

FRN

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

File Number: 0000105958 Submit Date: 2020-02-12 FRN: 0005794177 Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: **Received** Status Date: 02/12/2020 Filing Status: Active

## **Section I - General Information**

### 1. Respondent

**Entity Name** 0017290172 Alpha Family Trust

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
10100 Santa Monica Boulevard Suite 2600	Los Angeles	CA	90067	+1 (310) 557- 5100	notices@saban. com

### 2. Contact Representative

Name	Organization
Matthew S. DelNero	Covington & Burling LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
One CityCenter 850 Tenth Street, NW	Washington	DC	20001	+1 (202) 662-5543	mdelnero@cov.com

## 3. Application **Filing Fee**

Not Applicable
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## 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 Trust	

(b) Provide the following information about this report:	
Purpose	Transfer of control or assignment of license/permit

"As of" date

#### 12/30/2019

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) /Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee Name	FRN
Univision Radio Stations Group, Inc.	0004945895

Fac. ID No.	Call Sign	City	State	Service
1025	KRCD	INGLEWOOD	CA	FM
3075	КВВТ	SCHERTZ	тх	FM
11196	WRTO	CHICAGO	IL	AM
11614	KRGT	INDIAN SPRINGS	NV	FM
19088	KRCV	WEST COVINA	СА	FM
19091	KOVE-FM	GALVESTON	тх	FM
19532	KVVF	SANTA CLARA	CA	FM
22977	KQMR	GLOBE	AZ	FM
24548	KSCA	GLENDALE	CA	FM
25053	WPPN	DES PLAINES	IL	FM
25469	КМҮО	COMFORT	тх	FM
26266	KOND	HANFORD	CA	FM
28893	KISF	LAS VEGAS	NV	FM
29021	KHOV-FM	WICKENBURG	AZ	FM
29022	WXNY-FM	NEW YORK	NY	FM
30573	WQBU-FM	GARDEN CITY	NY	FM
31716	KLLE	NORTH FORK	СА	FM
35086	KLVE	LOS ANGELES	СА	FM
35673	KTNQ	LOS ANGELES	СА	АМ
36694	KLSQ	WHITNEY	NV	АМ
37253	WRTO-FM	GOULDS	FL	FM
37254	WAQI	МІАМІ	FL	AM
39567	KRDA	CLOVIS	СА	FM
40136	KVVZ	SAN RAFAEL	СА	FM
41380	KLNO	FORT WORTH	тх	FM
48449	WVIV-FM	LEMONT	IL	FM

51164	KLQV	SAN DIEGO	CA	FM
51515	KLNV	SAN DIEGO	СА	FM
55475	KLJA	GEORGETOWN	ТХ	FM
55913	KOMR	SUN CITY	AZ	FM
59422	KHOT-FM	PARADISE VALLEY	AZ	FM
61658	WAMR-FM	ΜΙΑΜΙ	FL	FM
63201	KLQB	TAYLOR	ТХ	FM
65310	KLTN	HOUSTON	ТХ	FM
68839	KBRG	SAN JOSE	СА	FM
70684	WADO	NEW YORK	NY	AM
73912	WQBA	ΜΙΑΜΙ	FL	AM

Licensee/Permittee Name	FRN
Univision Radio San Francisco, Inc.	0004945929

Fac. ID No.	Call Sign	City	State	Service
7040	KFZO	DENTON	тх	FM
34298	KFLC	BENBROOK	тх	АМ
57376	KDXX	LEWISVILLE	тх	FM
70032	KSOL	SAN FRANCISCO	CA	FM
70033	KSQL	SANTA CRUZ	СА	FM

Licensee/Permittee Name	FRN
Tichenor License Corporation	0004945911

Fac. ID No.	Call Sign	City	State	Service
6662	KGBT-FM	MCALLEN	тх	FM
21599	KESS	BENBROOK	тх	FM
25583	KQBU-FM	PORT ARTHUR	тх	FM
57806	KAMA-FM	DEER PARK	тх	FM
67063	KLAT	HOUSTON	тх	AM
67064	кувн	SAN ANTONIO	тх	FM
67067	КСВТ	HARLINGEN	тх	AM
67069	KXTN	SAN ANTONIO	тх	AM
67071	KROM	SAN ANTONIO	тх	FM
67072	KBTQ	HARLINGEN	ТХ	FM
67073	OLOM	EVANSTON	IL	FM

# Section II – Non-Biennial Ownership Information

Licensee/Permittee Respondents should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) 1. 47 C.F.R. through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and Section 73.3613 attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If and Other the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. **Documents** Otherwise, select "Other." Non-Licensee/Permittee Respondents should select "Not Applicable" in response to this question. Not Applicable. (a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by 2. Ownership generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent Interests 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) or Permittee(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) or Permittee(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	0017290172			
Entity Name	Alpha Family Trust			
Address	PO Box			
	Street 1	10100 Santa Monica Boulevard		
	Street 2	Suite 2600		
	City	Los Angeles		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	90067		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
<b>Positional Interests</b> (check all that apply)	Respondent			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stationsYesthat do not appear on this report?			Yes	

FRN	0011518057		
Name	Haim Saban		
Address	PO Box		
	Street 1	10100 Santa Monica Bouleva	rd
	Street 2	Suite 2600	
	City	Los Angeles	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90067	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee		
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? Yes
from 0.0 to 100.0)	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?			Yes

FRN	0017293689		
Name	Cheryl Saban		
Address	PO Box		
	Street 1	10100 Santa Monica Boulevard	
	Street 2	Suite 2600	
	City	Los Angeles	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	90067	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee		
Interest Percentages (enter percentage values	Voting	100.0%	<b>Jointly Held?</b> Yes
from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have	an attributable interest in one o	r more broadcast stations	Yes

# Ownership Information

(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?	
If "Yes," 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: Careedahaata awat ha ay basittad in a saasial XMI	
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 Yes or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

#### **Family Relationships**

FRN	0011518057	Name	Haim Saban
FRN	0017293689	Name	Cheryl Saban
Relationship	Spouses		

(e) 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.

Yes

## 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>Trustee</b> Exact Legal Title or Name of Respondent: <b>Alpha Family Trust</b> Name: <b>Haim Saban</b> Phone: <b>3105755100</b> 02/12/2020