

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

File Number: 0000087293Submit Date: 2019-10-24FRN: 0009664343Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 10/24/2019Filing Status: ActiveStatus: ActiveStatus Date: 10/24/2019

### **Section I - General Information**

Lane County School District No. 4J

#### 1. Respondent

Entity Name

Street Address	City (and Country if non L address)	J.S. State ("NA" if non-U.S. address)	Zip Code	Phone	Email
200 North Monroe Street	Eugene	OR	97402	+1 (541) 790- 7707	ward_cam@4j. lane.edu

#### 2. Contact Representative

Name	Organization
Jessica A. Rogers	Luvaas Cobb

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
777 High Street, Suite 300	Eugene	OR	97401	+1 (541) 484- 9292	jrogers@luvaascobb. com

#### 3. Application Filing Fee

Not Applicable

FRN

0009664343

# 4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	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	10/01/2017 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	
Lane County School District No. 4J			0009664343	
Fac. ID No.	Call Sign	City	State	Service
54009	KRVM	EUGENE	OR	AM
59340	KRVM-FM	EUGENE	OR	FM
59341	KSYD	REEDSPORT	OR	FM
132574	KAVE	OAKRIDGE	OR	FM

#### Section II – Biennial Ownership Information

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.

Not Applicable.

2. Ownership Interests

1.47 C.F.R.

**Documents** 

Section 73.3613

(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	0009664343			
Entity Name	Lane County School District No. 4J			
Address	PO Box			
	Street 1	200 North Monroe Street		
	Street 2			
	City	Eugene		
	State ("NA" if non-U.S. address)	OR		
	Zip/Postal Code	97402		
		·		

	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
<b>Positional Interests</b> (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages	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 an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information			
FRN	9990124548		
Name	Alicia Hays		
Address	РО Вох		
	Street 1	200 North Monroe Street	
	Street 2		
	City	Eugene	
	State ("NA" if non-U.S. address)	OR	
	Zip/Postal Code	97402	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired		
By Whom Appointed or Elected	Community Election		
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	14.3%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

### Ownership Information

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

No

Ownership Information			
FRN	9990124554		
Name	Ann Marie Levis		
Address	PO Box		
	Street 1	200 North Monroe Street	
	Street 2		
	City	Eugene	
	State ("NA" if non-U.S. address)	OR	
	Zip/Postal Code	97402	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Other - 2019-2020 Board ChairMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	President of a Marketing Firm		
By Whom Appointed or Elected	Community Election		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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	9990124558	9990124558	
Name	Judy Newman	ludy Newman	
Address	PO Box		
	Street 1	200 North Monroe Street	
	Street 2		
	City	Eugene	

	State ("NA" if non-U.S. address)	OR		
	Zip/Postal Code	97401		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Director of Early Childhood CARES of Lane County			
By Whom Appointed or Elected	Community Election			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	14.3%		
(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 hat do not appear on this report?			

FRN	9990124551		
Name	Jim Torrey		
Address	PO Box		
	Street 1	200 North Monroe Street	
	Street 2		
	City	City Eugene	
	State ("NA" if non-U.S. OR   address)		
	Zip/Postal Code	97402	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired		
By Whom Appointed or Elected	Appointed		

Citizenship, Gender, Ethnicity, and Race	Citizenship	US	
Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No			No

#### **Ownership Information**

that do not appear on this report?

FRN	9990136540	9990136540		
Name	Gordon Lafer			
Address	PO Box			
	Street 1	200 North Monroe Street		
	Street 2			
	City	Eugene		
	State ("NA" if non-U.S. address)	OR		
	Zip/Postal Code	97402		
	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	Economist and Professor			
By Whom Appointed or Elected	Community Election			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race White			
Interest Percentages	Voting	14.3%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

Ownership Information				
FRN	9990136541			
Name	Martina Shabram			
Address	PO Box			
	Street 1	200 North Monroe Street		
	Street 2			
	City	Eugene		
	State ("NA" if non-U.S. address)	OR		
	Zip/Postal Code	97402		
	Country (if non-U.S.United Statesaddress)			
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Unknown			
By Whom Appointed or Elected	Community Election			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race White			
Interest Percentages	Voting	14.3%		
(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	9990124786	
Name	Mary Walston	
Address	PO Box	
	Street 1	200 North Monroe Street
	Street 2	
	City	Eugene
	State ("NA" if non-U.S. address)	OR
	Zip/Postal Code	97402

		Country (if non-U.S. address)	United States		
	Listing Type	Other Interest Holder			
	<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
	Principal Profession or Occupation	Consultant, Legislative Liaison			
	By Whom Appointed or Elected	Community Election			
	Citizenship, Gender,	Citizenship	US		
	Ethnicity, and Race Information (Natural	Gender	Female		
	Persons Only)	Ethnicity	Not Hispanic or Latino		
		Race	White		
	Interest Percentages	Voting	14.3%		
	(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
		Total assets (Equity Debt Plus)	0.0%		
	Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	No	
	(b) Respondent certifies that interests, not reported in this If "No," submit as an exhibit an	-	y, financial, or voting	Yes	
	duties wholly unrelated to the	n attribution exemption for any le Licensee(s)? ion in the required fields and sub ponsibilities, and explaining why	omit an Exhibit fully describing	No	
3. Organizational Chart (Licensees Only)	entities that have attributable int textual Exhibit in lieu of a flowch <b>Non-Licensee Respondents s</b> No parent entity	cument showing the Licensee's verests in the Licensee. Licensee art or similar document. Licensee hould select "N/A" in response	s with a single parent entity may es without parent entities should e to this question.	provide a brief explanatory	
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>Board Chair</b> Exact Legal Title or Name of Respondent: <b>Lane</b> <b>County School District 4J</b> Name: <b>Ann Marie Levis</b> Phone: <b>5417906684</b> 10/24/2019