

(REFERENCE COPY - Not for submission)

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

File Number: 0000173791 | Submit Date: 2021-11-30 | FRN: 0011241890

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/30/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0011241890	Economic Opportunity Board of Clark County	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
350 West Washington Street Suite #125	Las Vegas	NV	89106	+1 (702) 648- 0104	craig@kcepfm. com

2. Contact Representative

Name	Organization
Ernest T. Sanchez	The Sanchez Law Firm PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1629 K Street NW Suite 300	Washington	DC	20006	+1 (202) 237- 2814	ernestsanchez2348@gmail.

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	10/01/2021	
	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) and Station(s)

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

Licensee/Permittee Name	FRN	
Economic Opportunity Board of Clark County	0011241890	

Fac. ID No.	Call Sign	City	State	Service
50390	KCEP	LAS VEGAS	NV	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	Articles of Incorporation	
Parties to contract or instrument	EOB and State of Nevada	
Date of execution	10/1965	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate governance document	

Document Information		
Description of contract or instrument	Corporate Bylaws	
Parties to contract or instrument	EOB and State of Nevada	
Date of execution	10/1965	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate governance document	

Document Information		
Description of contract or instrument	Amendment to corporate bylaws	
Parties to contract or instrument	EOB and State of Nevada	
Date of execution	01/2021	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate governance document	

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				
FRN	0011241890	0011241890		
Entity Name	Economic Opportunity Board	of Clark County		
Address	РО Вох			
	Street 1	350 West Washington Street		
	Street 2	Suite #125		
	City	Las Vegas		
	State ("NA" if non-U.S. address)	NV		
	Zip/Postal Code	89106		
	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	Voting	Voting 0.0%		
(enter percentage values 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	or more broadcast stations No		

Ownership Information			
FRN	9990121732	9990121732	
Name	Lawrence Weekly	Lawrence Weekly	
Address	РО Вох		
	Street 1	350 W. Washington	
	Street 2	Suite 125	
	City	Las Vegas	

	State ("NA" if non-U.S. address)	NV	
	Zip/Postal Code	89106	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Chief Diversity Officer, CSN		
By Whom Appointed or Elected	Appointed by the Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	20.0%	
(enter percentage values 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 creport?	or more broadcast stations	No

FRN	9990121733	
Name	Fred Haron	
Address	PO Box	
	Street 1	350 W. Washington
	Street 2	Suite 125
	City	Las Vegas
	State ("NA" if non-U.S. address)	NV
	Zip/Postal Code	89106
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Chief Financial Officer at SNVRHA	
By Whom Appointed or Elected	Appointed by the Board	

Citizenship, Gender, Ethnicity, and Race	Citizenship	US	
Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%	
	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?		or more broadcast stations No	

Ownership Information			
FRN	9990121735		
Name	David Washington		
Address	PO Box		
	Street 1	350 W. Washington	
	Street 2	Suite 125	
	City	Las Vegas	
	State ("NA" if non-U.S. address)	NV	
	Zip/Postal Code	89106	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Fire Chief		
By Whom Appointed or Elected	Appointed by the Board		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Race Black or African American	
Interest Percentages	Voting	20.0%	
(enter percentage values 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 that do not appear on this report?		

Ownership Information			
FRN	9990139608		
Name	Ylonda Dickerson		
Address	PO Box		
	Street 1	350 W. Washington	
	Street 2	Suite 125	
	City	Las Vegas	
	State ("NA" if non-U.S. address)	NV	
	Zip/Postal Code	89106	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Program Manager, Clark County Gang Intervention		
By Whom Appointed or Elected	Elected via Town Hall-Public Election		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race Black or African American		
Interest Percentages	Voting	20.0%	
(enter percentage values 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	9990146203	
Name	Cameron H. Miller	
Address	ddress PO Box	
	Street 1	350 W. Washington
	Street 2	Suite 125
	City Las Vegas	
	State ("NA" if non-U.S. address)	NV
	Zip/Postal Code 89106	

	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	Nevada State Assemblyman			
By Whom Appointed or Elected	Appointed by the Board			
Citizenship, Gender,	Citizenship	us		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
Race Black or African A		Black or African American	ican	
Interest Percentages	Voting	20.0%	20.0%	
(enter percentage values 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	r more broadcast stations	No	
• •	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes	

(c) 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.

Licensee Economic Opportunity Board of Clark County does not have a parent entity.

Section III - Certification

Certification 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: Chair Exact Legal Title or Name of Respondent: Economic Opportunity Board of Clark County Name: Lawrence Weekly Phone: 7026480104