

(REFERENCE COPY - Not for submission)

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

File Number: **0000043108** Submit Date: **2018-02-22** FRN: **0016993164**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/22/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0016993164	Community Radio Project

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 116	Cortez	СО	81321	+1 (970) 564- 9727	nicole@ksjd. org

2. Contact Representative

Name	Organization
Nicole Carey	KSJD- Community Radio Project

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 116 2 E Main St	Cortez	СО	81321	+1 (970) 564-9727	nicole@ksjd.org

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Entity required to file a Form 323-E because it holds an attributable interest in one or more Licensees or Permittees			
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No		

(b) Provide the following information about this report:					
Purpose	Biennial				
"As of" date	10/01/2017				
	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
Community Radio Project	0016993164

Fac. ID No.	Call Sign	City	State	Service
58851	KSJD	CORTEZ	СО	FM
58853	K216DA	DOLORES	СО	FX
58854	K215FI	PLEASANT VIEW	СО	FX
173810	KZET	TOWAOC	СО	FM
174903	KICO	RICO	со	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.

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, 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	0016993164			
Entity Name	Community Radio Project	Community Radio Project		
Address	РО Вох	116		
	Street 1			
	Street 2			
	City	Cortez		
	State ("NA" if non-U.S. address)	СО		
	Zip/Postal Code	81321		

	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 (enter percentage values from 0.0 to 100.0)	Voting	0.0%		
	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 report?	or more broadcast stations No		

Ownership Information					
FRN	9990127498				
Name	Laird Carlson				
Address	PO Box				
	Street 1	14985 RD 40.2			
	Street 2				
	City	Mancos			
	State ("NA" if non-U.S. address)	СО			
	Zip/Postal Code	81328			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Officer				
Principal Profession or Occupation	Publisher				
By Whom Appointed or Elected	Community Radio Project				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	White			
Interest Percentages	Voting	14.3%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
	Total assets (Equity Debt Plus)				

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

No

Ownership Information				
FRN	9990127494			
Name	Casey Simpson			
Address	PO Box			
	Street 1	35500 Rd. J.8		
	Street 2			
	City	Mancos		
	State ("NA" if non-U.S. address)	СО		
	Zip/Postal Code	81328		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Teacher			
By Whom Appointed or Elected	Community Radio Project	Community Radio Project		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	14.3%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	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 No		

Ownership Information			
FRN	9990127496	9990127496	
Name	Kristen Tworek	Kristen Tworek	
Address	РО Вох	601	
	Street 1		
	Street 2		
	City	Dolores	

	State ("NA" if non-U.S. address)	СО	
	Zip/Postal Code	81323	
	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	Director		
By Whom Appointed or Elected	Community Radio Project		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No

Ownership Information			
FRN	9990127490		
Name	Casey Simpson		
Address	PO Box		
	Street 1	35500 RD J.8	
	Street 2		
	City	Mancos	
	State ("NA" if non-U.S. address)	СО	
	Zip/Postal Code 81328		
	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	Teacher		
By Whom Appointed or Elected	Community Radio Project		

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one or	or more broadcast stations No

Ownership Information			
FRN	9990127485		
Name	Rebecca Fraley		
Address	РО Вох		
	Street 1	21242 Road W	
	Street 2		
	City	Lewis	
	State ("NA" if non-U.S. address)	СО	
	Zip/Postal Code	81327	
	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	Compliance Officer		
By Whom Appointed or Elected	Community Radio Project		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this r	n attributable interest in one o eport?	r more broadcast stations	No

Ownership Information				
FRN	9990127500			
Name	Peter Ortego			
Address	PO Box	144		
	Street 1			
	Street 2			
	City	Lewis		
	State ("NA" if non-U.S. address)	СО		
	Zip/Postal Code	81327		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Principal Profession or Occupation	Attorney			
By Whom Appointed or Elected	Community Radio Project	Community Radio Project		
Citizenship, Gender,	Citizenship	us		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	14.3%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a	an attributable interest in one o	r more broadcast stations No		

Ownership Information			
FRN	9990127461		
Name	Dave Hart	Dave Hart	
Address	PO Box		
	Street 1	29173 Road L	
	Street 2		
	City	Dolores	
	State ("NA" if non-U.S. address)	СО	
	Zip/Postal Code	81323	

	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Operations Manager	Operations Manager		
By Whom Appointed or Elected	Community Radio Project			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	14.3%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations	0	

FRN	9990127502	
Name	Lily Jamison-Cash	
Address	PO Box	
	Street 1	15981 RD 31
	Street 2	
	City	Mancos
	State ("NA" if non-U.S. address)	СО
	Zip/Postal Code	81328
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Farmer	
By Whom Appointed or Elected	Community Radio Project	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female

	Ethnicity	Not Hispanic or Latino		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Race	White		
	Voting	14.3%		
	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a	an attributable interest in one or report?	more broadcast stations	No	
(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.			Yes	

(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.	

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: Office Manager Exact Legal Title or Name of Respondent: Community Radio Project Name: Nicole Carey Phone: 9705649727