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

File Number: **0000096744** | Submit Date: **2020-01-13** | FRN: **0004998118**  
Purpose: **Noncommercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **01/13/2020**  
Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0004998118	The School Board of Miami-Dade County, Florida

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
172 NE 15th Street	Miami	FL	33132	+1 (305) 995-2259	jlabonia@wlrn.org

2. Contact Representative

Name	Organization
Joseph A. Belisle, III.	Belisle Law Firm PA

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 970620	Miami	FL	33197	+1 (305) 978-7675	joe@belislelaw.com

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 board (or other governing entity) directly or indirectly under the control of another entity?	No

(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
The School Board of Miami-Dade County, Florida	0004998118

Fac. ID No.	Call Sign	City	State	Service
59322	W263BO	KEY WEST, ETC.	FL	FX
59323	W206AS	BIG PINE KEY	FL	FX
66339	WLRN-FM	MIAMI	FL	FM
66350	W227AD	KEY COLONY BEACH	FL	FX
66353	W221AY	TAVERNIER	FL	FX
66358	WLRN-TV	MIAMI	FL	DTV
122606	WKWM	MARATHON	FL	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.

Document Information	
Description of contract or instrument	PBS Program Differentiation Plan
Parties to contract or instrument	PBS
Date of execution	06/2002
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation Agreement

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
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FRN	0004998118		
Entity Name	The School Board of Miami-Dade County, Florida		
Address	PO Box		
	Street 1	172 NE 15th Street	
	Street 2		
	City	Miami	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33132	
	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%	
	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	9990119681		
Name	Dorothy Bendross-Mindingall		
Address	PO Box		
	Street 1	1450 NE 2nd Avenue	
	Street 2	Suite 700	
	City	Miami	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33132	
	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	Educator, Former State Legislator		

By Whom Appointed or Elected	Elected- District 2	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	Black or African American
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 an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990119682	
Name	Martin S. Karp	
Address	PO Box	
	Street 1	1450 NE 2nd Ave
	Street 2	Suite 700
	City	Miami
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33132
	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	Educator	
By Whom Appointed or Elected	Elected-District 3	
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 an attributable interest in one or more broadcast stations that do not appear on this report?	No
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Ownership Information		
FRN	9990119683	
Name	Susie V. Castillo	
Address	PO Box	
	Street 1	1450 NE 2nd Avenue
	Street 2	Suite 700
	City	Miami
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33132
	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	School Board Member	
By Whom Appointed or Elected	Elected-District 5	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	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 an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990119684	
Name	Lawrence S. Feldman	
Address	PO Box	
	Street 1	1450 NE 2nd Avenue
	Street 2	Suite 700
	City	Miami

	<b>State ("NA" if non-U.S. address)</b>	FL
	<b>Zip/Postal Code</b>	33132
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Educator	
<b>By Whom Appointed or Elected</b>	Elected - District 9	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Male
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	0.0%
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

Ownership Information		
<b>FRN</b>	9990119685	
<b>Name</b>	Steve Gallon, III.	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	1450 NE 2nd Avenue
	<b>Street 2</b>	Suite 700
	<b>City</b>	Miami
	<b>State ("NA" if non-U.S. address)</b>	FL
	<b>Zip/Postal Code</b>	33132
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Other - Vice-ChairpersonMember of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Educator	
<b>By Whom Appointed or Elected</b>	Elected-District 1	

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	Black or African American
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 an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990119686	
Name	Perla Tabares Hantman	
Address	PO Box	
	Street 1	1450 NE 2nd Avenue
	Street 2	Suite 700
	City	Miami
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33132
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - ChairpersonMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	School Board Member	
By Whom Appointed or Elected	Elected - District 4	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	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 an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990119687	
Name	Lubby Navarro	
Address	PO Box	
	Street 1	1450 NE 2ND Avenue
	Street 2	Suite 700
	City	Miami
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33132
	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	School Board Member	
By Whom Appointed or Elected	Elected-District 7	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	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 an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990119688	
Name	Marta Perez	
Address	PO Box	
	Street 1	1450 NE 2nd Avenue
	Street 2	Suite 700
	City	Miami
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33132

	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	Former Educator-Business Woman	
By Whom Appointed or Elected	Elected - District 8	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	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 an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990119689	
Name	Mari Tere Rojas	
Address	PO Box	
	Street 1	1450 NE 2nd Avenue
	Street 2	Suite 700
	City	Mimai
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33132
	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	Educator	
By Whom Appointed or Elected	Elected - District 6	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female

	<b>Ethnicity</b>	Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	11.1%	
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>	0.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			No

Ownership Information			
FRN	9990119716		
Name	Alberto M. Carvalho		
Address	PO Box		
	Street 1	1450 NE 2nd Avenue	
	Street 2	Suite 912	
	City	Miami	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	33132	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Superintendent of Schools		
Principal Profession or Occupation	Superintendent of Schools		
By Whom Appointed or Elected	School Board of Miami-Dade County, Florida		
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	0.0%	
	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	0027172709

Name	John D. LaBonia	
Address	PO Box	
	Street 1	172 NE 15th Street
	Street 2	
	City	Miami
	State ("NA" if non-U.S. address)	FL
	Zip/Postal Code	33132
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - General Manager WLRN	
Principal Profession or Occupation	General Manager WLRN	
By Whom Appointed or Elected	Superintendent of Schools	
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	0.0%
	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

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?  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.	No
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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 has no parent entity.

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 LICENSE --OR 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: <b>General Manager WLRN</b> Exact Legal Title or Name of Respondent: <b>The School Board of Miami-Dade County, Florida</b> Name: <b>John LaBonia</b> Phone: <b>3059952259</b>  01/12/2020