

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

File Number: 0000189037Submit Date: 2022-04-07FRN: 0030531198Purpose: Commercial Broadcast Stations Non-Biennial Ownership ReportStatus: ReceivedStatus Date:04/07/2022Filing Status: Active

Section I - General Information

1. Respondent

 FRN
 Entity Name

 0019994482
 Murfin, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
250 N. Water, Suite 300	Wichita	кs	67202	+1 (316) 287- 3241	byoung@murfininc. com

2. Contact Representative

Name	Organization
John S. Logan	Cooley LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1299 Pennsylvania Ave., NW, Suite 700	Washington	DC	20004	+1 (202) 776-2640	jlogan@cooley.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	For-profit corporation			

(b) Provide the following information about this report:

Purpose	Transfer of control or assignment of license/permit
"As of" date	03/29/2022
	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	
Central Plains Finance LLC	0030531198	

Fac. ID No.	Call Sign	City	State	Service
198	KULY	ULYSSES	KS	AM
199	KHGN	HUGOTON	KS	FM
33689	KBUF	HOLCOMB	KS	АМ
33690	KKJQ	GARDEN CITY	KS	FM
60873	KSKZ	COPELAND	KS	FM
67042	KWKR	LEOTI	KS	FM
71853	KSKL	SCOTT CITY	KS	FM
77873	KSSA	INGALLS	KS	FM
202616	К296НО	HOLCOMB	KS	FX
202617	K249FI	ULYSSES	KS	FX

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other 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. 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/Permittee Respondents should select "Not Applicable" in response to this question.

Not Applicable.

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, 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) 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

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FRN	0019994482
Entity Name	Murfin, Inc.

Address	PO Box			
	Street 1	250 N. Water, Suite 300		
	Street 2			
	City	Wichita		
	State ("NA" if non-U.S. address)	KS		
	Zip/Postal Code	67202		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	Yes	

Ownership Information

-				
FRN	0019993930			
Name	David L. Murfin			
Address	PO Box) Box		
	Street 1	900 N. Linden		
	Street 2			
	City	Wichita		
	State ("NA" if non-U.S. address)	KS		
	Zip/Postal Code	67206		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Other - Chair	man		
Interest Percentages (enter percentage values	Voting	90.0%	Jointly Held? No	
from 0.0 to 100.0) Total assets (Equity Debt 0.0% Plus) 0.0%		0.0%		
	Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			

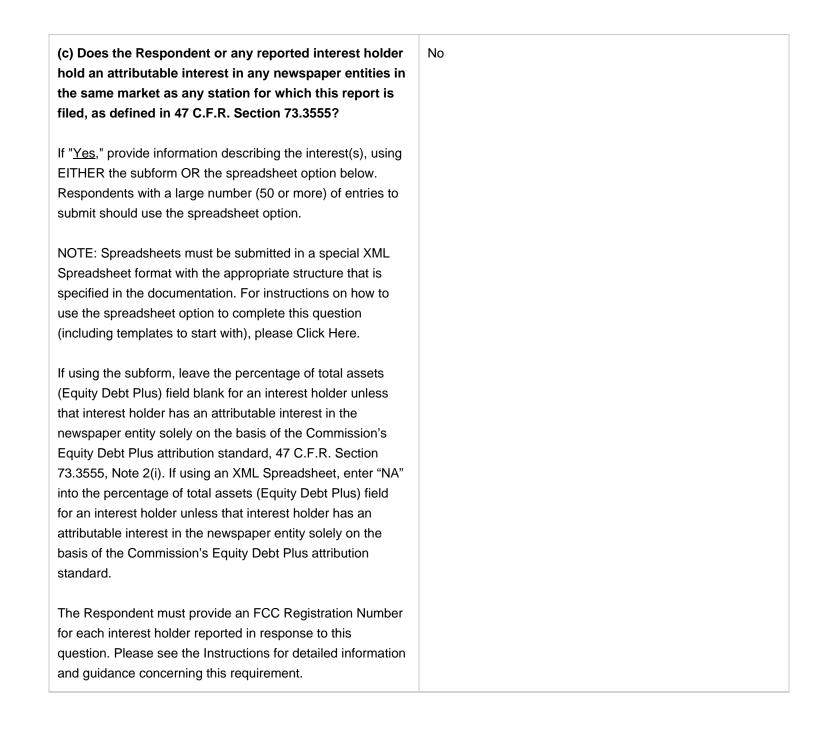
Ownership Information

FRN 0019993989	
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Name	Barbara Murfin Murphy		
Address	PO Box		
	Street 1	14021 E. North Point Dr.	
	Street 2		
	City	Wichita	
	State ("NA" if non-U.S. address)	KS	
	Zip/Postal Code	67230	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director, Stockholder		
Interest Percentages (enter percentage values	Voting	5.0%	Jointly Held? No
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 or report?	or more broadcast stations	Yes

Ownership Information				
FRN	0019993963			
Name	Nancy Murfin-Moxley			
Address	PO Box			
	Street 1	15455E 13th St. N		
	Street 2			
	City	Wichita		
	State ("NA" if non-U.S. address)	KS		
	Zip/Postal Code	67202		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Director, Stockholder			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	5.0%	Jointly Held? No	
	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?		more broadcast stations	Yes	

FRN	0019991785			
Name	Robert D. Young			
Address	PO Box			
	Street 1	13114 Bridgefield Place		
	Street 2			
	City	Wichita		
	State ("NA" if non-U.S. address)	KS		
	Zip/Postal Code	67230		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes	
	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes	



(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	0019993930	Name	David L Murfin
FRN	0019993989	Name	Barbara Murfin Murphy
Relationship	Siblings		

Family Relationships

Family Relationships

FRN	0019993963	Name	Nancy Murfin-Moxley
FRN	0019993989	Name	Barbara Murfin Murphy
Relationship	Siblings		

Family Relationships

FRN	0019993930	Name	David L Murfin
FRN	0019993963	Name	Nancy Murfin-Moxley
Relationship	Siblings		

(e) Is Respondent seeking an attribution exemption for any officer or director withNoduties 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.

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: Murfin, Inc. Name: Robert Young Phone: 3162673241 04/07/2022