

(REFERENCE COPY - Not for submission)

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

File Number: 0000039128 | Submit Date: 2018-01-10 | FRN: 0002472629

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

01/10/2018 Filing Status: Active

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

#### 1. Respondent

FRN	Entity Name	
0002472629	Sioux Valley Broadcasting Company	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 907	Valley City	ND	58072	+1 (701) 845- 1490	dawn@sciarrinolaw.

## 2. Contact Representative

Name	Organization
Dawn M. Sciarrino	Sciarrino & Schubert, PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4601 NORTH FAIRFAX DRIVE SUITE Suite 1200	Arlington	VA	22203	+1 (202) 256- 9551	dawn@sciarrinolaw. com

## 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	01/05/2018	
	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.	

# /Permittees(s) and Station(s) /Permit(s)

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

L	icensee/Permittee Name	FRN
5	Sioux Valley Broadcasting Company	0002472629

Fac. ID No.	Call Sign	City	State	Service
60497	KOVC	VALLEY CITY	ND	AM
60498	KQDJ-FM	VALLEY CITY	ND	FM
60499	KDDR	OAKES	ND	AM

#### **Section II – Non-Biennial Ownership Information**

#### 1. 47 C.F.R. Section 73.3613 Documents

Licensee/Permittee Respondents should list all contracts and other instruments required to be filed pursuant to 47 C.F.R. Section 73.3613 for the facility or facilities listed on this report. If the agreement is an attributable Local Marketing Agreement (LMA), an attributable Joint Sales Agreement (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	By-Laws	
Parties to contract or instrument	Sioux Valley Broadcasting Company and The State of North Dakota	
Date of execution	02/1985	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: By-Laws	

Document Information		
Description of contract or instrument	Articles of Incorporation	
Parties to contract or instrument	Sioux Valley Broadcasting Company and The State of North Dakota	
Date of execution	02/1985	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other  Agreement Type: Articles of Incorporation	

## 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	0002472629	0002472629		
Entity Name	Sioux Valley Broadcasting Co	ompany		
Address	РО Вох	907		
	Street 1			
	Street 2			
	City	Valley City		
	State ("NA" if non-U.S. address)	ND		
	Zip/Postal Code	58072		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent	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 an attributable interest in one or more broadcast stations  No that do not appear on this report?				

Ownership Information			
FRN	0020592606		
Name	Tallie Colville		
Address	<b>PO Box</b> 907		
	Street 1		
	Street 2		
	City	v	
	State ("NA" if non-U.S. address)	ND	
	Zip/Postal Code	58072	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		

Positional Interests (check all that apply)	Officer, Stockholder		
Interest Percentages (enter percentage values	Voting	33.3%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	33.3%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes	

Ownership Information				
FRN	0009556986			
Name	Robert J. Ingstad			
Address	РО Вох	907		
	Street 1			
	Street 2			
	City	Valley City		
	State ("NA" if non-U.S. address)	ND		
	Zip/Postal Code	58072		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Stockholder			
Interest Percentages (enter percentage values	Voting	33.3%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	33.3%		
	Does interest holder have an attributable interest in one or more broadcast stations  Yes that do not appear on this report?		Yes	

Ownership Information		
FRN	0025661232	
Name	TODD INGSTAD	
Address	<b>PO Box</b> 907	
	Street 1	
	Street 2	
	City	Valley City
	State ("NA" if non-U.S. address)	ND
	Zip/Postal Code	58072
	Country (if non-U.S. address)	United States

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Stockholder		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No
	Total assets (Equity Debt Plus)	33.3%	
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations	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.
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(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?

If "Yes," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.

NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.

If using the subform, 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 newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.

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.

No

(d) 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?

Yes

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

Family Relationships			
FRN	0020592606	Name	Tallie Colville

FRN	0009556986	Name	Robert J Ingstad
Relationship	Siblings		

Family Relationships			
FRN	0025661232	Name	TODD INGSTAD
FRN	0020592606	Name	Tallie Colville
Relationship	Siblings		

Family Relationships			
FRN	0009556986	Name	Robert J Ingstad
FRN	0025661232	Name	TODD INGSTAD
Relationship	Siblings		

## (e) 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: <b>President</b> Exact Legal Title or Name of Respondent: <b>Sioux Valley Broadcasting Company</b> Name: <b>Robert J. Ingstad</b> Phone: <b>7018451490</b> 01/10/2018