

FRN

Loop Road

# Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000101313
 Submit Date:
 2020-01-28
 FRN:
 0022452874

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/28/2020

 Filing Status:
 Active
 Status:
 Status
 Status Date:
 01/28/2020

# **Section I - General Information**

# 1. Respondent

Entity Name

0022452874 Micronesia Br		Micronesia Bro	Proadcasting Company, LLC			
Street Address	City (and Count address)	try if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
600 Harmon	Dededo		GU	96912	+1 (671) 637- 5826	John@JWKingLaw. com

# 2. Contact Representative

Name	Organization
John Wells King	Law Office of John Wells King, PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4051 Shoal Creek Ln E	Jacksonville	FL	32225	+1 (904) 647-9610	John@JWKingLaw.com

# 3. Application Filing Fee

# Not Applicable

# 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	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.

#### and Station(s)

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

Licensee/Permittee Name			FRN		
Pacific Telestations, LLC			0022452825	)022452825	
Fac. ID No.	Call Sign	City	State	Service	
51233	KUAM-TV	HAGATNA	GU	DTV	
51236	KUAM-FM	AGANA	GU	FM	
51238	KUAM	AGANA	GU	AM	

### Section II – Biennial Ownership Information

## 1. 47 C.F.R. 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.

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, 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	0022452874			
Entity Name	Micronesia Broadcasting Company, LLC			
Address	PO Box			
	Street 1	600 Harmon Loop Road		
	Street 2			
	City	Dededo		
	State ("NA" if non-U.S. address)	GU		
	Zip/Postal Code	96912		

	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	

that do not appear on this report?

Ownership Information				
FRN	0019776145	0019776145		
Name	Joseph G. Calvo	Joseph G. Calvo		
Address	PO Box			
	Street 1	138 Martyr Street		
	Street 2	Suite 200	Suite 200	
	City	Hagatna		
	State ("NA" if non-U.S. address)	GU		
	Zip/Postal Code	96910		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Native Hawaiian or Other Pac	ific Islander	
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 that do not appear on this	an attributable interest in one c report?	or more broadcast stations	No	

FRN	0019776178				
Name	John T. Calvo	John T. Calvo			
Address	PO Box				
	Street 1	138 Martyr Street			
	Street 2	Suite 200			
	City	Hagatna			
	State ("NA" if non-U.S. address)	GU			
	Zip/Postal Code	96910			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder	Other Interest Holder			
Positional Interests (check all that apply)	Officer				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	Native Hawaiian or Other Pac	ific Islander		
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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No		

FRN	0019776202		
Name	Leonard P. Calvo		
Address PO Box			
	Street 1	138 Martyr Street	
	Street 2	Suite 200	
	City	Hagatna	
	State ("NA" if non-U.S. address)	GU	
	Zip/Postal Code	96910	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer		
Positional Interests	address) Zip/Postal Code Country (if non-U.S. address) Other Interest Holder	96910	

Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US		
	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Native Hawaiian or Other Pacific Islander		
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 mo that do not appear on this report?		r more broadcast stations	No	

Ownership Information			
FRN	0019776186		
Name	Eduardo A. Calvo		
Address	РО Вох		
	Street 1	138 Martyr Street	
	Street 2	Suite 200	
	City	Hagatna	
	State ("NA" if non-U.S. address)	GU	
	Zip/Postal Code	96910	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Native Hawaiian or Other Paci	fic Islander
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 a that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	No

FRN 0019776251	(

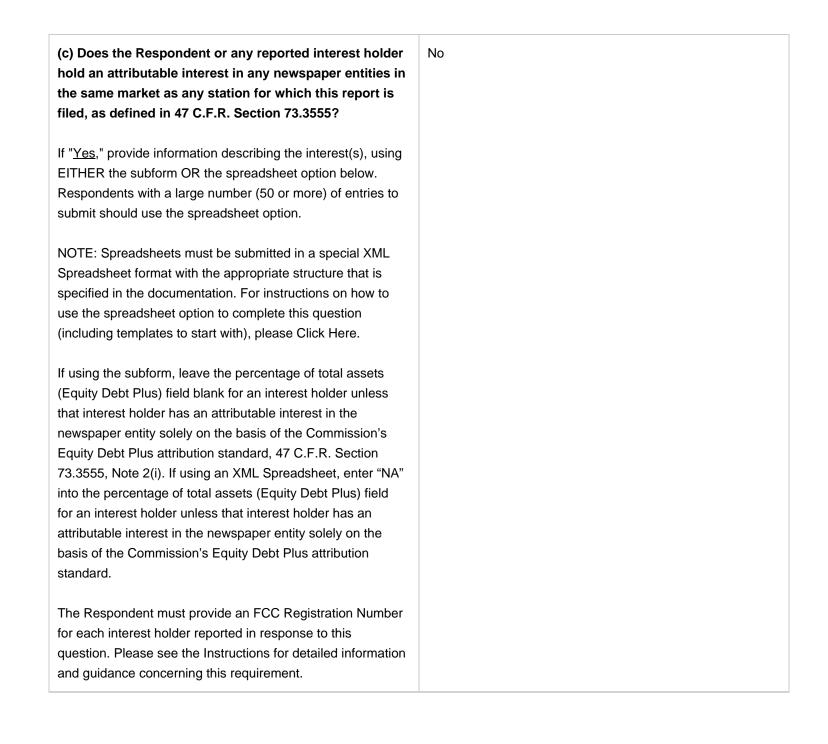
Name	Carmen T. Calvo		
Address	PO Box		
	Street 1	138 Martyr Street	
	Street 2	Suite 200	
	City	Hagatna	
	State ("NA" if non-U.S. address)	GU	
	Zip/Postal Code	96910	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Native Hawaiian or Other Pacific Islander	
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 that do not appear on this	an attributable interest in one o report?	or more broadcast stations	No

FRN	0022503411	
Entity Name	E.C. Development Group, LLC	
Address	PO Box	
	Street 1	259 Martyr Street
	Street 2	Suite 204
	City	Hagatna
	State ("NA" if non-U.S. address)	GU
	Zip/Postal Code	96910
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member	

Tribal Nation or Tribal Entity	Interest holder is not a Tribal n	ation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	80.0%	Jointly Held? No	
	Equity	80.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have ar that do not appear on this re	n attributable interest in one or port?	more broadcast stations	No	

FRN	0019776111		
Name	Paul M. Calvo	Paul M. Calvo	
Address	PO Box		
	Street 1	138 Martyr Street	
	Street 2	Suite 200	
	City	Hagatna	
	State ("NA" if non-U.S. address)	GU	
	Zip/Postal Code	96910	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	LC/LLC/PLLC Member		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Native Hawaiian or Other Pacific Islander	
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	20.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	



(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other Yes or related to each other as parentchild or as siblings?

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

# Family Relationships

FRN	0019776202	Name	Leonard P Calvo
FRN	0019776251	Name	Carmen T Calvo
Relationship	Siblings		

#### **Family Relationships**

FRN	0019776145	Name	Joseph G Calvo
FRN	0019776178	Name	John T Calvo
Relationship	Siblings		

#### **Family Relationships**

FRN	0019776178	Name	John T Calvo
FRN	0019776186	Name	Eduardo A Calvo
Relationship	Siblings		

Family Relationships			
FRN	0019776186	Name	Eduardo A Calvo
FRN	0019776202	Name	Leonard P Calvo
Relationship	Siblings		

(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.	

# 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: <b>CEO</b> Exact Legal Title or Name of Respondent: <b>Micronesia Broadcasting Company LLC</b> Name: <b>Marie Calvo-Monge</b> Phone: <b>6716375826</b> 01/28/2020