

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

 File Number:
 0000184368
 Submit Date:
 2022-02-03
 FRN:
 0001545607

Purpose: Noncommercial Broadcast Stations Non-Biennial Ownership ReportStatus: ReceivedStatus Date:02/03/2022Filing Status: Active

Section I - General Information

1. Respondent

Entity Name

Family Stations, Inc.

0001545607

FRN

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
112 NORTH ELM STREET	SHENANDOAH	IA	51601	+1 (712) 246-5151	JBURKHISER@FAMILYRADIO. ORG

2. Contact Representative

Name	Organization
MATTHEW H. MCCORMICK, ESQ.	FLETCHER, HEALD & HILDRETH, P.L.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 NORTH 17TH STREET, 11TH FLOOR	ARLINGTON	VA	22209	+1 (703) 812- 0438	MCCORMICK@FHHLAW. COM

3. Application
Filing Fee

Not Applicable

4. Control of	(a) Provide the following information about the Respondent:				
Respondent	Relationship to stations/permits				
	Is the Respondent's governing board (or other governing entity) directly or No indirectly under the control of another entity?		No		
	(b) Provide the following information	on about this report:			

Purpose

Transfer of control or assignment of license/permit

"As of" date

02/03/2022

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)

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

Licensee/Permittee Name	FRN
Family Stations, Inc.	0001545607

Fac. ID No.	Call Sign	City	State	Service
1082	KEAR	SAN FRANCISCO	CA	АМ
11068	W282AD	EAST WINDHAM	NY	FX
15877	WAMT	PINE CASTLE SKY LAKE	FL	АМ
20674	WCUE	CUYAHOGA FALLS	ОН	АМ
20678	WOTL	TOLEDO	ОН	FM
20705	W207AE	READING	PA	FX
20716	KUFR	SALT LAKE CITY	UT	FM
20722	W213AC	HYDE PARK, ETC.	NY	FX
20732	КНАР	СНІСО	CA	FM
20734	KJVH	LONGVIEW	WA	FM
20742	W233AD	ROCKFORD	IL	FX
20746	KEBR	SACRAMENTO	CA	FM
20760	K220EY	PORTERVILLE	CA	FX
20776	K213BZ	RICHVALE	CA	FX
20777	K219BX	EL PASO, ETC.	ТХ	FX
20785	WWFR	STUART	FL	FM
20790	K220EI	OGDEN	UT	FX
20806	KYFR	SHENANDOAH	IA	АМ
20825	K217CD	GREAT FALLS	МТ	FX
20826	WCTF	VERNON	СТ	АМ
20834	W295BX	BALTIMORE	MD	FX
20847	WJCH	JOLIET	IL	FM
20849	KDFR	DES MOINES	IA	FM
20853	WFCH	CHARLESTON	SC	FM
20858	W252AQ	LAKE CHARLES	LA	FX
20864	WJFR	JACKSONVILLE	FL	FM

20873	K219AO	FAIRMONT, ETC.	CA	FX
20877	KPRA	UKIAH	СА	FM
20879	KPHF	PHOENIX	AZ	FM
20892	K254AK	RENO	NV	FX
20902	KFRB	BAKERSFIELD	СА	FM
20924	KFNO	FRESNO	CA	FM
20927	WFRS	SMITHTOWN	NY	FM
20931	K13ZL-D	FRESNO	CA	LPD
20940	WYTN	YOUNGSTOWN	ОН	FM
20942	КТХВ	BEAUMONT	тх	FM
20962	W208AF	NANTICOKE, ETC.	PA	FX
20975	WEFR	ERIE	PA	FM
20977	KECR	EL CAJON	CA	AM
20989	WBFR	BIRMINGHAM	AL	FM
20997	KEFR	LE GRAND	CA	FM
21005	KFRN	LONG BEACH	CA	AM
21010	WMWK	MILWAUKEE	WI	FM
21021	K214BO	ASHLAND	OR	FX
21026	W297BQ	ALBANY	GA	FX
21029	KQFE	SPRINGFIELD	OR	FM
21043	K219CA	CASPER	WY	FX
21051	K205CI	PHOENIX	AZ	FX
21054	K214CA	GRAND JUNCTION	со	FX
21062	K211GA	CARSON CITY	NV	FX
21080	K206DU	LAFAYETTE	LA	FX
21086	W220BD	ROANOKE	VA	FX
21097	W207AX	BURLINGTON	VT	FX
25095	WKDN	PHILADELPHIA	PA	AM
29024	WFME	NEW YORK	NY	AM
30573	WFME-FM	GARDEN CITY	NY	FM
36511	K203BE	ROSEBURG	OR	FX
36515	K223AO	FLORENCE	OR	FX
43864	WFSI	BALTIMORE	MD	AM
70274	WYMK	MOUNT KISCO	NY	FM
83330	K235AM	GARBERVILLE	CA	FX
83453	K268AJ	REDDING	CA	FX

85655	W295AF	LA PORTE	IN	FX
85834	KPFR	PINE GROVE	OR	FM
86669	KFRS	SOLEDAD	CA	FM
87050	KFRY	PUEBLO	со	FM
88470	K220GM	PLACITAS	NM	FX
90279	KFRW	GREAT FALLS	MT	FM
91553	KXFR	SOCORRO	NM	FM
91642	WOFR	SCHOOLCRAFT	MI	FM
92485	KYOR	NEWPORT	OR	FM
94237	KFRD	BUTTE	MT	FM
155996	W218CW	WEST PALM	FL	FX
156754	W271BC	LUMPKIN	GA	FX
202971	W292FV	NEW YORK	NY	FX

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	Family Station, Inc. Articles of Incorporation & Bylaws		
Parties to contract or instrument	Family Stations, Inc.		
Date of execution	05/1958		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Family Station, Inc. Articles of Incorporation & Bylaws		
Document Information			
Description of contract or instrument	Time Share Agreement with VCY America, Inc. (successor to National Farm Workers Service Center, Inc.) for KPHF		

•	to National Farm Workers Service Center, Inc.) for KPHF /KVCP
Parties to contract or instrument	Family Stations, Inc. and VCY America, Inc. (successor to National Farm Workers Service Center, Inc.)
Date of execution	02/1985
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Time Share Agreement for KPHF/KVCP

(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.

FRN	0001545607			
Entity Name	Family Stations, Inc.			
Address	PO Box			
	Street 1	112 NORTH ELM STREET		
	Street 2			
	City	SHENANDOAH		
	State ("NA" if non-U.S. address)	IA		
	Zip/Postal Code	51601		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	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

Ownership Information

FRN	9990128668		
Name	THOMAS EVANS		
Address	PO Box		
	Street 1	4057 RURAL PLAINS CIRCLE, SUITE 300B	
	Street 2		
	City	FRANKLIN	

	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37064	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - PRESIDENT/DIRECTOR Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	BROADCASTING		
By Whom Appointed or Elected	DIRECTORS		
Interest Percentages	Voting	33.3%	
(enter percentage values from 0.0 to 100.0)	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?			No

Ownership Information

Ownership Information			
FRN	9990135246		
Name	ALLEN SILL, JR.		
Address	PO Box		
	Street 1	4057 RURAL PLAINS CIRCLE	E, SUITE 300B
	Street 2		
	City	FRANKLIN	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37064	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - TREASURER/DIRECTOR Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	MARKETING, SALES, AND SAFETY TRAINING REP		
By Whom Appointed or Elected	DIRECTORS		
Interest Percentages	Voting	33.3%	
(enter percentage values from 0.0 to 100.0)	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?			No

FRN	9990147434		
Name	DARRELL B. HARRISON		
Address	PO Box		
	Street 1	4057 RURAL PLAINS CIRCL	E, SUITE 300B
	Street 2		
	City	FRANKLIN	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37064	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - SECRETARY/DIRECTOR Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	SOCIAL MEDIA EDUCATION		
By Whom Appointed or Elected	DIRECTORS		
Interest Percentages	Voting 33.3%		
(enter percentage values 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 report?	r more broadcast stations	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.	

(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.	

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: PRESIDENT Name: THOMAS EVANS Phone: 8005431495
		02/03/2022