.0)	Equity	80.0%			
	Total assets (Equity Debt Plus)	80.0%			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No		

#### **Ownership Information** FRN 0027275031 Jane A. Anderson Name 41 Address **PO Box** Street 1 Street 2 City Marion State ("NA" if non-U.S. IL address) **Zip/Postal Code** 62959 Country (if non-U.S. **United States** address) Listing Type Other Interest Holder Officer, Director, Stockholder **Positional Interests** (check all that apply) Citizenship, Gender, US Citizenship Ethnicity, and Race Gender Female Information (Natural Persons Only) Ethnicity Not Hispanic or Latino

	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	<b>Jointly Held?</b> Yes	
	Equity	80.0%		
	Total assets (Equity Debt Plus)	80.0%		
Does interest holder have a that do not appear on this r	n attributable interest in one of eport?	r more broadcast stations	No	

Ownership Information				
FRN	0027271519			
Entity Name	Believers Voice Network, Inc.			
Address	PO Box	41		
	Street 1			
	Street 2			
	City	Marion		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62959		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder			
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	20.0%		
	Total assets (Equity Debt Plus)	20.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No	

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	



(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	0027275015	Name	Kenneth W Anderson
FRN	0027275031	Name	Jane A Anderson
Relationship	Spouses		

No

#### Family Relationships

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

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.

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.

## 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: <b>President</b> Exact Legal Title or Name of Respondent: <b>ied.</b> <b>com</b> Name: <b>Kenneth W Anderson</b> Phone: <b>6189971500</b> 11/12/2021