

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

 File Number:
 0000179973
 Submit Date:
 2022-01-14
 FRN:
 0020014940

 Purpose:
 Commercial Broadcast Stations Non-Biennial Ownership Report
 Status:
 Received
 Status Date:

 01/14/2022
 Filing Status:
 Active
 Status:
 Status:
 Status Date:

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

#### 1. Respondent

 FRN
 Entity Name

 0020014940
 HomeNet, Inc.

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
14443 Armstrong Blvd NW	Ramsey	MN	55303	+1 (763) 412- 4637	denniscarpenter@gmail. com

#### 2. Contact Representative

Name	Organization
Gregg P. Skall	Telecommunications Law Professionals PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1025 Connecticut Ave, NW Suite 1011	Washington	DC	20036	+1 (202) 789-3121	gskall@tlp.law

#### 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	For-profit corporation	

(b) Provide the following information about this report:

Purpose	Transfer of control or assignment of license/permit
"As of" date	12/23/2021
	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		
Milestone Radio II, LLC			000996	9494	
Fac. ID No.	Call Sign	City	Si	tate	Service
84475	KBGY	FARIBAULT	N	/N	FM
Licensee/Permittee Name	•		F	RN	
Lakes Broadcasting Comp	any, Inc.			0007704646	
Fac. ID No.	Call Sign	City		State	Service
36404	WLKX-FM	FOREST LAKE		MN	FM

### Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	through (c) for the facility or facil attributable Joint Sales Agreeme the agreement is an attributable	ities listed on this report. In addit ents (JSAs) must be disclosed by LMA, an attributable JSA, or a n	her instruments set forth in 47 C.F.R. Section 73.3613(a) tion, attributable Local Marketing Agreements (LMAs) and the licensee of the brokering station on its ownership report. If etwork affiliation agreement, check the appropriate box. a should select "Not Applicable" in response to this question.	
2. Ownership Interests	generating a series of subforms. itself. If the Respondent is not a non-insulated members, and any standards set forth in 47 C.F.R. or entities.) List each interest hol Leave the percentage of total as attributable interest in the Respo Section 73.3555, Note 2(i). In the case of vertical or indirect attributable interest in the Licens Entities that are part of an organ separate ownership reports. In s an attributable interest in the Licens Please see the Instructions for fu The Respondent must provide a Please see the Instructions for d	erests. This Question requires Respondents to enter detailed information about ownership interests by es of subforms. Answer each question on each subform. The first subform listing should be for the Respondent ondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, mbers, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the h in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies ach interest holder with a direct attributable interest in the Respondent separately. tage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an st in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Note 2(i). tical or indirect ownership structures, list only those interests in the Respondent that also represent an st in the Licensee(s) or Permittee(s) for which the report is being submitted. art of an organizational structure that includes holding companies or other forms of indirect ownership must file ip reports. In such a structure do not report, or file a separate report for, any interest holder that does not have erest in the Licensee(s) or Permittee(s) for which the report is being submitted. structions for further detail concerning interests that must be reported in response to this question. must provide an FCC Registration Number for each interest holder reported in response to this question. structions for detailed information and guidance concerning this requirement.		
	Ownership Information			
	FRN	0020014940		
	Entity Name	HomeNet, Inc.		
	Address	PO Box		
		Street 1	14443 Armstrong Blvd NW	
		Street 2		
		City	Ramsey	

	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	55303		
	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)	ot 0.0%		
Does interest holder have a that do not appear on this	an attributable interest in one c report?	or more broadcast stations	Yes	

Ownership Information			
FRN	0020015087		
Name	Renae Peters		
Address	PO Box		
	Street 1	13386 West Fargo Drive	
	Street 2		
	City	Surprise	
	State ("NA" if non-U.S. address)	AZ	
	Zip/Postal Code	85374	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director, Other - Personal Representative		
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	100.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			
(b) Respondent certifies that any interests, including equity, financial, or voting Yes interests, not reported in this filing are non-attributable.			

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 with No duties 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.

Certificatio	n

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>Executor</b> Exact Legal Title or Name of Respondent: <b>HomeNet, Inc.</b> Name: <b>Renae Peters</b> Phone: <b>4172303000</b> 01/14/2022