

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000045337Submit Date: 2018-02-28FRN: 23920309Purpose: Commercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 02/28/2018Filing Status: ActiveStatus Date: 02/28/2018

Section I - General Information

1. Respondent

FRN	Entity Name
0023920309	Majestic Media, Inc.

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
100 W. Apache St.	Farmington	NM	87401	+1 (505) 330- 3856	don@majesticmediausa. com

2. Contact Representative

Gregg P. Skall, Esq.		Womble Bond Dickinson (US) LLP
Street	City (and Country if non U.S.	Zip

Organization

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1200 19th Street, N.W. Suite 500	Washington	DC	20036	+1 (202) 857- 4442	gregg.skall@wbd-us. com

3. Application Filing Fee

Not Applicable

Name

4. Nature of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees		
Nature of Respondent	For-profit corporation		

(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.

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

Licensee/Permittee Name			FRN		
Majestic Media, Inc.			002392	20309	
Fac. ID No.	Call Sign	City		State	Service
29518	KRZE	FARMINGTON		NM	AM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	contracts and other instruments report. In addition, attributable Lo disclosed by the licensee of the l attributable JSA, or a network aff Respondents, as well as License	d authorizations for one or more full power television, AM, and/or FM stations should list all s set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be brokering station on its ownership report. If the agreement is an attributable LMA, an ffiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee see Respondents that only hold authorizations for Class A television and/or low power television blicable" 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 Res itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partn non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening comport or entities.) List each interest holder with a direct attributable interest in the Respondent separately.			
			nk for an interest holder unless that interest holder has an Commission's Equity Debt Plus attribution standard, 47 C.F.R.	
	In the case of vertical or indirect attributable interest in the Licens		nose interests in the Respondent that also represent an ng submitted.	
	Entities that are part of an organizational structure that includes holding companies or other forms of indirect o separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder t 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 que The Respondent must provide an FCC Registration Number for each interest holder reported in response to the set of the s			
	Please see the Instructions for d			
	Ownership Information	0023920309		
	Entity Name	Majestic Media, Inc.		
	Address	PO Box		
		Street 1	100 W. Apache St.	
		Street 2		
		City	Farmington	
		State ("NA" if non-U.S. address)	NM	
		Zip/Postal Code	87401	
		Country (if non-U.S. address)	United States	
	Listing Type	Respondent		

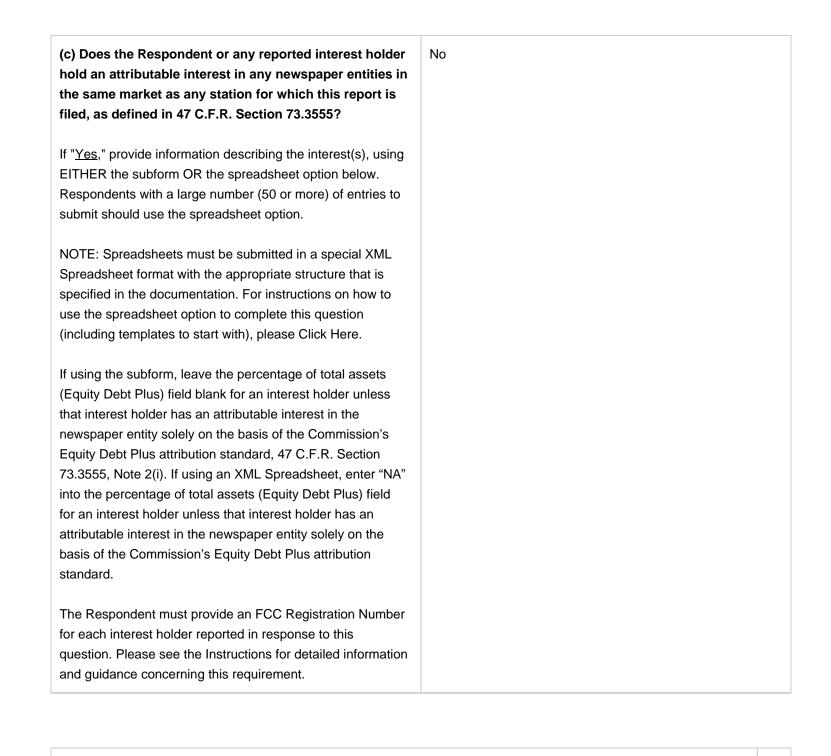
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information

interests, not reported in this filing are non-attributable.

If "No," submit as an exhibit an explanation.

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FRN	0026726034				
Name	Donald Vaughan				
Address	PO Box				
	Street 1	100 W. Apache St.			
	Street 2				
	City	Farmington			
	State ("NA" if non-U.S. address)	NM			
	Zip/Postal Code	87401			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Stockholder				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Not Hispanic or Latino	Not Hispanic or Latino		
	Race	White			
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	100.0%			
	Total assets (Equity Debt Plus)	100.0%			
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No		
(b) Respondent certifies th	at any interests, including equi	ty, financial, or voting	Yes		



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director withNoduties wholly unrelated to the Licensee(s)?

If "<u>Yes</u>," 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.

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: Owner Exact Legal Title or Name of Respondent: Donald L Vaughan Name: Donald Vaughan Phone: 5053303856 02/28/2018