

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0010 (June 2014)	FOR FCC USE ONLY
<b>FCC 323          OWNERSHIP REPORT FOR COMMERCIAL          BROADCAST STATIONS</b>		<b>FOR COMMISSION USE ONLY          FILE NO. BOA-20151119APJ</b>

**Section I - General Information**

1.	Legal Name of the Respondent PAMPLIN BROADCASTING-OREGON, INC.	
	Street Address (1) ATTN: LEGAL DEPARTMENT	
	Street Address (2) PO BOX 22109	
	City PORTLAND	State or Country (if Foreign address) OR
		ZIP Code 97269
	Telephone Number (include area code) (503) 553-0380	E-Mail Address (if available) AMAREK@PAMPLINCORP.COM
	FCC Registration Number 0003746336	Call Sign KPAM
		Facility ID Number 29553
2.	Contact Representative MAGALI SOSA-TIRADO	Firm or Company Name PAMPLIN BROADCASTING-OREGON, INC.
	Street Address (1) LEGAL DEPARTMENT	
	Street Address (2) P.O. BOX 22109	
	City PORTLAND	State or Country (if Foreign address) OR
		ZIP Code 97269
	Telephone Number (include area code) (503) 546-5108	E-Mail Address (if available) MSOSATIRADO@PAMPLINCORP.COM
3.	Nature of Respondent (See Instructions for Definitions)	
	<input checked="" type="radio"/> Licensee <input type="radio"/> Permittee <input type="radio"/> Entity with an attributable interest	
4.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Fee-exempt Report <input type="radio"/> Other <input checked="" type="radio"/> N/A (Fee Required)	
5.	All the information furnished in this Report is accurate as of 10/01/2015. <i>(Date entered must (1) be Oct. 1 of the filing year when filing a Biennial Ownership Report (or Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-Biennial Ownership Report).</i>	
6.	Purpose this Report is Filed for: (choose one)	
	a. <input checked="" type="radio"/> Biennial b. <input type="radio"/> Validation and Resubmission of a previously filed Biennial Report (certifying no change from previous Report) c. <input type="radio"/> Transfer of Control or Assignment of License/Permit d. <input type="radio"/> Report by Permittee filing within 30 days after the grant of a construction permit for a new commercial AM, FM or full power television broadcast station. e. <input type="radio"/> Update / certification of accuracy of an initial Ownership Report filed by Permittee (filing in conjunction with Permittee's application for a station license). f. <input type="radio"/> Amendment to a previously filed Ownership Report    File Number: -	
	If an Amendment <b>submit as an Exhibit</b> a listing by Section and Question Number the portions of the previous Report that are being revised.	

[Exhibit 1]

7. License and Station Information. The stations listed below are all licensed to the following person or entity:

Licensee Name:	Licensee's FCC Registration Number (FRN)
PAMPLIN BROADCASTING-OREGON, INC.	0003746336

**Station List**

This Report is filed for the following stations:

Copy	Call Sign	Facility ID Number	Location (City/State)	Class of Service
1.	KPAM	29553	TROUTDALE, OREGON	AM Station

8. Respondent is:

- Sole Proprietorship
- For-profit corporation
- Not-for-profit corporation
- General partnership
- Limited partnership
- Other

[Exhibit 2]

If "Other," describe nature of the Respondent in an Exhibit.

**Section II-B - Biennial Ownership Information**

1. Contract Information. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only Licensees, or Respondents with a majority interest in or that otherwise exercise *de facto* control over the subject Licensee shall respond. Other Respondents should select "Not Applicable" in response to this question.) If the agreement is a local marketing agreement (LMA) or a joint sales agreement (JSA), or if the agreement is a network affiliation agreement, check the appropriate box; otherwise, select "Other" for non-LMA/JSA or network affiliation agreements.

Not Applicable

[Enter Contract Information]

2. Capitalization (Only Licensees or entities with a majority interest in or that otherwise exercises *de facto* control over the subject Licensee shall respond.)

Not Applicable

**Capitalization Information**

Copy	Class of Stock (preferred, common or other)	Voting or Non-Voting	Number of shares			
			Authorized	Issued and Outstanding	Treasury	Unissued
1.	<input type="radio"/> Preferred <input checked="" type="radio"/> Common <input type="radio"/> Other (specify)	<input checked="" type="radio"/> Voting <input type="radio"/> Non-Voting	10000	100	0	9900

3.(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, noninsulated partners, members and other persons or entities with a direct attributable interest in the Respondent. (A "direct" interest is one that is not held through any intervening companies or entities.) In the case of vertical or indirect ownership structures, report only those interests in the Respondent that also represent an attributable interest in the Licensee for which the Report is being submitted.

List each person or entity with a direct attributable interest in the Respondent separately. 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 separate reports for persons or entities that do not have an attributable interest in the Licensee for which the report is being submitted.

**Ownership Interest Information**

Copy 1.	Name	PAMPLIN BROADCASTING-OREGON, INC.
	Address	Street PO BOX 22109 City/State PORTLAND, OREGON Postal/ZIP Code 97269 - 2109 Country (if not U.S.)
	Listing Type	<input checked="" type="radio"/> Respondent <input type="radio"/> Other Interest Holder

Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
FCC Registration Number	0003746336
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input checked="" type="checkbox"/> N/A (entity)
	Gender <input type="radio"/> Male <input type="radio"/> Female
	Ethnicity <input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino
	Race (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Percentage of Votes	100.0%
Percentage of Equity	100.0%
Percentage of Total Assets (equity plus debt)	100.0%

Copy 2.	Name	PAMPLIN COMMUNICATIONS CORPORATION
	Address	Street PO BOX 22109 City/State PORTLAND, OREGON Postal/ZIP Code 97269 - 2109 Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input checked="" type="radio"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder

	<input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
FCC Registration Number	0019382522
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input checked="" type="checkbox"/> N/A (entity)
	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
	Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
	Race (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Percentage of Votes	100.0%
Percentage of Equity	100.0%
Percentage of Total Assets (equity plus debt)	100.0%

Copy 3.	Name	ROBERT B. PAMPLIN, JR.
	Address	Street 6605 SE LAKE ROAD City/State PORTLAND, OREGON Postal/ZIP Code 97222 Country (if not U.S.)
	Listing Type	<input type="checkbox"/> Respondent <input checked="" type="checkbox"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="checkbox"/> Licensee (or Officer/Director of Licensee) <input type="checkbox"/> Person with attributable interest <input type="checkbox"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
	FCC Registration Number	0019411792
	Gender, Ethnicity, Race and Citizenship Information	<input type="checkbox"/> N/A (entity)
		Gender <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female

(Natural Persons)	Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
	Race (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White
	Citizenship US
Percentage of Votes	0.0%
Percentage of Equity	0.0%
Percentage of Total Assets (equity plus debt)	0.0%

Copy 4.	Name	ANNE PAMPLIN-EVENSON
	Address	Street 6605 SE LAKE ROAD City/State PORTLAND, OREGON Postal/ZIP Code 97222 Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
	FCC Registration Number	0019411834
	Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity) Gender <input type="radio"/> Male <input checked="" type="radio"/> Female Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino Race (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White

	Citizenship US
Percentage of Votes	0.0%
Percentage of Equity	0.0%
Percentage of Total Assets (equity plus debt)	0.0%

Copy 5.	Name	ANDREA J. MAREK
	Address	Street 6605 SE LAKE ROAD City/State PORTLAND, OREGON Postal/ZIP Code 97222 Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
	FCC Registration Number	0019411800
	Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)
		Gender <input type="radio"/> Male <input checked="" type="radio"/> Female
		Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
		Race (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White
	Citizenship US	
Percentage of Votes	0.0%	
Percentage of Equity	0.0%	
Percentage of Total Assets (equity plus debt)	0.0%	

Copy 6.	Name	CHARLES NEDROW
	Address	Street 6605 SE LAKE ROAD City/State PORTLAND, OREGON Postal/ZIP Code 97222 Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder
	Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest
	Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):
	FCC Registration Number	0019411826
	Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity)
		Gender <input checked="" type="radio"/> Male <input type="radio"/> Female
		Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino
		Race (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White
Citizenship	US	
Percentage of Votes	0.0%	
Percentage of Equity	0.0%	
Percentage of Total Assets (equity plus debt)	0.0%	

(b) Respondent certifies that any equity and financial interests not reported in response to Question 3  Yes  No  
(a) are non-attributable. [Exhibit 3]

If "No", submit as an Exhibit an explanation.

(c) Does the Respondent or any person/entity with an attributable interest in the Respondent also hold an attributable interest in any other broadcast station, or in any newspaper entities in the same market as defined in 47 C.F.R. Section 73.3555?  Yes  No

If "Yes", provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below for the applicable type of interest (broadcast or newspaper).

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](#).

**Broadcast Interest Subform or Broadcast Interest Spreadsheet**

Copy	Name of Interest Holder	Call Sign	Community of License	Facility ID Number	Percentage of Votes	Percentage of Equity	Percentage of total assets (EDP)	Positional Interest (Check all that apply)
1.	PAMPLIN COMMUNICATIONS CORPORATION	KKOV	City VANCOUVER State WASHINGTON	69812	100.0%	100.0%	100.0%	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (specify)
2.	ROBERT B. PAMPLIN, JR.	KKOV	City VANCOUVER State WASHINGTON	69812	0.0%	0.0%	0.0%	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (specify)
3.	ANNE PAMPLIN-EVENSON	KKOV	City VANCOUVER State WASHINGTON	69812	0.0%	0.0%	0.0%	<input type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (specify)
4.	ANDREA J. MAREK	KKOV	City VANCOUVER State WASHINGTON	69812	0.0%	0.0%	0.0%	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (specify)
5.	CHARLES NEDROW	KKOV	City VANCOUVER State WASHINGTON	69812	0.0%	0.0%	0.0%	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Entity <input type="checkbox"/> Other (specify)

**[Newspaper Information]**

(d) Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings?  Yes  No

If "Yes", complete the information describing the Relationship.

**Familial Relationships**

Copy	Name	Parent / Child	Spouse	Sibling
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**Exhibits**

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**Exhibit 5**

**Description:** ATTRIBUTABLE OWNERSHIP INTERESTS CHART

SEE ATTACHMENT

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**Attachment 5**

Description
2015 ORGANIZATIONAL CHART