

(REFERENCE COPY - Not for submission)

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

File Number: 0000240047 | Submit Date: 2024-02-29 | FRN: 0008521460

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/29/2024

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0008521460	Calvary Chapel of Omaha, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
508 W 24th Ave.	Bellevue	NE	68005	+1 (855) 734- 9970	radio@livingwaterradio.

2. Contact Representative

Name	Organization	
John Walker	Living Water Radio	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
702 Wilson Ave.	Malvern	IA	51551	+1 (402) 677- 7888	radio@livingwaterradio.

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Licensee			
Is the Respondent's governing boindirectly 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.				

5. Licensee(s) and Station(s)

Licensee/Permittee Name	FRN
Calvary Chapel of Omaha, Inc.	0008521460

Fac. ID No.	Call Sign	City	State	Service	
174613	KHLW	TABOR	IA	FM	

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	Calvary Chapel of Omaha, Inc.			
Date of execution	07/1988			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation			

Document Information				
Description of contract or instrument	By-laws			
Parties to contract or instrument	Calvary Chapel of Omaha, Inc.			
Date of execution	07/1988			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: By-laws			

Document Information				
Description of contract or instrument	Amendment to Articles of Incorporation/By-laws			
Parties to contract or instrument	Calvary Chapel of Omaha, Inc.			
Date of execution	09/2007			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Amendment			

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	0008521460				
Entity Name	Calvary Chapel of Omaha, Inc	Calvary Chapel of Omaha, Inc.			
Address	PO Box				
	Street 1	508 W 24th Ave.			
	Street 2				
	City	Bellevue			
	State ("NA" if non-U.S. address)	NE			
	Zip/Postal Code	68005			
	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	nation or Tribal entity			
Interest Percentages	Voting	0.0%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
	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		
FRN	9990149389	
Name	Steve Johnson	
Address	PO Box	
	Street 1	1103 Hackney Drive
	Street 2 City Papillion	
	State ("NA" if non-U.S. address)	NE
	Zip/Postal Code	68046

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Pastor and President		
By Whom Appointed or Elected	NA - Founding pastor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	33.3%	
(enter percentage values from 0.0 to 100.0)	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	9990149390	
Name	John Walker	
Address	PO Box	
	Street 1	702 Wilson Ave.
	Street 2	
	City	Malvern
	State ("NA" if non-U.S. IA address)	
	Zip/Postal Code	51551
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Elder and Radio Manager	
By Whom Appointed or Elected	Elders	
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US
	Gender	Male
Persons Only)		

Interest Percentages (enter percentage values from 0.0 to 100.0)	Ethnicity	Not Hispanic or Latino
	Race	White
	Voting	33.3%
	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?		r more broadcast stations No

Ownership Information			
FRN	9990139220	9990139220	
Name	Todd Cetto		
Address	РО Вох		
	Street 1	1142 Saint Andrews Road	
	Street 2		
	City	Bellevue	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68005	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Secretary and Director, Elder		
By Whom Appointed or Elected	Pastor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	33.3%	
(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	r more broadcast stations No	

Yes

(b) Respondent certifies that any interests, including equity, financial, or voting

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.	

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.

Licensee does not have a 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 true, correct and complete.	Official Title: President Exact Legal Title or Name of Respondent: Calvary Chapel of Omaha, Inc. Name: Steve Johnson Phone: 8557349970