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

Section I - General Information

| | | | | | | | | | | | | |
|--|---|-----------------------------|--|------------------|---|-------------------|--|--|--|---------------------------------------|-------------------|-----------------------------|
| 1. | Legal Name of the Respondent PAMPLIN COMMUNICATIONS CORPORATION Street Address (1) ATTN: LEGAL DEPARTMENT Street Address (2) PO BOX 22109 <table border="1"> <tr> <td>City PORTLAND</td> <td>State or Country (if Foreign address) OR</td> <td>ZIP Code 97269</td> </tr> <tr> <td>Telephone Number (include area code) (503) 553-0380</td> <td colspan="2">E-Mail Address (if available) AMAREK@PAMPLINCORP.COM</td> </tr> <tr> <td>FCC Registration Number 0019382522</td> <td>Call Sign KPAM</td> <td>Facility ID Number 29553</td> </tr> </table> | | | 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 0019382522 | Call Sign KPAM | Facility ID Number 29553 |
| 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 0019382522 | Call Sign KPAM | Facility ID Number 29553 | | | | | | | | | | |
| 2. | Contact Representative MAGALI SOSA-TIRADO Street Address (1) LEGAL DEPARTMENT Street Address (2) P.O. BOX 22109 <table border="1"> <tr> <td>City PORTLAND</td> <td>State or Country (if Foreign address) OR</td> <td>ZIP Code 97269</td> </tr> <tr> <td>Telephone Number (include area code) (503) 546-5108</td> <td colspan="2">E-Mail Address (if available) MSOSATIRADO@PAMPLINCORP.COM</td> </tr> </table> | | | 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 | | | | |
| 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 type="radio"/> Licensee <input type="radio"/> Permittee <input checked="" 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 checked="" type="radio"/> Fee-exempt Report <input type="radio"/> Other <input 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 submit as an Exhibit a listing by Section and Question Number the portions of the previous Report that are being revised. | | | | | | | | | | | |

[Exhibit 1]

| 7. | <p>License and Station Information. The stations listed below are all licensed to the following person or entity:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;"> <p>Licensee Name:</p> <p>PAMPLIN BROADCASTING-OREGON, INC.</p> </td> <td style="width: 40%; padding: 2px;"> <p>Licensee's FCC Registration Number (FRN)</p> <p>0003746336</p> </td> </tr> </table> | <p>Licensee Name:</p> <p>PAMPLIN BROADCASTING-OREGON, INC.</p> | <p>Licensee's FCC Registration Number (FRN)</p> <p>0003746336</p> | | | | | | | | |
|--|--|--|---|-----------------------|-----------------------|------------------|----|------|-------|-------------------|------------|
| <p>Licensee Name:</p> <p>PAMPLIN BROADCASTING-OREGON, INC.</p> | <p>Licensee's FCC Registration Number (FRN)</p> <p>0003746336</p> | | | | | | | | | | |
| | <p>Station List</p> <p>This Report is filed for the following stations:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 10%; text-align: center; padding: 2px;">Copy</th> <th style="width: 15%; text-align: center; padding: 2px;">Call Sign</th> <th style="width: 15%; text-align: center; padding: 2px;">Facility ID Number</th> <th style="width: 40%; text-align: center; padding: 2px;">Location (City/State)</th> <th style="width: 20%; text-align: center; padding: 2px;">Class of Service</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 2px;">1.</td> <td style="text-align: center; padding: 2px;">KPAM</td> <td style="text-align: center; padding: 2px;">29553</td> <td style="text-align: center; padding: 2px;">TROUTDALE, OREGON</td> <td style="text-align: center; padding: 2px;">AM Station</td> </tr> </tbody> </table> | Copy | Call Sign | Facility ID Number | Location (City/State) | Class of Service | 1. | KPAM | 29553 | TROUTDALE, OREGON | AM Station |
| Copy | Call Sign | Facility ID Number | Location (City/State) | Class of Service | | | | | | | |
| 1. | KPAM | 29553 | TROUTDALE, OREGON | AM Station | | | | | | | |
| 8. | <p>Respondent is:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p><input type="radio"/> Sole Proprietorship</p> <p><input checked="" type="radio"/> For-profit corporation</p> </div> <div style="width: 30%;"> <p><input type="radio"/> Not-for-profit corporation</p> <p><input type="radio"/> General partnership</p> </div> <div style="width: 30%;"> <p><input type="radio"/> Limited partnership</p> <p><input type="radio"/> Other</p> <p>[Exhibit 2]</p> </div> </div> <p>If "Other," describe nature of the Respondent in an Exhibit.</p> | | | | | | | | | | |

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

| | | | Number of shares | | | |
|------|---|---|------------------|---------------------------|----------|----------|
| Copy | Class of Stock (preferred, common or other) | Voting or Non-Voting | 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 | 235 | 0 | 9765 |

- 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 COMMUNICATIONS CORPORATION |
| | 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 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 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 | 0019382522 |
| 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 Citizenship |
| Percentage of Votes | 100.0% |
| Percentage of Equity | 100.0% |
| Percentage of Total Assets (equity plus debt) | 100.0% |

| | | |
|---------|---|---|
| Copy 2. | Name | R.B. PAMPLIN CORPORATION |
| | 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 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 | 0019386739 |
| 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 Citizenship |
| 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="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder |
| | Relationship to Licensee | <input type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" 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 | 0019411792 |
| | Gender, Ethnicity, Race and Citizenship Information | <input type="checkbox"/> N/A (entity) Gender <input checked="" type="radio"/> Male <input type="radio"/> 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 type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" 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 type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" 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 type="radio"/> Licensee (or Officer/Director of Licensee) <input checked="" 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) |
| 6. | R.B. PAMPLIN CORPORATION | KKOV | City VANCOUVER State WASHINGTON | 69812 | 0.0% | 0.0% | 0.0% | <input 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 checked="" 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? | <input checked="" type="radio"/> Yes <input type="radio"/> No | | | | |
| If "Yes", complete the information describing the Relationship. | | | | | | |
| Familial Relationships | | | | | | |
| Copy | Name | Parent / Child Spouse Sibling | | | | |
| 1. | ROBERT B. PAMPLIN, JR. AND ANNE PAMPLIN-EVENSON | <input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> | | | | |
| (e) | Is Respondent seeking an attribution exemption for any officer or director with duties unrelated to the Licensee ? | <input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 4] | | | | |
| 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. | | | | | | |
| [Enter Attribution Exemption Information] | | | | | | |
| 4. | Respondent's Interests Held. Each Respondent other than a Licensee should list the name and FCC Registration Number of all entities in which the Respondent holds a direct attributable ownership interest, where that listed entity has an attributable ownership interest in the Licensee of the stations associated with the Report. Licensees should select "N/A" in response to this question. For any listing that includes the name of a person or entity reported on multiple Ownership Reports, ensure that the FRN information is consistent among all such Ownership Reports. Respondents should coordinate with each other to ensure such consistency. | <input type="checkbox"/> N/A | | | | |
| Respondent's Interest | | | | | | |
| Copy 1. | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Name</td> <td>PAMPLIN BROADCASTING-OREGON, INC.</td> </tr> <tr> <td>FCC Registration Number</td> <td>0003746336</td> </tr> </table> | Name | PAMPLIN BROADCASTING-OREGON, INC. | FCC Registration Number | 0003746336 | |
| Name | PAMPLIN BROADCASTING-OREGON, INC. | | | | | |
| FCC Registration Number | 0003746336 | | | | | |
| 5. | Organizational Chart. LICENSEES ONLY. Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all persons/entities that have attributable interests in the Licensee. Non-Licensee Respondents should select "N/A" in response to this question. | <input checked="" type="checkbox"/> N/A [Exhibit 5] | | | | |

Section III - Certification

I certify that I am PRESIDENT AND CHIEF EXECUTIVE OFFICER
 (Official Title)

of PAMPLIN BROADCASTING-OREGON, INC.
 (Exact Legal Title or Name of Respondent)

and 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.

(Date of the signature below must (1) be no earlier than Oct. 1 of the filing year when filing a Biennial Ownership Report (and no earlier than 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.)

| | |
|------------------------------|--------------------|
| Signature ANDREA J. MAREK | Date 11/19/2015 |
|------------------------------|--------------------|

Telephone Number of Respondent (Include area code) (503) 553-0380

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 LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).