

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0084 (June 2002)	FOR FCC USE ONLY
FCC 323-E		
Ownership Report For Noncommercial Educational Broadcast Station		FOR COMMISSION USE ONLY FILE NO. - 20130920AES
Read INSTRUCTIONS Before Filling Out Form		

Section I - General

1.	Legal Name of the Licensee/Permittee LYNN CANAL BROADCASTING, INC.		
	Mailing Address PO BOX 1109 #1 THEATRE COURT		
	City HAINES	State or Country (if foreign address) AK	ZIP Code 99827 - 1109
	Telephone Number (include area code) 9077662020		E-Mail Address (if available) GM@KHNS.ORG
	FCC Registration Number: 0014071799	Call Sign KHNS	Facility ID Number 39331
2.	Contact Representative (if other than Licensee/Permittee) SUSAN M. JENKINS		
	Firm or Company Name THE SANCHEZ LAW FIRM, P.C.		
	Mailing Address 2300 M STREET, NW SUITE 800		
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20037 -
	Telephone Number (include area code) 2022372814		E-Mail Address (if available) SUSANJENKINS2348@GMAIL.COM
3.	Name of entity, if other than licensee or permittee, for which report is filed		
	Mailing Address		
	City	State or Country (if foreign address)	ZIP Code -
	Telephone Number (include area code)		E-Mail Address (if available)

Section II - Ownership Information

4.	All of the information furnished in this Report is accurate as of 9/13/2013 (Date must comply with 47 C.F.R. Section 73.3615(d), i.e., information must be current within 60 days of filing of this report, when 4(a) below is checked.)		
	This Report is filed for (check one)		
	a. <input checked="" type="radio"/> Biennial	b. <input type="radio"/> Transfer of Control or Assignment of License/Permit	c. <input type="radio"/> Other
	d. <input type="radio"/> Amendment to pending application		
	for the following stations:		

[Enter Station Information]

Station List

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
KHNS	39331	HAINES AK	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
K220BK	39333	SKAGWAY AK	FX

5. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

Contracts/Instruments Information

List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject shall respond.)

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
ARTICLES OF INCORPORATION	STATE OF ALASKA	02/14/1978	

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
CORPORATE BYLAWS	STATE OF ALASKA	5/28/2000	

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
APBI/APM PROGRAM AGREEMENT WITH NP, PRI, OTHER NATIONAL PROGRAMMING ENTITIES	LYNN CANAL BROADCASTING, INC	7/3/2013	7/2/2014

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
ARTICLES OF INCORPORATION AMENDMENT	LYNN CANAL BROADCASTING, INC	12/28/1982	

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
AMENDED BY LAWS	LYNN CANAL BROADCASTING, INC	6/10/2013	

6. Is the governing board directly or indirectly under the control of another entity? Yes No
 If Yes, is a separate FCC Form 323-E submitted for such entity? Yes No

7. List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages, if necessary.

[Enter Owner Information]

Owner Information

List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

- a. Name and address of officer, member of governing board, and holders of 1% or more ownership interest (if other than individual also show name, address and citizenship of natural person authorized to vote the interest). List officers first, then board members, and thereafter, holders of 1% or more ownership interest, if any.
- b. Citizenship.
- c. Office held.
- d. Percent of interest held.
- e. Principal profession or occupation.
- f. By whom appointed or elected.
- g. Existing interests in any other broadcast station, including the nature and size of such interests.

a. Name and Address.	ERIC KOCHER 428 YOUNG RD, HAINES AK 99827
b. Citizenship.	US
c. Office held.	DIRECTOR
d. Percent of interest held.	14
e. Principal profession or occupation.	ATTORNEY SELF EMPLOYED
f. By whom appointed or elected.	MEMBERSHIP
g. Existing interests	NONE

a. Name and Address.	DEB POTTER 1751 STATE ST., SKAGWAY, AK 99840
b. Citizenship.	US
c. Office held.	VICE PRESIDENT
d. Percent of interest held.	14
e. Principal profession or occupation.	BARTENDER, RED ONION SALOON, SKAGWAY
f. By whom appointed or elected.	MEMBERSHIP
g. Existing interests	NONE

a. Name and Address.	DIANE SLY 18 RAVEN ROAD, HAINES, AK 99827
b. Citizenship.	US
c. Office held.	DIRECTOR
d. Percent of interest held.	14
e. Principal profession or occupation.	RETIRED THERAPIST, REACH
f. By whom appointed or elected.	BOARD APPOINTED
g. Existing interests	NONE

a. Name and Address.	JUDY EREKSON, 13 FORT SEWARD DRIVE, HAINES, AK 99827
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b. Citizenship.	US
c. Office held.	TREASURER
d. Percent of interest held.	14
e. Principal profession or occupation.	BUSINESS MANAGER HAINES BOROUGH SCHOOL DISTRICT
f. By whom appointed or elected.	MEMBERSHIP
g. Existing interests	NONE

a. Name and Address.	TEKLA HELGASON, PO BOX 1047, SKAGWAY, AK 99840
b. Citizenship.	US
c. Office held.	DIRECTOR
d. Percent of interest held.	14
e. Principal profession or occupation.	DRIVER/GUIDE, SMART BUS CO.
f. By whom appointed or elected.	MEMBERSHIP
g. Existing interests	NONE

a. Name and Address.	MIKE CASE 4 DEISHU DRIVE, HAINES, AK 99827
b. Citizenship.	US
c. Office held.	PRESIDENT
d. Percent of interest held.	14
e. Principal profession or occupation.	RETIRED ENGINEER
f. By whom appointed or elected.	MEMBERSHIP
g. Existing interests	NONE

a. Name and Address.	AMY SWANSTROM 73 CHILKOOT TRAIL RD, HAINES, AK 99827
b. Citizenship.	US
c. Office held.	SECRETARY
d. Percent of interest held.	14
e. Principal profession or occupation.	OWNER, MOUNTAIN FLYING SERVICE
f. By whom appointed or elected.	MEMBERSHIP
g. Existing interests	NONE

SECTION III - CERTIFICATION

I certify that I am PRESIDENT

(Official Title)

of LYNN CANAL BROADCASTING, 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 certification must be within 60 days of the date shown in Question 4, Section II and in no event prior to that date.)

Signature MIKE CASE	Date 9/19/2013
Telephone Number of Respondent (Include area code) 9077662020	

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).

Exhibits
