

FRN

0003225299

Not Applicable

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

File Number: 0000172146Submit Date: 2021-11-29FRN: 0003225299Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 11/29/2021Filing Status: ActiveStatus Date: 11/29/2021

# **Section I - General Information**

Back Porch Radio Broadcasting, Inc.

#### 1. Respondent

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
118 South Bedford Street	Madison	WI	53703	+1 (608) 256- 2001	infotech@wortfm. org

#### 2. Contact Representative

Name	Organization
Melodie A. Virtue	Foster Garvey PC

Street	City (and Country if non U.S.		Zip		
Address	address)	State	Code	Phone	Email
1000 Potomac St. NW Suite 200	Washington	DC	20007	+1 (202) 965- 7880	melodie.virtue@foster. com

# 3. Application Filing Fee

4.	Control of
Re	espondent

(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			

	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.

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

Licensee/Permittee Name				FRN	
Back Porch Radio Broadcasting, Inc.				0003225299	
Fac. ID No.	Call Sign	City	State	Service	
3596	WORT	MADISON	WI	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 WISCONSIN		
Date of execution	12/1973		
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	AMENDED BY-LAWS	
Parties to contract or instrument	BACK PORCH RADIO BROADCASTING, INC.	
Date of execution	06/2019	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: BY-LAWS	

#### 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	0003225299			
Entity Name	Back Porch Radio Broadcasti	Back Porch Radio Broadcasting, Inc.		
Address	PO Box			
	Street 1	118 South Bedford Street		
	Street 2			
	City	Madison		
	State ("NA" if non-U.S. address)	WI		
	Zip/Postal Code	53703		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
<b>Positional Interests</b> (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	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%		
Plus)     Does interest holder have an attributable interest in one or more broadcast stations   No     that do not appear on this report?   No				

FRN	9990127189		
Name	David Devereaux-Weber		
Address	PO Box		
	Street 1	118 S. Bedford St.	
	Street 2		
	City	Madison	
	State ("NA" if non-U.S. address)	WI	
	Zip/Postal Code	53703	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Other - President Member of Governing Board (or other governing entity)		
Principal Profession or	Retired		

Occupation			
By Whom Appointed or Elected	Member		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.1%	
(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			

Ownership Information				
FRN	9990127191			
Name	Martin Kehrein			
Address	PO Box			
	Street 1	118 S. Bedford St.		
	Street 2			
	City	Madison		
	State ("NA" if non-U.S. address)	WI		
	Zip/Postal Code	53703		
	Country (if non-U.S. United States   address) Image: Country of the states			
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retired	Retired		
By Whom Appointed or Elected	Member	Member		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race White			
Interest Percentages	Voting 9.1%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt0.0%Plus)			

Ownership Information				
FRN	9990127195			
Name	Douglas Holtz			
Address	PO Box			
	Street 1	118 S. Bedford St.		
	Street 2			
	City	Madison		
	State ("NA" if non-U.S. address)	WI		
	Zip/Postal Code	53703		
	Country (if non-U.S. United States   address) United States			
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Business and Events Development Director			
By Whom Appointed or Elected	Staff			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	9.1%		
(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?				

9990127198	
Stuart Levitan	
РО Вох	
Street 1	118 S. Bedford St.
Street 2	
City	Madison
State ("NA" if non-U.S. address)	WI
	Stuart Levitan PO Box Street 1 Street 2 City State ("NA" if non-U.S.

	Zip/Postal Code	53703		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - Vice Presiden	Officer, Other - Vice President Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired	Retired		
By Whom Appointed or Elected	Member			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	9.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

Ownership Information				
FRN	9990138399	9990138399		
Name	Marla Rybowiak	Marla Rybowiak		
Address	PO Box			
	Street 1	118 S. Bedford St.		
	Street 2			
	City	Madison		
	State ("NA" if non-U.S. address)	WI		
	Zip/Postal Code	53703		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Other - Secretary Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Human Resources			
By Whom Appointed or Elected	Member			
Citizenship, Gender,	Citizenship	Citizenship US		
Ethnicity, and Race	Gender Female			

Information (Natural Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations		more broadcast stations	No

Ownership Information				
FRN	9990138400			
Name	Alida LaCosse			
Address	PO Box			
	Street 1	118 S. Bedford St.		
	Street 2			
	City	Madison		
	State ("NA" if non-U.S. address)	WI		
	Zip/Postal Code	53703		
	Country (if non-U.S. United States   address) United States			
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Instructor			
By Whom Appointed or Elected	Member			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages	Voting	9.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	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?				

FRN	9990147248

Name	Dean Loumos				
Address	PO Box	PO Box			
	Street 1	118 South Bedford St			
	Street 2				
	City Madison				
	State ("NA" if non-U.S. address)	WI			
	Zip/Postal Code	Zip/Postal Code 53703			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)				
Principal Profession or Occupation	Retired				
By Whom Appointed or Elected	Board Elected				
Citizenship, Gender,	Citizenship	Citizenship US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Ethnicity Not Hispanic or Latino			
	Race	White			
Interest Percentages (enter percentage values	Voting	Voting 9.1%			
from 0.0 to 100.0)	Equity	0.0%			
	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		

Ownership Information				
FRN	9990147249			
Name	Kai Brito	Kai Brito		
Address	PO Box			
	Street 1	118 South Bedford St		
	Street 2 Madison   City Madison   State ("NA" if non-U.S. address) WI			
	Zip/Postal Code	53703		
	Country (if non-U.S.United Statesaddress)			
Listing Type	Other Interest Holder			

<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Housing Advocate	Housing Advocate		
By Whom Appointed or Elected	Board Elected	Board Elected		
Citizenship, Gender,	Citizenship US			
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male		
	Ethnicity	Hispanic or Latino		
	Race	Asian		
Interest Percentages	Voting	9.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have	an attributable interest in one o	r more broadcast stations	No	

(enter percentage values

#### **Ownership Information** 9990147250 FRN Rebecca Barber Name Address **PO Box** Street 1 118 South Bedford St Street 2 City Madison State ("NA" if non-U.S. WI address) **Zip/Postal Code** 53703 Country (if non-U.S. **United States** address) Listing Type Other Interest Holder Member of Governing Board (or other governing entity) **Positional Interests** (check all that apply) Principal Profession or **Re-Entry Housing Coordinator** Occupation By Whom Appointed or **Board Elected** Elected Citizenship US Citizenship, Gender, Ethnicity, and Race Gender Female Information (Natural Persons Only) Ethnicity Not Hispanic or Latino White Race Interest Percentages Voting 9.1%

from 0.0 to 100.0)	Equity	0.0%	
	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	9990147251	9990147251		
Name	Megan Flowers			
Address	PO Box			
	Street 1	118 South Bedford St		
	Street 2			
	City	Madison		
	State ("NA" if non-U.S. address)	WI		
	Zip/Postal Code	53703		
	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	Non-Profit Public Health Communications			
By Whom Appointed or Elected	Board Elected			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%		
	Equity	0.0%		
	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?				

9990147253	
Rosie Rey	
PO Box	
Street 1	118 South Bedford St
Street 2	
	Rosie Rey PO Box Street 1

	City	Madison		
	State ("NA" if non-U.S. address)	WI		
	Zip/Postal Code	53703		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - TreasurerMember of Governing Board (or other governing entity)			
Principal Profession or Occupation	Entrepreneur and Educator			
By Whom Appointed or Elected	Board Elected			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	9.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	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?			No	
that do not appear on this		(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.		

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.

# 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 does not have a parent entity.

### **Section III - Certification**

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: <b>President, WORT Board of</b> <b>Directors</b> Exact Legal Title or Name of Respondent: <b>Back Porch Radio Broadcasting, Inc.</b> Name: <b>David Devereaux-Weber</b> Phone: <b>6085762599</b> 11/28/2021