

FRN

0028180875

Not Applicable

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

**Entity Name** 

File Number: 0000143781Submit Date: 2021-04-21FRN: 0028180875Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 04/21/2021Filing Status: ActiveStatusStatusStatus

# **Section I - General Information**

#### 1. Respondent

WESTSIDE CHRISTIAN FELLOWSHIP A.V.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
42055 50th Street SUITE 7	LANCASTER	CA	93536	+1 (661) 713- 2669	SAIDLEMAN@GMAIL. COM

#### 2. Contact Representative

Name	Organization
JEFFREY DUKE SOUTHMAYD	SOUTHMAYD & MILLER

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4 OCEAN RIDGE BOULEVARD SOUTH	PALM COAST	FL	32137	+1 (386) 445-9156	jdsouthmayd@msn.com

### 3. Application Filing Fee

4.	<b>Control of</b>
Re	espondent

Relationship to stations/permits Licensee		
Is the Respondent's governing bo indirectly under the control of an	pard (or other governing entity) directly or other entity?	No

(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.	

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN
WESTSIDE CHRISTIAN FELLOWSHIP A.V.	0028180875

Fac. ID No.	Call Sign	City	State	Service
86741	KWTW	BISHOP	СА	FM
86917	KWTD	RIDGECREST	СА	FM
138841	K290AO	TONOPAH	NV	FX
146385	K227DD	LAKE ISABELLA	CA	FX

#### 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	CALIFORNIA DOMESTIC NONPROFIT CORPORATION	
Parties to contract or instrument	WESTSIDE CHRISTIAN FELLOWSHIP A.V.	
Date of execution	07/2011	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: CORPORATE	

#### 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	0028180875	
Entity Name WESTSIDE CHRISTIAN FELLOWSHIP A.V.		

Address	PO Box		
	Street 1	42055 50th Street	
	Street 2	SUITE 7	
	City	LANCASTER	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	93536	
	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?			No

Ownership Information			
FRN	9990135475		
Name	SHANE ALAN IDLEMAN		
Address	PO Box		
	Street 1	42055 50TH STREET, WEST	
	Street 2	SUITE 7	
	City	LANCASTER	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	93536	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	PASTOR		
By Whom Appointed or Elected	BOARD		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race 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	33.4%
	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?		r more broadcast stations No

#### **Ownership Information**

	28001 River Trail Lane   Valencia   CA   91354   United States   (or other governing entity)	
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IRED		
RETIRED		
BOARD		
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ıder	Male	
nicity	Not Hispanic or Latino	
e	White	
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ity	0.0%	
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FRN	9990135477		
Name	DAVID LEE THEIS		
Address	РО Вох		
	Street 1	9309 Northside Dr.	
	Street 2		
	City	LEONA VALLEY	
	State ("NA" if non-U.S. address)	СА	
	Zip/Postal Code	93551	
	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	Lockheed Martin		
By Whom Appointed or Elected	BOARD		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			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.			Yes

(c) 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.	

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 PROFIT LICENSEE WITHOUT VERTICAL OWNERSHIP OTHERWISE.

# **Section III - Certification**

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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>WESTSIDE CHRISTAIN FELLOWSHIP A.V.</b> Name: <b>Shane Idleman</b> Phone: <b>6612700353</b> 04/21/2021