

(REFERENCE COPY - Not for submission)

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

File Number: 0000206654 | Submit Date: 2023-01-11 | FRN: 0013706064

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

01/11/2023 Filing Status: Active

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

#### 1. Respondent

FRN	Entity Name	
0013706064	Bad Lands Broadcasting Company, Inc.	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
288 South River Road	Bedford	NH	03110	+1 (603) 668- 6400	lisab@nebcast.

## 2. Contact Representative

Name		Organization	
	Barry Friedman	Thompson Hine LLP	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
Suite 700 1919 M Street, N.W.	Washington	DC	20036	+1 (202) 331- 8800	barry.friedman@thompsonhine.

## 3. Application Filing Fee

Not Applicable

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits  Licensee			
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	01/05/2023			
	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)

Licensee/Permittee Name	FRN
Bad Lands Broadcasting Company, Inc.	0013706064

Fac. ID No.	Call Sign	City	State	Service
40636	KFMH	BELLE FOURCHE	SD	FM
89114	KRKI	KEYSTONE	SD	FM
164201	KXZT	NEWELL	SD	FM
164913	KFMH-FM1	RAPID CITY	SD	FB
164915	KRKI-FM1	RAPID CITY	SD	FB

### 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.

Document Information			
Description of contract or instrument	Certificate of Incorporation		
Parties to contract or instrument	State of Delaware		
Date of execution	04/2005		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Incorporation documents		

# 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		
FRN	0013706064	
Entity Name	Bad Lands Broadcasting Company, Inc.	

Address	РО Вох				
	Street 1	288 South River Road	288 South River Road		
	Street 2				
	City	Bedford			
	State ("NA" if non-U.S. address)	NH			
	Zip/Postal Code	03110	03110		
	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 r	an attributable interest in one oreport?	r more broadcast stations	No		

Ownership Information				
FRN	0019958636	0019958636		
Name	Edward Flanagan	Edward Flanagan		
Address	РО Вох			
	Street 1	288 South River Road		
	Street 2			
	City	Bedford		
	State ("NA" if non-U.S. address)	NH		
	Zip/Postal Code 03110			
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	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	0021307129

Name	JACOB L. SILBERBERG		
Address	РО Вох		
	Street 1	288 South River Road	
	Street 2		
	City	Bedford	
	State ("NA" if non-U.S. address)	NH	
	Zip/Postal Code	03110	
	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)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information			
FRN	0024725970		
Entity Name	Northeast Digital and Wireless, Inc.		
Address	РО Вох		
	Street 1	288 South River Road	
	Street 2		
	City	Bedford	
	State ("NA" if non-U.S. address)	NH	
	Zip/Postal Code	03110	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	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			Yes

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

(c) 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?

No

If " $\underline{\text{Yes}},$  " provide the following information for each such the relationship.

# (d) 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.

#### 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: Bad Lands Broadcasting Company, Inc. Name: Edward Flanagan Phone: 6036686400