

#### (REFERENCE COPY - Not for submission)

FRN

0025076092

# Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

**Entity Name** 

 File Number:
 0000095034
 Submit Date:
 2020-01-06
 FRN:
 0025076092

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 01/06/2020

 Filing Status:
 Active
 Status:
 Received
 Status Date:
 01/06/2020

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

### 1. Respondent

FERNANDO R. ZAZUETA PROFIT SHARING PLAN

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1164 W. HEDDING STREET	SAN JOSE	CA	95126	+1 (408) 293-8030	kieve@empirebroadcasting. com

### 2. Contact Representative

Name	Organization
JEROME S. SILBER	N/A

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
23 WILMONT AVE.	WHITE PLAINS	NY	10605	+1 (914) 924-8304	radiolaw21@verizon.net

### 3. Application Filing Fee

## Not Applicable

## 4. Nature of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees			
Nature of Respondent	Other Respondent is a profit sharing plan.			

(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.

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

Licensee/Permittee Name				FRN		
KRTY, Ltd			0027280478			
Fac. ID No.	Call Sign	City		State	Service	
35569	KRTY	LOS GATOS		СА	FM	

## 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 that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.				
	Not Applicable.				
<b>2. Ownership</b> <b>Interests</b> (a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interest generating a series of subforms. Answer each question on each subform. The first subform listing should be for the itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pure standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening or entities.) List each interest holder with a direct attributable interest in the Respondent separately.					
			nk for an interest holder unless that interest holder has an Commission's Equity Debt Plus attribution standard, 47 C.F.R.		
	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 f separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not hav an attributable interest in the Licensee(s) for which the report is being submitted.				
	Please see the Instructions for f	urther detail concerning interests	s that must be reported in response to this question.		
	The Respondent must provide a Please see the Instructions for c	-	each interest holder reported in response to this question. e concerning this requirement.		
	Ownership Information				
	FRN	0025076092			
	Entity Name	FERNANDO R. ZAZUETA PR	OFIT SHARING PLAN		
	Address	PO Box			
		Street 1	1164 W. HEDDING STREET		
		Street 2			
		City	SAN JOSE		
		State ("NA" if non-U.S. address)	CA		
		Zip/Postal Code	95126		

Country (if non-U.S.

address)

Respondent

Listing Type

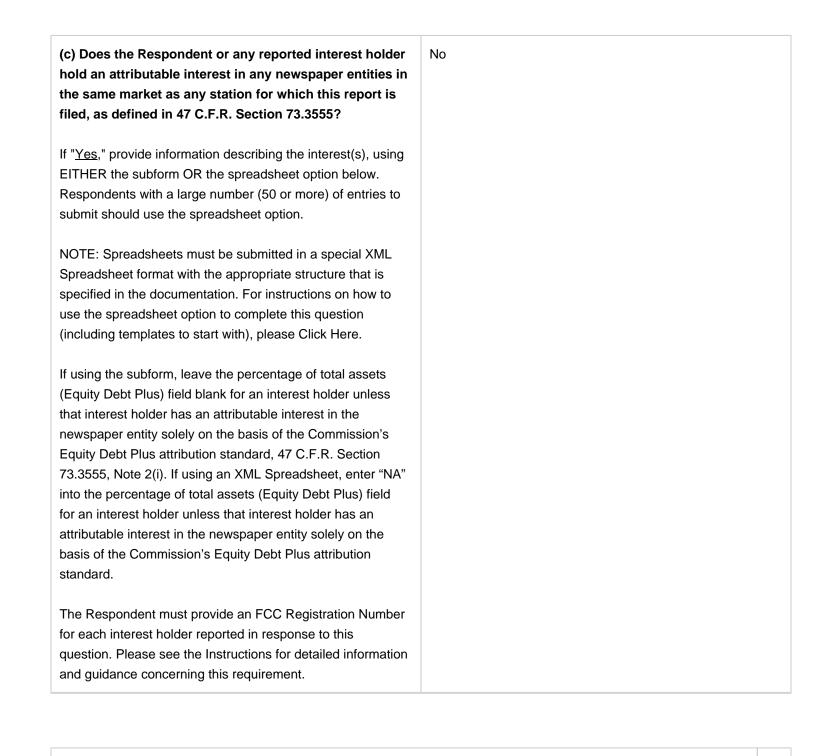
United States

<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 (enter percentage values	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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

# Ownership Information

FRN	0025036906			
Name	Fernando Zazueta			
Address	PO Box			
	Street 1	1164 W. HEDDING STREET		
	Street 2			
	City	SAN JOSE		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	95126		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - PLAN ADMINISTRATOR			
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	100.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	100.0%		
	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	
			1	
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.Yes				

If "No," submit as an exhibit an explanation.



(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 withNoduties wholly unrelated to the Licensee(s)?

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.

#### 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>PLAN ADMINISTRATOR</b> Exact Legal Title or Name of Respondent: <b>FERNANDO R. ZAZUETA PROFIT SHARING</b> <b>PLAN</b> Name: <b>FERNANDO ZAZUETA</b> Phone: <b>4082938030</b>
		01/05/2020