

(REFERENCE COPY - Not for submission)

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

File Number: 0000165447 | Submit Date: 2021-11-01 | FRN: 0008559643

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/01/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0008559643	WYRS Broadcasting	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 730 113 Lighthouse Dr.	Manahawkin	NJ	08050	+1 (609) 978- 1678	info@wyrs. org

2. Contact Representative

Name	Organization
Robert E. Wick	WYRS Broadcasting

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 730	Manahawkin	NJ	08050	+1 (609) 978-1678	info@wyrs.org

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	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)

Licensee/Permittee Name	FRN
WYRS Broadcasting	0008559643

Fac. ID No.	Call Sign	City	State	Service
52173	WYRS	MANAHAWKIN	NJ	FM
81237	W272CU	STAFFORD TOWNSHIP	NJ	FX
151750	W225BV	POMONA	NJ	FX
151844	W273CL	EGG HARBOR CITY	NJ	FX
151871	W273AO	WHITING	NJ	FX
152707	W245CC	TRENTON	NJ	FX
174908	WLNJ	LAKEHURST	NJ	FM

Section II – Biennial Ownership Information

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

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. 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.

Document Information			
Description of contract or instrument	Articles of Incorporation		
Parties to contract or instrument	State of New Jersey		
Date of execution	02/2003		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation		

Document Information		
Description of contract or instrument	Bylaws	
Parties to contract or instrument	WYRS Broadcasting	
Date of execution	02/2003	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Bylaws	

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) 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	0008559643			
Entity Name	WYRS Broadcasting	WYRS Broadcasting		
Address	PO Box	PO Box 730		
	Street 1	113 Lighthouse Dr.		
	Street 2			
	City	Manahawkin		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	08050		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	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?				

Ownership Information				
FRN	9990127384			
Name	William Shinn Wick			
Address	PO Box			
	Street 1	763 S. Main St.		
	Street 2			
	City	Northfield		
	State ("NA" if non-U.S. address)	VT		
	Zip/Postal Code	05663		

	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	Clergy		
By Whom Appointed or Elected	The Governing Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages			
(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	an attributable interest in one o	r more broadcast stations No	

Ownership Information		
FRN	0003403748	
Name	Robert E. Wick	
Address	PO Box	
	Street 1	113 Lighthouse Dr.
	Street 2	
	City	Manahawkin
	State ("NA" if non-U.S. address)	NJ
	Zip/Postal Code	08050
	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	Broadcaster	
By Whom Appointed or Elected	The Governing Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	us
	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino

	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.4%	
	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?		Yes	

Ownership Information			
FRN	0008598567		
Name	Nancy F. Wick		
Address	РО Вох		
	Street 1	113 Lighthouse Dr.	
	Street 2		
	City	Manahawkin	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08050	
	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	Operations Manager		
By Whom Appointed or Elected	The Governing Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages	Voting	33.3%	
(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 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.	

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
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	

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.

attributed an interest.

WYRS Broadcasting, a New Jersey 501c:3 Corporation is the licensee of all facilities listed in this Ownership Report

Section III - Certification

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: WYRS Broadcasting Name: Robert E. Wick Phone: 6099781678 11/01/2021