

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000228232 | Submit Date: 2023-11-28 | FRN: 0013706064

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/28/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0032899247	The Steven A. Silberberg Irrevocable Trust	

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	City (and Country if non U.S.		Zip		
Address	address)	State	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	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees		
Nature of Respondent	Other Trust		

(b) Provide the following information about this report: Purpose Biennial 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.

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name		FRN	
Bad Lands Broadcasting Con	mpany, 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 – 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.

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) 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	Ownership Information			
FRN	0032899247			
Entity Name	The Steven A. Silberberg Irrev	The Steven A. Silberberg Irrevocable Trust		
Address	PO Box			
	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	Respondent			
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	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	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one or	or more broadcast stations	Yes	

Ownership Information					
FRN	0021307129	0021307129			
Name	JACOB L. SILBERBERG	JACOB L. SILBERBERG			
Address	PO Box	PO Box			
	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			
	Country (if non-U.S. United States address)				
Listing Type	Other Interest Holder	Other Interest Holder			
Positional Interests (check all that apply)	Other - Trustee				
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	33.3% Jointly Held?			
from 0.0 to 100.0)	Equity	33.3%			
	Total assets (Equity Debt Plus)	ebt .			

Does interest holder have an attributable interest in one or more broadcast stations	
that do not appear on this report?	

Yes

Ownership Information				
FRN	0021150800			
Name	Lisa Burgess			
Address	РО Вох) Box		
	Street 1	288 South River Road		
	Street 2			
	City	Bedford		
	State ("NA" if non-U.S. NH address) Zip/Postal Code 03110 Country (if non-U.S. address) United States			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Trustee			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	33.3%	Jointly Held? No	
from 0.0 to 100.0)	Equity	33.3%		
	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	2130031053	
Name	Hattie Danziger	
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)	Other - Trustee			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No	
	Equity	33.3%		
	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		
• •	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes	

(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?

If "Yes," provide the following information for each such the relationship.

Family Relationships					
FRN	0021307129	Name	JACOB L SILBERBERG		
FRN	2130031053	Name	Hattie Danziger		
Relationship	Siblings				

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

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: Trustee Exact Legal Title or Name of Respondent: The Steven A. Silberberg Irrevocable Trust Name: Jacob Silberberg Phone: 6036686400 11/28/2023