

(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number: 0000044356 | Submit Date: 2018-02-27 | FRN: 0023414378

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/27/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0023414378	SENDA EDUCATIONAL BROADCASTING INC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
HACIENDAS DEL CARIBE YUQUIYU ST M-6	ТОА ВАЈА	PR	00954	+1 (787) 948- 2486	MARISOLSALMISTAPROFETICA@GMAIL.

2. Contact Representative

Name	Organization
FRANCISCO R. MONTERO, ESQ.	FLETCHER HEALD & HIDRETH, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N 17TH ST 11TH FLOOR	ARLINGTON	VA	22209	+1 (703) 812- 0400	MONTERO@FHHLAW.

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Licensee		
Is the Respondent's governing bo indirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No	

(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
SENDA EDUCATIONAL BROADCASTING INC	0023414378

Fac. ID No.	Call Sign	City	State	Service
26602	WELU	AGUADILLA	PR	DTV
32144	WVQS-LD	ISABEL SEGUNDA	PR	LPD
182087	WUSP-LD	PONCE	PR	LPT

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	CERTIFICATE OF NON-PROFIT CORPORATION	
Parties to contract or instrument	PUERTO RICO	
Date of execution	02/2014	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: CERTIFICATE OF NON-PROFIT CORPORATION REGISTRATION NUMBER: 334761	

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, members of the governing board (or other governing entity), stockholders, 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 0023414378			
	Entity Name SENDA EDUCATIONAL BROADCASTING INC		

Address	РО Вох		
	Street 1	HACIENDAS DEL CARIBE	
	Street 2	YUQUIYU ST M-6	
	City	TOA BAJA	
	State ("NA" if non-U.S. address)	PR	
	Zip/Postal Code	00954	
	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	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this r	in attributable interest in one or eport?	more broadcast stations No	

FRN	9990128781		
Name	Marisol Reyes Rolon		
Address	РО Вох	17140	
	Street 1	RR07	
	Street 2		
	City	Toa Alta	
	State ("NA" if non-U.S. address)	PR	
	Zip/Postal Code	00954	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Businesswoman		
By Whom Appointed or Elected	Senda Educational Broadcasting, Inc.		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship US		

Persons Only)	Gender	Female
	Ethnicity	Hispanic or Latino
	Race	White
Interest Percentages	Voting	25.0%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or mothat do not appear on this report?		r more broadcast stations No

Ownership Information				
FRN	9990128785			
Name	Steven Hernandez Agosto			
Address	PO Box 17140			
	Street 1	RR07		
	Street 2			
	City	Toa Alta		
	State ("NA" if non-U.S. address)	PR		
	Zip/Postal Code	00954		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Businessman			
By Whom Appointed or Elected	Senda Educational Broadcasting, Inc.			
Citizenship, Gender,	Citizenship	us		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Hispanic or Latino		
	Race	Race White		
Interest Percentages	Voting	25.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information

FRN	9990128790	9990128790		
Name	Ramonita Miranda Garcia			
Address	PO Box	24		
	Street 1			
	Street 2			
	City	Toa Alta		
	State ("NA" if non-U.S. address)	PR		
	Zip/Postal Code	00954		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Educator			
By Whom Appointed or Elected	Senda Educational Broadcasting, Inc.			
Citizenship, Gender,	Citizenship US			
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	25.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information			
FRN	9990128796	9990128796	
Name	Victor Manuel Rodriguez Marir	Victor Manuel Rodriguez Marin	
Address	PO Box		
	Street 1 Calle 7-A3 Street 2		
	City Bayamon		
	State ("NA" if non-U.S. address) Zip/Postal Code 00957 Country (if non-U.S. address) United States		

Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Principal Profession or Occupation	IT Technician	IT Technician		
By Whom Appointed or Elected	Senda Educational Broadcasting, Inc.			
Citizenship, Gender,	Citizenship US			
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	25.0%		
(enter percentage values from 0.0 to 100.0)	Equity 0.0%			
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	
	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes	

If "No," submit as an exhibit an explanation.	
(c) 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.

File Name	Uploaded By	Attachment Type	Description
Senda Ownership Chart.pdf	Applicant	Ownership Chart	Senda Educational Broadcasting Inc Ownership Chart

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: President Exact Legal Title or Name of Respondent: Senda Educational Broadcasting, inc. Name: Marisol Reyes Rolon Phone: 7878494020