

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0010 (June 2002)	FOR FCC USE ONLY
FCC 323		
OWNERSHIP REPORT FOR COMMERCIAL BROADCAST STATIONS		FOR COMMISSION USE ONLY FILE NO. - 20080310AAU
Read INSTRUCTIONS Before Filling Out Form		

Section I - General Information

1.	Legal Name of the Applicant THE RUTHERFORD GROUP, INC.	
	Mailing Address 306 SOUTH CHURCH STREET	
	City MURFREESBORO	State or Country (if foreign address) TN
		ZIP Code 37130 - 3732
	Telephone Number (include area code) 6158935373	E-Mail Address (if available) BART@WGNSRADIO.COM
	FCC Registration Number: 0003760030	Call Sign WGNS
		Facility ID Number 66335
2.	Contact Representative (if other than Licensee/Permittee) TIMOTHY K. BRADY, ESQ.	Firm or Company Name LAW OFFICES OF TIMOTHY K. BRADY
	Telephone Number (include area code) 4234777619	E-Mail Address (if available) TKBRADY@EARTHLINK.NET
3.	Name of entity, if other than licensee or permittee, for which report is filed N/A	
	Mailing Address	
	City	State or Country (if foreign address)
		ZIP Code -
	Telephone Number (include area code)	E-Mail Address (if available)
4.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Fee-exempt Report <input type="radio"/> Other <input checked="" type="radio"/> N/A (Fee Required)	

Section II - Ownership Information

5. a. Biennial b. Transfer of Control or Assignment of License/Permit c. Other
 d. Amendment to pending application

for the following stations:
 [Enter Station Information]

Station List

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
WGNS	66335	MURFREESBORO TN	AM

All of the information furnished in this Report is accurate as of 3/7/2008 (*Date must comply with 47 C.F.R. Section 73.3615(a), i.e., information must be current within 60 days of filing of this report, when 5(a) below is checked.*)

This Report is filed for (*check one*)

6. Respondent is:
 Sole proprietorship Not-for-profit corporation Limited partnership
 For-profit corporation General partnership Other
 If "Other", describe nature of the respondent in an Exhibit. [Exhibit 1]

7. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

Contracts/Instruments Information

List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject shall respond.)

Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration
ARTICLES OF INCORPORATION	INCORPORATOR	05/25/1984	NONE

Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration
BYLAWS	SHAREHOLDER	05/25/1984	NONE

8. Capitalization (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Capitalization Information]

Capitalization

Capitalization (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

Class of stock (preferred, common or other)	Voting or Non-voting	Number of Shares			
		Authorized	Issued and Outstanding	Treasury	Unissued
COMMON	V	1000	1000	0	0

9. (a.) List the respondent, and, if other than a natural person, its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the respondent, list separately its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach supplemental pages, if necessary.

[Enter Owner Information]

Owner Information

List the respondent, and, if other than a natural person, its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the respondent, list separately its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach supplemental pages, if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

1. Name and address of respondent and each party to the respondent holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the respondent first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.
2. Gender (male or female).
3. Ethnicity (check one).
4. Race (select one or more).
5. Citizenship.
6. Positional interest: Officer, director, general partner, limited partner, LLC member, investor/creditor

attributable under the Commission's **equity/debt plus** standard, etc.
 7. Percentage of votes.
 8. Percentage of total assets (equity debt plus).

1. Name and Address	BART WALKER; 2519 CABOT CT.; MURFREESBORO, TN 37129
2. Gender (male or female)	Male
3. Ethnicity (check one)	<input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino
4. Race (select one or more)	<input checked="" type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Other Pacific Islander <input type="radio"/> White
5. Citizenship	US
6. Positional Interest	PRESIDENT/SECRETARY/DIRECTOR
7. Percentage of votes	100.00
8. Percentage of total assets (equity debt plus)	100.00

(b) Respondent certifies that equity and financial interests not set forth in response to Question 9(a) are non-attributable.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 2]
(c) Is the respondent or any party holding an attributable interest in the respondent also the holder of an attributable interest in any other broadcast station or in any cable or newspaper entities in the same market or with overlapping signals in the same broadcast service, as described in 47 C.F.R. Sections 73.3555 and 76.501? If "Yes", submit an Exhibit identifying the holder of that other attributable interest, listing the call signs, locations and facilities identifiers of such other broadcast stations, and describing the nature and size of the ownership interest and the positions held in the other broadcast, cable or newspaper entities.	<input checked="" type="radio"/> Yes <input type="radio"/> No [Exhibit 3]
(d) Are any of the individuals listed in response to Question 9(a) related as parent-child, husband-wife, brothers and sisters? If "Yes", submit an Exhibit setting forth full information as to the family relationship	<input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 4]
(e) Is respondent seeking an attribution exemption for any officer or director with duties unrelated to the licensee or permittee? If "Yes", submit an Exhibit identifying that individual by name and title, fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	<input type="radio"/> Yes <input checked="" type="radio"/> No [Exhibit 5]

SECTION III - CERTIFICATION

I certify that I am PRESIDENT

(Official Title)

of THE RUTHERFORD GROUP, INC.

(Exact legal title or name of respondent)

and 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.

(Date of certification must be within 60 days of the date shown in Question 5, Section II and in no event prior to that date.)

Signature BART WALKER	Date 3/10/2008
Telephone Number of Respondent (Include area code) 6158935373	

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 LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 3

Description: OTHER INTERESTS

BART WALKER IS A 33 1/3 (THIRTY-THREE AND A THIRD) SHAREHOLDER OF CHANNEL ELEVEN, INC., LICENSEE OF LOW-POWER TELEVISION STATION WETV-LP IN MURFREESBORO, TN. BART WALKER IS THE INDIVIDUAL LICENSEE OF FM TRANSLATOR W263AI IN MURFREESBORO, TN.

Attachment 3
