

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: 0000164274 | Submit Date: 2021-10-20 | FRN: 0025717851

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

10/25/2021 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0025717851	Radio Vida Kansas, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
636 Minesota Avenue	Kansas City	KS	66101	+1 (913) 563- 0148	andyrauseo@gmail. com

2. Contact Representative

Name	Organization
John C. Trent, Esq.	Putbrese Hunsaker & Trent, P.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
200 South Church Street	Woodstock	VA	22664	+1 (540) 459-7646	fccman3@shentel.net

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Not-for-profit corporation	

(b) Provide the following information about this report:		
Purpose	Transfer of control or assignment of license/permit	
"As of" date	10/01/2021	
	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) /Permittees(s)

and Station(s) /Permit(s)

Licensee/Permittee Name	FRN	
Radio Vida Kansas, Inc.	0025717851	

Fac. ID No.	Call Sign	City	State	Service
10345	KKLO	LEAVENWORTH	KS	AM
21063	K224FF	LENEXA	KS	FX

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee/Permittee Respondents 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/Permittee 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, 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) or Permittee(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) or Permittee(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	0025717851	
Entity Name	Radio Vida Kansas, Inc.	
Address	РО Вох	
	Street 1	636 Minesota Avenue
	Street 2	
	City	Kansas City
	State ("NA" if non-U.S. address)	KS
	Zip/Postal Code	66101
	Country (if non-U.S. address)	United States
Listing Type	Respondent	

Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations	Yes

Ownership Information				
FRN	9990143732	9990143732		
Name	Alberto Carrero	Alberto Carrero		
Address	РО Вох			
	Street 1	5620 Agnes Avenue		
	Street 2			
	City	Kansas City		
	State ("NA" if non-U.S. address)	МО		
	Zip/Postal Code	64130		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No	
from 0.0 to 100.0)	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?				

Ownership Information			
FRN	9990143733		
Name	Stacey Maldonado		
Address	PO Box		
	Street 1	21515 W 57Th Terr.	
	Street 2		
	City	Shawnee	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	66218	
	Country (if non-U.S. address)	United States	

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%	Jointly Held? No
	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	Yes

Ownership Information			
FRN	9990143734		
Name	Martha J. Magana		
Address	PO Box		
	Street 1	1300 N. 129th Street	
	Street 2	Apt. 103	
	City	Kansas City	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	66109	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one creport?	or more broadcast stations	Yes

Ownership Information		
FRN	9990143735	
Name	Ismael Harrigan	
Address	РО Вох	
	Street 1	1412 N. 133rd Terr.
	Street 2	
	City	Kansas City
	State ("NA" if non-U.S. address)	KS
	Zip/Postal Code	66109

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	Yes

FRN	9990143736	9990143736	
Name	Scarlet M. Vargas		
Address	PO Box		
	Street 1	9421 E. 13th Street	
	Street 2		
	City	Independence	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	64052	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%	Jointly Held?
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one or report?	r more broadcast stations	Yes
	nat any interests, including equi his filing are non-attributable.	ty, financial, or voting	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?

If "Yes," 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.

No

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

No

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

(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: President Exact Legal Title or Name of Respondent: Radio Vida Kansas, Inc. Name: Ismael Harringan Phone: 9135630148
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