

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

File Number: 0000174225Submit Date: 2021-11-30FRN: 0005058680Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 11/30/2021Filing Status: ActiveStatusStatusStatus

Section I - General Information

1. Respondent

Entity Name Mt. San Antonio Comm. College Dist.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1100 N. Grand Avenue	Walnut	CA	91789	+1 (909) 274- 5125	mnichols8@mtsac. edu

2. Contact Representative

Name	Organization
Anne Goodwin Crump, Esq.	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 North 17th Street Eleventh Floor	Arlington	VA	22209	+1 (703) 812-0426	crump@fhhlaw.com

3. Application Filing Fee

Not Applicable

FRN

0005058680

4. Control of Respondent

(a) Provide the following information about the Respondent:		
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	10/01/2021
	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) and Station(s)

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

Licensee/Permittee Name		FR	N		
Mt. San Antonio Comm. College Dist. 0005058680				0	
Fac. ID No.	Call Sign	City	State		Service

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 Section 73.3613 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

(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	0005058680		
Entity Name	Mt. San Antonio Comm. College Dist.		
Address	PO Box		
	Street 1	1100 N. Grand Avenue	
	Street 2		
	City	Walnut	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	91789	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (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	9990134133		
Name	William T. Scroggins		
Address	PO Box		
	Street 1	1100 N. Grand Ave	
	Street 2		
	City	Walnut	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	91789	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	College President, CEO		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
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 a that do not appear on this r	n attributable interest in one o eport?	r more broadcast stations	No

Ownership Information		
FRN	9990134134	
Name	Manuel Baca	

Address	PO Box		
	Street 1	439 N. Platina Dr.	
	Street 2		
	City	Diamond Bar	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	91765	
	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	Retired Community College Professor		
By Whom Appointed or Elected	Trustee Area Residents		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	American Indian or Alaska Native	
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	9990134136	9990134136		
Name	Laura Santos	Laura Santos		
Address	PO Box			
	Street 1	13833 Fairgrove Ave.		
	Street 2			
	City	Bassett		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	91746		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			

that do not appear on this report?

Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Self Employed Public Relations		
By Whom Appointed or Elected	Trustee Area Residents		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Hispanic or Latino	
	Race	American Indian or Alaska Native	
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 that do not appear on this report?

No

Ownership Information

FRN	9990134137		
Name	Robert Hidalgo		
Address	PO Box		
	Street 1	2604 East Highcastle St.	
	Street 2		
	City	West Covina	
	State ("NA" if non-U.S. address)		
	Zip/Postal Code 91792		
	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	Assistant Principal at local High School		
By Whom Appointed or Elected	Trustee Area Residents		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender Male		
Persons Only)	Ethnicity	Hispanic or Latino	
	Race American Indian or Alask		
Interest Percentages (enter percentage values	Voting	Voting 14.3%	

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

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that do not appear on this report?	

Ownership Information	Ownership Information		
FRN	9990134139		
Name	Judy Chen-Haggerty		
Address	PO Box	PO Box	
	Street 1	18207 Dusk St.	
	Street 2		
	City	Rowland Heights	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	91748	
	Country (if non-U.S. United States 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	Teacher and Attorney		
By Whom Appointed or Elected	Trustee Area Residents		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Asian	
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 that do not appear on this	an attributable interest in one c	or more broadcast stations No	

Ownership Information		
FRN	9990134140	
Name	Jay Chen	
Address	PO Box	
	Street 1	16367 Colegio Drive

	Street 2		
	City	Hacienda Heights	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	91745	
	Country (if non-U.S. address)	United States	
Listing Type	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	Real Estate Professional		
By Whom Appointed or Elected	Trustee Area Residents		
Citizenship, Gender, Citizenship US		US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Asian	
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 that do not appear on this	Plus) an attributable interest in one o		

Ownership Information

FRN	9990141982	
Name	Gary Chow	
Address	PO Box	
	Street 1	300 Lemon Creek Drive
	Street 2 Suite B	
	City Walnut	
	State ("NA" if non-U.S.CAaddress)	
	Zip/Postal Code 91789	
	Country (if non-U.S. United States 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	CPA and Registered Investment Advisor		
By Whom Appointed or Elected	Trustee Area Residents		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Asian	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have	Does interest holder have an attributable interest in one or more broadcast stations No		

Ownership Information

that do not appear on this report?

Ownership Information			
FRN	9990147617		
Name	Peter Hidalgo		
Address	PO Box		
	Street 1	4623 Williams Avenue	
	Street 2		
	City	La Verne	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	Zip/Postal Code 91750	
	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	Director Government Affairs		
By Whom Appointed or Elected	Trustee Area Residents		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	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 o that do not appear on this report?	r more broadcast stations No
(b) Respondent certifies that any interests, including equi interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	ty, financial, or voting Yes
(a) la Baanandant acaking an attribution avamption for an	No.
(c) Is Respondent seeking an attribution exemption for an duties wholly unrelated to the Licensee(s)?	y officer or director with No

3. Organizational Chart (Licensees Only)

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-Licensee Respondents should select "N/A" in response to this question.

Licensee has no parent entity.

Section III - 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: President Exact Legal Title or Name of Respondent: Mount San Antonio Community College District Name: William T. Scroggins Phone: 9095945611 11/30/2021

Certification