

(REFERENCE COPY - Not for submission)

FRN

0015149842

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000097328
 Submit Date:
 2020-01-14
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 0015149842

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/14/2020

 Filing Status:
 Active
 Status:
 Status Date:
 01/14/2020

Section I - General Information

1. Respondent

Entity Name

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
200 South A Street Suite 400	Oxnard	CA	93030	+1 (805) 240-2070	alfredop@lazerbroadcasting. com

2. Contact Representative

Name	Organization
Kathleen Victory, Esq.	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812-0473	victory@fhhlaw.com

3. Application Filing Fee

Question	Response	
Is this application being submitted without a filing fee?	No	

Fees	Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
	Biennial	Form 323	MAR	40	95	\$2,800.00
		•	•	•	Total	\$2,800.00

4. Nature of Respondent

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

(b) Provide the following information about this report:

Purpose	Biennial		
"As of" date	10/01/2019		
	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
Lazer Licenses LLC	0015149842

Fac. ID No.	Call Sign	City	State	Service
866	KOXR	OXNARD	CA	AM
2243	KLUN	PASO ROBLES	CA	FM
3156	KZER	SANTA BARBARA	CA	AM
3395	KMQA	EAST PORTERVILLE	CA	FM
3727	КАЕН	BEAUMONT	CA	FM
4698	КХХМ	FELTON	CA	FM
8332	K282AE	OAKHURST	CA	FX
8338	KTNS	OAKHURST	CA	AM
8341	КААТ	OAKHURST	CA	FM
11707	KMZR	ATWATER	CA	FM
15099	KGAM	MERCED	CA	FM
24464	KGRB	JACKSON	CA	FM
32912	KJOR	WINDSOR	CA	FM
33393	KWRN	APPLE VALLEY	CA	AM
34349	KXLM	OXNARD	CA	FM
34526	KXSM	CHUALAR	CA	FM

34570	KSTV-LD	SACRAMENTO	CA	LPD
34582	KSRN	KINGS BEACH	CA	FM
35925	KLJR-FM	SANTA PAULA	CA	FM
35926	KLJR-FM1	VENTURA	CA	FB
36829	KXRS	HEMET	CA	FM
38442	KSBQ	SANTA MARIA	CA	АМ
43335	KBBU	MODESTO	CA	FM
43999	KXSB	BIG BEAR LAKE	CA	FM
46401	KLMM	OCEANO	CA	FM
51221	KLMG	ESPARTO	CA	FM
52469	KSSB	CALIPATRIA	CA	FM
52879	KSRT	CLOVERDALE	CA	FM
55416	KCAL	REDLANDS	CA	АМ
60423	KIQQ	BARSTOW	CA	АМ
63553	KSMY	LOMPOC	CA	FM
79388	KIQQ-FM	NEWBERRY SPRINGS	CA	FM
81804	KBTW	LENWOOD	CA	FM
87969	КВАА	GRASS VALLEY	CA	FM
88205	KMEN	MENDOTA	CA	FM
132814	KAAT-FM1	MERCED	CA	FB
144710	K258DE	APPLE VALLEY	CA	FX
151638	K293CK	SANTA BARBARA	CA	FX
160030	KFOY	SPARKS	NV	AM
164096	KMLY	GONZALES	CA	FM
164119	КХТТ	MARICOPA	CA	FM
164120	KEAL	TAFT	CA	FM
164200	KWNZ	LOVELOCK	NV	FM
166018	KNEZ	FERNLEY	NV	FM
180965	KNEZ-FM1	RENO	NV	FB
189473	KZTI	FALLON STATION	NV	FM
190208	KWNZ-FM1	RENO	NV	FB
190469	KZTI-FM1	RENO	NV	FB
191509	KSGZ	GREENFIELD	CA	FM

Section II – Biennial Ownership Information

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	Limited Liability Company Agreement	
Parties to contract or instrument	Members of Lazer Licenses, LLC	
Date of execution	05/2006	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: LLC Agreement	

Document Information

Description of contract or instrument	Certificate of Formation	
Parties to contract or instrument	State of Delaware	
Date of execution	05/2006	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Certificate of Formation	

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	0015149842	
Entity Name	Lazer Licenses LLC	
Address	PO Box	
	Street 1	200 South A Street
	Street 2	Suite 400

	City	Oxnard	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	93030	
	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 attributable interest in one or more broadcast stations No			No

that do not appear on this report?

Ownership Information

FRN	0000013466		
Entity Name	LAZER BROADCASTING CORP.		
Address	PO Box		
	Street 1	200 South A Street	
	Street 2	Suite 400	
	City	Oxnard	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	93030	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Owner		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
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%	

Ownership Information			
FRN	0019274505		
Name	Alicia Miranda		
Address	PO Box		
	Street 1	200 South A Street	
	Street 2	Suite 400	
	City	Oxnard	
	State ("NA" if non-U.S. address)	СА	
	Zip/Postal Code	93030	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
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 attributable interest in one or more broadcast stations Yes			Yes

Ownership Information			
FRN	0016142101		
Name	Alfredo Plascencia	Alfredo Plascencia	
Address	PO Box		
	Street 1	200 South A Street	
	Street 2	Suite 400	
	City	Oxnard	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	93030	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		

that do not appear on this report?

Positional Interests (check all that apply)	Other - Manager		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
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 an attributable interest in one or more broadcast stations Yes that do not appear on this report?			
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.If "No," submit as an exhibit an explanation.			Yes

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?	No
If " <u>Yes</u> ," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.	
NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.	
If using the subform, 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 newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.	
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.	

(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.

File Name	Uploaded By	Attachment Type	Description
Lazer Licenses Ownership Chart.pdf	Applicant	Ownership Chart	Lazer Licenses Ownership Flow Chart

Section III - Certification

Certification

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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: Manager Exact Legal Title or Name of Respondent: Lazer Licenses, LLC Name: Alfredo Plascencia Phone: 8052402070 01/14/2020