

FRN

0005071147

Not Applicable

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

File Number:0000223407Submit Date:2023-10-19FRN:0005071147Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:10/19/2023Filing Status:Active

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

Christian Heritage Broadcasting, Inc.

#### 1. Respondent

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 247	Osakis	MN	56360	+1 (320) 421- 0777	david@praiselive. org

#### 2. Contact Representative

Name	Organization
Sara L. Hinkle, ESQ.	FLETCHER, HEALD & HILDRETH, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street, 11th Floor	Arlington	VA	22209	+1 (703) 812-0415	hinkle@fhhlaw.com

#### 3. Application Filing Fee

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4.	Control of	
Re	espondent	

(a) Provide the following information about the Respondent:				
Relationship to stations/permits Licensee				
Is the Respondent's governing boa indirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No		

(b) Provide the following information about this report:			
Purpose	Biennial		
"As of" date	10/01/2023		
	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.		

#### and Station(s)

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

Licensee/Permittee Name	FRN
Christian Heritage Broadcasting, Inc.	0005071147

Fac. ID No.	Call Sign	City	State	Service
8060	KCGN-FM	ORTONVILLE	MN	FM
11042	KBHL	OSAKIS	MN	FM
11043	КВНZ	WILLMAR	MN	FM
59624	KNOF	ST. PAUL	MN	FM
72908	K253AB	ABERDEEN	SD	FX
106648	K212FH	MARSHALL	MN	FX

#### Section II – Biennial Ownership Information

#### 1. 47 C.F.R. Section 73.3613 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information			
Description of contract or instrument	ARTICLES OF INCORPORATION		
Parties to contract or instrument	RESPONDENT		
Date of execution	11/1984		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: ARTICLES OF INCORPORATION		

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Document	I to f a mina a f	
Document	Intormat	IOD

Description of contract or instrument	BY-LAWS, AS AMENDED	
Parties to contract or instrument	RESPONDENT	
Date of execution	10/2009	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: BY LAWS, AS AMENDED	

#### 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, 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) 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	0005071147	0005071147		
Entity Name	Christian Heritage Broadcasti	ng, Inc.		
Address	<b>PO Box</b> 247			
	Street 1			
	Street 2			
	City	Osakis		
	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	56360		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	nation or Tribal entity		
Interest Percentages	Voting	Voting 0.0%		
(enter percentage values from 0.0 to 100.0)				
	Total assets (Equity Debt0.0%Plus)			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

#### **Ownership Information**

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FRN	9990125095	
Name	JEFF RHEINGANS	
Address	PO Box	
	Street 1	2265 300TH STREET
	Street 2	
	City	MADISON
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56256

	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Other - Chairman of the Boar entity)	Other - Chairman of the Board of DirectorsMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	FARMER			
By Whom Appointed or Elected	BOARD OF DIRECTORS			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Male		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	<b>Voting</b> 20.0%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one c report?	or more broadcast stations No		

#### **Ownership Information** 9990125096 FRN CHUCK BAUER Name Address **PO Box** 5020 690TH AVE. Street 1 Street 2 City GRACEVILLE State ("NA" if non-U.S. MN address) **Zip/Postal Code** 56240 Country (if non-U.S. United States address) Listing Type Other Interest Holder **Positional Interests** Officer, Member of Governing Board (or other governing entity) (check all that apply) Principal Profession or **CROP DUSTER** Occupation By Whom Appointed or BOARD OF DIRECTORS Elected Citizenship, Gender, Citizenship CA Ethnicity, and Race

Male

Not Hispanic or Latino

Gender

Ethnicity

Information (Natural

Persons Only)

	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%
	Equity	0.0%
	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?

NO

Ownership Information			
FRN	9990125099		
Name	DAVID MCIVER		
Address	PO Box		
	Street 1	3070 Aspen Lake Drive NE	
	Street 2		
	City	Blaine	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55449	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Vice Chairman of the Board of DirectorsMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	BROADCASTER		
By Whom Appointed or Elected	BOARD OF DIRECTORS		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

**Ownership Information** 

that do not appear on this report?

FRN	9990143700	
Name	Larry Jeddeloh	
Address	PO Box	

		1	
	Street 1	6 Ski Lane	
	Street 2		
	City	North Oaks	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55127	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Board Member		
By Whom Appointed or Elected	Governing Board		
Citizenship, Gender,	Citizenship	GB	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

## that do not appear on this report?

Ownership Information		
FRN	9990143701	
Name	Kerry Johnson	
Address	PO Box	
	Street 1	14553 Glendale Ave. SE
	Street 2	
	City	Prior Lake
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55372
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	

Principal Profession or Occupation	Board Member		
By Whom Appointed or Elected	Governing Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	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
., .	at any interests, including equi his filing are non-attributable.	ty, financial, or voting	Yes

 (c) Is Respondent seeking an attribution exemption for any officer or director with
 No

 duties wholly unrelated to the Licensee(s)?
 If "Yes " complete the information in the required fields and submit an Exhibit fully describing

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.

#### 3. Organizational Chart (Licensees Only)

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.

Christian Heritage has no vertical ownership structure.

#### **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	Official Title: <b>Executive Director</b> Exact Legal Title or Name of Respondent: <b>Christian Heritage Broadcasting, Inc.</b>

true, co	orrect and	complete.
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10/19/2023