



(REFERENCE COPY - Not for submission)

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

File Number: **0000064284** | Submit Date: **2018-12-19** | FRN: **0005850862**

Purpose: **Noncommercial Broadcast Stations Non-Biennial Ownership Report** | Status: **Received** | Status Date:

12/19/2018 | Filing Status: **Active**

Section I - General Information

1. Respondent

FRN		Entity Name			
0005850862		Side By Side, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
5105 Glendale Ave. Suite C	Toledo	OH	43614	+1 (419) 389-0893	jschmitz@wlmb.com

2. Contact Representative

Name		Organization			
Eve K. Reed, Esq.		Wiley Rein LLP			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1776 K Street, N.W.	Washington	DC	20006	+1 (202) 719-7404	ereed@wileyrein.com

3. Application Filing Fee

Not Applicable

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	Transfer of control or assignment of license/permit
"As of" date	11/20/2018 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
Side By Side, Inc.	0005850862

Fac. ID No.	Call Sign	City	State	Service
60276	WYSZ	MAUMEE	OH	FM
60277	WYSA	WAUSEON	OH	FM
82006	WYSM	LIMA	OH	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee/Permittee Respondents 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select “Other.” Non-Licensee/Permittee Respondents should select “Not Applicable” in response to this question.

Document Information	
Description of contract or instrument	Articles of Incorporation
Parties to contract or instrument	N/A
Date of execution	04/1981
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: See above

2. Ownership Interests

(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) 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	0005850862	
Entity Name	Side By Side, Inc.	
Address	PO Box	

	Street 1	5105 Glendale Ave.	
	Street 2	Suite C	
	City	Toledo	
	State ("NA" if non-U.S. address)	OH	
	Zip/Postal Code	43614	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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	0027275742		
Name	Steve Davis		
Address	PO Box		
	Street 1	6658 Spring Gardens Drive	
	Street 2		
	City	Mentor	
	State ("NA" if non-U.S. address)	OH	
	Zip/Postal Code	44060	
	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	Pastor		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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?		Yes	

Ownership Information

FRN	0027273937		
Name	David Draper		
Address	PO Box		
	Street 1	3218 St. Andrews	
	Street 2		
	City	Findlay	
	State ("NA" if non-U.S. address)	OH	
	Zip/Postal Code	45840	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired, Seminary President		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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?		Yes	

Ownership Information			
FRN	0027273960		
Name	Ed Griffis		
Address	PO Box		
	Street 1	3317 Athena Avenue	
	Street 2		
	City	Winter Park	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32792	
	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	Media Business Owner		

By Whom Appointed or Elected	Board of Directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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?			Yes

Ownership Information			
FRN	0023219884		
Name	Dennis J. Haarer		
Address	PO Box		
	Street 1	9844 Cypresswood Drive	
	Street 2	Apt. 105	
	City	Houston	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77070	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Pastor		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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?			Yes

Ownership Information			
FRN	0027261767		
Name	Jeffery L. Howe		
Address	PO Box		
	Street 1	5105 Glendale Ave.	
	Street 2	Suite C	
	City	Toledo	
	State ("NA" if non-U.S. address)	OH	

	Zip/Postal Code	43614	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Broadcast Station Manager and COO		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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	0023220296		
Name	Jamey Schmitz		
Address	PO Box		
	Street 1	825 Capital Commons Drive	
	Street 2		
	City	Toledo	
	State ("NA" if non-U.S. address)	OH	
	Zip/Postal Code	43615	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Broadcast Executive		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	
	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?		Yes	

Ownership Information	
FRN	0027273911

Name	Gary Tipping		
Address	PO Box		
	Street 1	222 East William Street	
	Street 2		
	City	Maumee	
	State ("NA" if non-U.S. address)	OH	
	Zip/Postal Code	43537	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Structural Engineer		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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?		Yes	

Ownership Information			
FRN	0028076362		
Name	Martha D. Wealleans		
Address	PO Box		
	Street 1	825 Capital Commons Drive	
	Street 2		
	City	Toledo	
	State ("NA" if non-U.S. address)	OH	
	Zip/Postal Code	43615	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	CEO - Retired		
By Whom Appointed or Elected	Board of Directors		

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%
	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?		Yes

Ownership Information		
FRN	0028076339	
Name	Rachel Schmitz	
Address	PO Box	
	Street 1	825 Capital Commons Drive
	Street 2	
	City	Toledo
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	43614
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Home School Teacher	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%
	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?		Yes

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)? 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.	No
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Certification	Section	Question	Response
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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 LICENSE --OR 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 and CEO Exact Legal Title or Name of Respondent: Side by Side, Inc. Name: Jamey Schmitz Phone: 4193890893 12/19/2018