

(REFERENCE COPY - Not for submission)

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

File Number: 0000045218 | Submit Date: 2018-02-28 | FRN: 0005952742

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/28/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0005952742	Cook County Community Radio

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 1005	Grand Marais	MN	55604	+1 (218) 387- 1070	radiodiva@wtip.

2. Contact Representative

Name	Organization
John Crigler, Esq.	Garvey Schubert Barer

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac St. NW 2nd Floor	Washington	DC	20007	+1 (202) 965-7880	JCrigler@gsblaw.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	Biennial
"As of" date	10/01/2017
	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):

Lice	ensee/Permittee Name	FRN	
Co	ook County Community Radio	0005952742	

Fac. ID No.	Call Sign	City	State	Service
55568	WTIP	GRAND MARAIS	MN	FM
174256	WGPO	GRAND PORTAGE	MN	FM
176648	WKEK	GUNFLINT LAKE	MN	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 Minnesota	
Date of execution	04/1993	
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 and Restated Bylaws	
Parties to contract or instrument	Cook County Community Radio Corporation	
Date of execution	04/2006	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Amended and Restated Bylaws	

Document Information		
Description of contract or instrument	Amendment to Bylaws	
Parties to contract or instrument	Cook County Community Radio Corporation	
Date of execution	10/2007	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Amendment to Bylaws	

Document Information		
Description of contract or instrument	Amendment to Bylaws	
Parties to contract or instrument	Cook County Community Radio Corporation	

Date of execution	05/2011
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Amendment to 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	0005952742		
Entity Name	Cook County Community Rac	Cook County Community Radio	
Address	PO Box	1005	
	Street 1		
	Street 2		
	City	Grand Marais	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55604	
	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	
that do not appear on this report?	

No

Ownership Information				
FRN	0027250026			
Name	Matthew J. Nesheim			
Address	PO Box	784		
	Street 1			
	Street 2			
	City	Grand Marais		
	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	55604		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Program Manager			
By Whom Appointed or Elected	Member	Member		
Citizenship, Gender,	Citizenship	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	12.5%		
(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 that do not appear on this report?				

Ownership Information			
FRN	9990127331	9990127331	
Name	Hyla S. Napadensky	Hyla S. Napadensky	
Address	РО Вох		
	Street 1	3284 W. Highway 61	
	Street 2		
	City	Grand Marais	

	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	55604-7537		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - TreasurerMer	nber 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	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	12.5%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations No		

Ownership Information			
FRN	0027251198		
Name	Michael Reeves		
Address	РО Вох		
	Street 1	9 Maple Leaf Trail	
	Street 2		
	City Lutsen		
	State ("NA" if non-U.S. MN address) Zip/Postal Code 55612		
	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	Retired		
By Whom Appointed or Elected	Board		

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%
	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	0027255975		
Name	Ann Possis		
Address	РО Вох		
	Street 1	4038 Cascade Beach Rd.	
	Street 2		
	City	Lutsen	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55612	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - SecretaryMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Freelance Editor, Part time Radio Producer		
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	White	
Interest Percentages	Voting	12.5%	
(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 r	n attributable interest in one of eport?	r more broadcast stations	No

Ownership Information			
FRN	0027248822		
Name	Deborah Benedict, Bene.		
Address	PO Box	64	
	Street 1		
	Street 2		
	City	Grand Marais	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55604	
	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	Public Radio Manager		
By Whom Appointed or Elected	Member	Member	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	12.5%	
(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 that do not appear on this report?			

Ownership Information		
FRN	0027250133	
Name	Molly Hicken	
Address	РО Вох	
	Street 1	304 Caribou Tr
	Street 2	
	City Lutsen	
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55612

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney		
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	White	
Interest Percentages	Voting	12.5%	
(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	0027268606	
Name	Dave Tersteeg	
Address	PO Box	
	Street 1	3000 County Road
	Street 2	#7
	City	Grand Marais
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55604
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - PresidentMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Director of Parks and Recreation, City of Grand Marais	
By Whom Appointed or Elected	Member	
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US
	Gender	Male
Persons Only)		

Interest Percentages (enter percentage values from 0.0 to 100.0)	Ethnicity	Not Hispanic or Latino	
	Race	White	
	Voting	12.5%	
	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?		r more broadcast stations No	

Ownership Information			
FRN	0027266436	0027266436	
Name	Richard A. Anderson		
Address	PO Box		
	Street 1	6880 E. Highway 61	
	Street 2		
	City	Grand Portage	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55605	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Vice President Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Innkeeper, Massage Therapist		
By Whom Appointed or Elected	Member		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	us	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	American Indian or Alaska Native	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	12.5%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No	

(b) Respondent certifies that any interests, including equity, financ	ial, 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	
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

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: Cook County Community Radio Corporation Name: Dave Tersteeg Phone: 2183871070 02/28/2018