

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000035928Submit Date:2017-12-04FRN:0003758398Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:12/04/2017Filing Status:Active

Section I - General Information

1. Respondent

 FRN
 Entity Name

 0003758398
 Rip Radio, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
5503 SW 6th Ave	Cape Coral	FL	33914- 7296	+1 (203) 762- 9425	wwdj@optimum. net

2. Contact Representative

Dennis Jackson Rip Radio LLC	Name	Organization
	Dennis Jackson	Rip Radio LLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
5503 SW 6th Ave	Cape Coral	FL	33914-7296	+1 (203) 762-9425	wwdj@optimum.net

3. Application Filing Fee

Question

Is this application being submitted without a filing fee?

Response No

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	1	95	\$70.00
			-	*	Total	\$70.00

4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Limited liability company	

(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)

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

Licensee/Permittee Name	FRN
Rip Radio, LLC	0003758398

Fac. ID No.	Call Sign	City	State	Service
83204	WRIP	WINDHAM	NY	FM
136793	WRIP-FM1	HUNTER	NY	FB
151641	W248BG	DURHAM	NY	FX

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other 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. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	Operating Agreement	
Parties to contract or instrument	Rip Radio LLC	
Date of execution	07/1999	
Date of expiration	No expiration date	

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) 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	0003758398			
Entity Name	Rip Radio, LLC			
Address	PO Box			
	Street 1	5503 SW 6th Ave		
	Street 2			
	City	Cape Coral		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33914-7296		
	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	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	No	

Ownership Information

FRN	0008629321			
Name	Dennis Jackson			
Address	PO Box			
	Street 1	5503 SW 6th Ave		
	Street 2			
	City	Cape Coral		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33914-7296		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Owner			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	50.0%		
	Total assets (Equity Debt Plus)	50.0%		
Does interest holder have a that do not appear on this re	n attributable interest in one of eport?	r more broadcast stations	Yes	

Ownership Information

FRN 0003777273 Name Maureen Jackson	
Name Maureen Jackson	
Address PO Box	
Street 1	5503 SW 6th Ave
Street 2	
City	Cape Coral
State ("NA" if non-U.S. address)	. FL
Zip/Postal Code	33914-7296
Country (if non-U.S. address)	United States
Listing Type Other Interest Holder	
Positional InterestsLC/LLC/PLLC Member,(check all that apply)	Owner

Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female Not Hispanic or Latino	
	Ethnicity		
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	50.0%	Jointly Held? No
	Equity	50.0%	
	Total assets (Equity Debt Plus)	50.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes
	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes
filed, as defined in 47 C.F.I If " <u>Yes</u> ," provide information EITHER the subform OR the Respondents with a large nu	describing the interest(s), using e spreadsheet option below. umber (50 or more) of entries to		
Spreadsheet format with the	be submitted in a special XML appropriate structure that is on. For instructions on how to to complete this question		
(Equity Debt Plus) field bland that interest holder has an a newspaper entity solely on the Equity Debt Plus attribution a 73.3555, Note 2(i). If using a into the percentage of total a for an interest holder unless	he basis of the Commission's standard, 47 C.F.R. Section an XML Spreadsheet, enter "NA" assets (Equity Debt Plus) field that interest holder has an ewspaper entity solely on the		
for each interest holder repo	structions for detailed information		

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

If "<u>Yes</u>," provide the following information for each such the relationship.

FRN	0008629321	Name	Dennis Jackson	
FRN	0003777273	Name	Maureen Jackson	
Relationship	Spouses	Spouses		

(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.	

3. Organizational Chart (Licensees Only) Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

Licensee is an LLC with no parent entities.

Section III - Certification

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: Operating Manager Exact Legal Title or Name of Respondent: Rip Radio LLC Name: Dennis Jackson Phone: 2037627425 12/02/2017