

(REFERENCE COPY - Not for submission)

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

File Number: **0000044787** Submit Date: **2018-02-28** FRN: **0005068556**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/28/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0005068556	Bilingual Broadcasting Foundation Inc.	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 7189	Santa Rosa	CA	95407	+1 (707) 545- 8833	info@kbbf-fm. org

2. Contact Representative

Name	Organization	
Alicia Sanchez	Bilingual Broadcasting Foundation, Inc.	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email	
PO Box 7189	Santa Rosa	CA	95407	+1 (707) 545-8833	info@kbbf-fm.org	

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 boa indirectly under the control of ano	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

Bilingual Broadcasting Foundation Inc.	0005068556
Dimigual Disausasing Foundation me.	000000000

Fac. ID No.	Call Sign	City	State	Service
5310	KBBF	CALISTOGA	CA	FM

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.

Not Applicable.

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	0005068556			
Entity Name	Bilingual Broadcasting Founda	Bilingual Broadcasting Foundation Inc.		
Address	PO Box 7189			
	Street 1			
	Street 2			
	City	Santa Rosa		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	95407		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	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 from 0.0 to 100.0)	Voting	0.0%		
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this	No			

Ownership Information				
FRN	9990130956	9990130956		
Name	Alicia Sanchez			
Address	РО Вох	7189		
	Street 1			
	Street 2			
	City	Santa Rosa		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	95407		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	retired	retired		
By Whom Appointed or Elected	membership			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Hispanic or Latino		
	Race	American Indian or Alaska Native,	White	
Interest Percentages	Voting	11.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations)	

Ownership Information		
FRN	9990130957	
Name	Caroline Banuelos	
Address	PO Box 7189	

	Street 1		
	Street 2		
	City	Santa Rosa	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95407	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	volunteer manager		
By Whom Appointed or Elected	board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	Race American Indian or Alaska Native	
Interest Percentages	Voting	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990130958	
Name	Santos Molina	
Address	PO Box 7189	
	Street 1	
	Street 2	
	City Santa Rosa	
	State ("NA" if non-U.S. CA address)	
	Zip/Postal Code	95407
	Country (if non-U.S. United States address)	
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	

Principal Profession or Occupation	Sales person	
By Whom Appointed or Elected	membership	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages	Voting	11.1%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	9990130959		
Name	Michaele Morales	Michaele Morales	
Address	PO Box	7189	
	Street 1		
	Street 2		
	City	Santa Rosa	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95407	
	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	school district employee		
By Whom Appointed or Elected	board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	American Indian or Alaska Native, White	
Interest Percentages	Voting	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

Total assets (Equi	ty Debt 0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		s No

Ownership Information		
FRN	9990130960	
Name	Alicia Roman	
Address	PO Box 7189	
	Street 1	
	Street 2	
	City	Santa Rosa
	State ("NA" if non-U.S. address)	CA
	Zip/Postal Code	95407
	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	attorney	
By Whom Appointed or Elected	board	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural	Gender	Female
Persons Only)	Ethnicity	Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages	Voting	11.1%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have at that do not appear on this re	n attributable interest in one o	r more broadcast stations No

Ownership Information		
FRN	9990130961	
Name	Lisa Maldonado	
Address	PO Box 7189 Street 1	
	Street 2	

	City	Santa Rosa	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95407	
	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	labor representative	labor representative	
By Whom Appointed or Elected	board	board	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	American Indian or Alaska Na	ative
Interest Percentages	Voting	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No

Ownership Information		
FRN	9990130962	
Name	MaDonna Cruz	
Address	PO Box 7189	
	Street 1	
	Street 2	
	City Santa Rosa State ("NA" if non-U.S. CA address) Zip/Postal Code 95407	
	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	administrative assistant	

By Whom Appointed or Elected	board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information		
FRN	9990130963	
Name	Albert Wahrhaftig	
Address	PO Box 7189	
	Street 1	
	Street 2	
	City	Santa Rosa
	State ("NA" if non-U.S. address)	CA
	Zip/Postal Code	95407
	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	retired university professor	
By Whom Appointed or Elected	board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	11.1%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

No

Ownership Information				
FRN	9990130964	9990130964		
Name	Alan Bloom			
Address	РО Вох	7189		
	Street 1			
	Street 2			
	City	Santa Rosa		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	95407		
	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	retired engineer			
By Whom Appointed or Elected	board			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	us		
	Gender	Male		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%		
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
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 equinat any interests, including equination are non-attributable. an explanation.	ty, financial, or voting	Yes	

(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.

Bilingual Broadcasting Foundation, Inc, a non-profit membership organization, holds the license for KBBF radio

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: Board president Exact Legal Title or Name of Respondent: Bilingual Broadcasting Foundation, Inc. Name: Alicia Sanchez Phone: 7075458833