

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000097740Submit Date: 2020-01-16FRN: 0010993723Purpose: Commercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 01/16/2020Filing Status: Active

Section I - General Information

1. Respondent

FRN Entity Name 0010993723 WCSR Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 273 170 N WEST ST	HILLSDALE	MI	49242	+1 (517) 437- 4444	WCSRINC@GMAIL. COM

2. Contact Representative

Name	Organization
Julianne Yoder	WCSR, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
170 N West St PO Box 273	Hillsdale	МІ	49242	+1 (517) 437-4444	wcsrinc@gmail.com

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	Biennial
"As of" date	10/01/2019
	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) and Station(s)

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

Licensee/Permittee Name		FRN			
WCSR Inc.			00109	93723	
Fac. ID No.	Call Sign	City		State	Service
71298	WCSR-FM	HILLSDALE		МІ	FM
71299	WCSR	HILLSDALE		MI	АМ

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 report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Not Applicable.

2. Ownership Interests

1.47 C.F.R.

and Other

Documents

Section 73.3613

(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, 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) 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.

FRN	0010993723			
Entity Name	WCSR Inc.			
Address	PO Box	273		
	Street 1	170 N WEST ST		
	Street 2			
	City	HILLSDALE		
	State ("NA" if non-U.S. address)	MI		
	Zip/Postal Code	49242		
	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 (enter percentage values	Voting	0.0%	Jointly Held? No
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?			

Ownership Information				
FRN	9990119650			
Name	Michael P. Flynn			
Address	PO Box			
	Street 1	120 ORCHARD RIDGE		
	Street 2			
	City	HILLSDALE		
	State ("NA" if non-U.S. address)	MI		
	Zip/Postal Code	49242		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	4.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	4.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Name	Patrick R. Flynn			
Address	PO Box			
	Street 1	1289 W. MOORE ROAD		
	Street 2			
	City	HILLSDALE		
	State ("NA" if non-U.S. address)	МІ		
	Zip/Postal Code	49242		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	4.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	4.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

FRN	9990119652		
Name	James K. Flynn		
Address	PO Box		
	Street 1	2995 STEAMBURG ROAD	
	Street 2		
	City	HILLSDALE	
	State ("NA" if non-U.S. address)	MI	
	Zip/Postal Code	49242	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
Citizenship, Gender,	Citizenship	US	

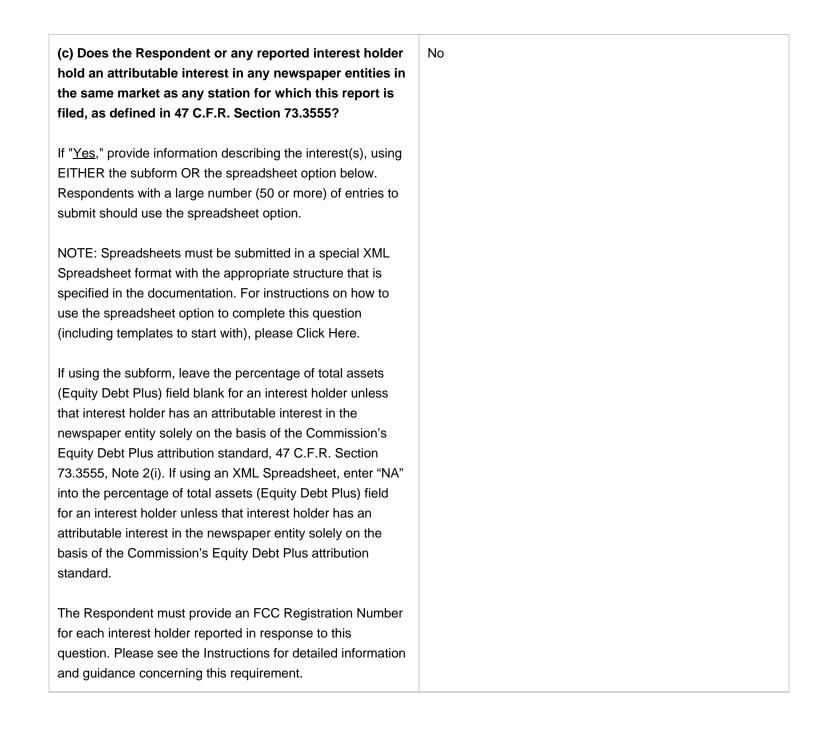
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	4.0%	Jointly Held? No	
	Equity	4.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No		

Ownership Information				
FRN	9990119653	9990119653		
Name	Anthony Flynn, II.			
Address	PO Box			
	Street 1	145 LEMBEE LANE		
	Street 2			
	City	MONTPELIER		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	43543		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Stockholder	Stockholder		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	4.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	4.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

FRN	9990119649
Name	Anthony Flynn

Address	PO Box			
	Street 1	1255 PASADENA AVE SO #	1809	
	Street 2			
	City	ST. PETERSBURG		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33707		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	84.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	84.0%		
	Total assets (Equity Debt Plus)			
	an attributable interest in one o report?	r more broadcast stations	No	
that do not appear on this	report?			
b) Respondent certifies th	at any interests, including equi	ty, financial, or voting	Yes	

(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 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	9990119649	Name	Anthony Flynn	
FRN	9990119650	Name	Michael P Flynn	
Relationship	Parent/Child			

Family Relationships

FRN	9990119649	Name	Anthony Flynn
FRN	9990119651	Name	Patrick R Flynn
Relationship	Parent/Child		

Family Relationships

FRN	9990119649	Name	Anthony Flynn
FRN	9990119652	Name	James K Flynn
Relationship	Parent/Child		

Family Relationships				
FRN	9990119649	Name	Anthony Flynn	
FRN	9990119653	Name	Anthony Flynn , II .	
Relationship	Parent/Child			

Family Relationships

FRN	9990119650	Name	Michael P Flynn
FRN	9990119651	Name	Patrick R Flynn
Relationship	Siblings		

Family Relationships

FRN	9990119650	Name	Michael P Flynn
FRN	9990119652	Name	James K Flynn
Relationship	Siblings		

Family Relationships

FRN	9990119650	Name	Michael P Flynn
FRN	9990119653	Name	Anthony Flynn , II .
Relationship	Siblings		

Family Relationships

FRN	9990119651	Name	Patrick R Flynn
FRN	9990119652	Name	James K Flynn
Relationship	Siblings		

Family Relationships

FRN	9990119651	Name	Patrick R Flynn
FRN	9990119653	Name	Anthony Flynn , II .
Relationship	Siblings		

Family Relationships

FRN	9990119652	Name	James K Flynn
FRN	9990119653	Name	Anthony Flynn , II .
Relationship	Siblings		

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

No

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.

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: GENERAL MANAGER Exact Legal Title or Name of Respondent: WCSR INC Name: MICHAEL FLYNNE Phone: 5174374444 01/16/2020