

(REFERENCE COPY - Not for submission)

FRN

0020302840

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000047548 Submit Date: 2018-03-02 FRN: 0020302840 Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 03/05/2018 Filing Status: Active

Section I - General Information

Sea-Mar Community Health Center

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
1040 South Henderson Street	Seattle	WA	98108	+1 (206) 763- 5277	MikeLeong@seamarchc org

2. Contact Representative

Name	Organization
Melodie A. Virtue, Esq.	Garvey Schubert Barer

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac St. NW Suite 200	Washington	DC	20007- 3501	+1 (202) 965- 7880	mvirtue@gsblaw. 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	1	95	\$70.00
			•	·	Total	\$70.00

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	Biennial	
"As of" date	10/01/2017	
	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
Sea-Mar Community Health Center	0020302840

Fac. ID No.	Call Sign	City	State	Service
33301	ККМО	ТАСОМА	WA	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.

Document Information				
Description of contract or instrument	Articles of Incorporation			
Parties to contract or instrument	State of Washington			
Date of execution	04/1977			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation			

Document Information

Description of contract or instrument	Bylaws as Amended
Parties to contract or instrument	Sea-Mar Community Health Center
Date of execution	09/2013
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Bylaws as Amended

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	0020302840		
Entity Name	Sea-Mar Community Health Center		
Address	PO Box		
	Street 1	1040 South Henderson Street	
	Street 2		
	City	Seattle	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98108	
	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	S 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

FRN	0020520425		
Name	James Caudle		
Address	PO Box		
	Street 1	1040 South Henderson Street	:
	Street 2		
	City	Seattle	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	10.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

FRN	0023217250	
Name	Augustin Delgado	
Address	PO Box	
	Street 1	1040 South Henderson Street
	Street 2	
	City	Seattle
	State ("NA" if non-U.S. address)	WA

Zip/Postal Code	98108		
Country (if non-U.S. address)	United States		
Other Interest Holder			
Officer, Director, Other - Vice Chair			
Citizenship	US		
Gender	Male		
Ethnicity	Hispanic or Latino		
Race	White		
Voting	10.0%	Jointly Held? No	
Equity	0.0%		
Total assets (Equity Debt Plus)			
	Country (if non-U.S. address) Other Interest Holder Officer, Director, Other - Vice Citizenship Gender Ethnicity Race Voting Equity Total assets (Equity Debt	Country (if non-U.S. address)United StatesOther Interest HolderOfficer, Director, Other - Vice UsOfficer, Director, Other - Vice UsUSGenderMaleEthnicityHispanic or LatinoRaceWhiteVoting10.0%Equity0.0%	

Ownership Information			
FRN	0020520490		
Name	Erasmo Gamboa		
Address	PO Box		
	Street 1	1040 South Henderson Street	
	Street 2		
	City	Seattle	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director, Other - Treasurer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	10.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have an	attributable interest in one or	more broadcast stations	Yes

that do not appear on this report?	that do not appear on this report?	
------------------------------------	------------------------------------	--

Ownership Information			
FRN	0020520573		
Name	Katherine Lowe		
Address	PO Box		
	Street 1	1040 South Henderson Street	
	Street 2		
	City	Seattle	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	American Indian or Alaska Nat	ive
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	10.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	Yes

FRN	0020520649	
Name	Greg Ma	
Address	PO Box	
	Street 1	1040 South Henderson Street
	Street 2	
	City	Seattle
	State ("NA" if non-U.S. address)	WA

	United States			
Officer, Director, Other - Chair	r			
	r			
		Officer, Director, Other - Chair		
Citizenship	US			
Gender	Male			
Ethnicity	Not Hispanic or Latino			
Race	Asian			
Voting	10.0%	Jointly Held? No		
Equity	0.0%	<u>.</u>		
Total assets (Equity Debt Plus)				
	Ethnicity Race Voting Equity Total assets (Equity Debt Plus)	EthnicityNot Hispanic or LatinoRaceAsianVoting10.0%Equity0.0%Total assets (Equity Debt Plus)		

FRN	0020520789		
Name	Felipe Trinidad-Martinez		
Address	PO Box		
	Street 1	1040 S. Henderson	St.
	Street 2		
	City	Seattle	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	MX	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	10.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have an	attributable interest in one or	more broadcast stations	Yes

FRN	0020520771	0020520771		
Name	Diana Savelle	Diana Savelle		
Address	PO Box			
	Street 1	1040 South Henderson Street	t	
	Street 2			
	City	Seattle		
	State ("NA" if non-U.S. address)	WA		
	Zip/Postal Code	98108		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director, Other - Secretary			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	10.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

• •••••			
Owners	nıp in	nformation	
• • • • • •			1

•		
FRN	0020520854	
Name	Silverio Vivanco Sanchez	
Address	PO Box	
	Street 1	1040 S. Henderson St.
	Street 2	
	City	Seattle
	State ("NA" if non-U.S. address)	WA

	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	MX	
	Gender	Male	
	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	10.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes

Ownership information			
FRN	0020520458		
Name	Michelle Danley		
Address	PO Box		
	Street 1	1040 South Henderson Stre	eet
	Street 2		
	City	Seattle	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	10.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have an	attributable interest in one or	more broadcast stations	Yes

that do not appear	on this report?
--------------------	-----------------

Ownership Information			
FRN	0020521134		
Name	Rogelio Riojas		
Address	PO Box		
	Street 1	1040 South Henderson Street	
	Street 2		
	City	Seattle	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - President and CEO		
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)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

FRN	0020521100	
Name	Mary Bartolo	
Address	PO Box	
	Street 1	1040 South Henderson Street
	Street 2	
	City	Seattle
	State ("NA" if non-U.S. address)	WA

	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Executive VP/Deputy Director		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not 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)		
Does interest holder have	an attributable interest in one o	r more broadcast stations	No

Ownership Information FRN 0020521118 Name Michael Leong, Esq. Address **PO Box** 1040 South Henderson Street Street 1 Street 2 City Seattle State ("NA" if non-U.S. WA address) Zip/Postal Code 98108 Country (if non-U.S. **United States** address) Listing Type Other Interest Holder Officer, Other - Senior VP of Corporate and Legal Affairs **Positional Interests** (check all that apply) Citizenship, Gender, US Citizenship Ethnicity, and Race Male Gender Information (Natural Persons Only) Ethnicity Not Hispanic or Latino Race Asian Interest Percentages Voting 0.0% **Jointly Held?** (enter percentage values No from 0.0 to 100.0) Equity 0.0%

	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

FRN	0027304088		
Name	Ricardo Runnels		
Address	PO Box		
	Street 1	1040 South Henderson Street	
	Street 2		
	City	Seattle	
	State ("NA" if non-U.S. address)	WA	
	Zip/Postal Code	98108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - CFO		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race 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	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	n attributable interest in one o	r more broadcast stations	No

(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.

(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.	

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

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 " <u>Yes</u> ," 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.

No parent entity.

Section III - Certification

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: Senior VP of Corporate and Legal Affairs Exact Legal Title or Name of Respondent: Sea- Mar Community Health Center Name: Michael Leong Phone: 2067635277 03/02/2018