

FRN

0004168829

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000044594Submit Date: 2018-02-27FRN: 0004168829Purpose: Commercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 02/27/2018Filing Status: ActiveStatus: ActiveStatus Date: 02/27/2018

Section I - General Information

MORTENSON BROADCASTING CO

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
FINANCIAL CENTER - KEY BANK SQUARE 960 WEST STATE STREET, SUITE 141	Alliance	ОН	44601	+1 (330) 829-3944	mbc_accounting@hotmail. com

2. Contact Representative

Name	Organization
Jerrold Miller, Esq.	Miller and Neely, PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
3750 University Blvd. W. Suite 203	Kensington	MD	20895	+1 (301) 933-6304	mandnlaw@gmail.com

3. Application Filing Fee Not Applicable

4. Nature of

elationship 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

 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):

Licensee/Permittee	Name		FRN		
MORTENSON BROADCASTING CO			0004168829	0004168829	
Fac. ID No.	Call Sign	City	State	Service	
61277	WYSN	HUNTINGTON	WV	АМ	
Licensee/Permittee	Name		FRI	N	
Mortenson Broadca	sting Company of West Vir	ginia LLC	000	01784198	
Fac. ID No.	Call Sign	City	State	Service	
43860	WEMM-FM	HUNTINGTON	WV	FM	

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other 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. 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.
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, 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.
	Ownership Information

FRN	0004168829				
Entity Name	MORTENSON BROADCASTING CO				
Address	PO Box				
	Street 1	FINANCIAL CENTER - KEY E	BANK SQUARE		
	Street 2	960 WEST STATE STREET, SUITE 141			
	City	Alliance			
	State ("NA" if non-U.S. address)	ОН			
	Zip/Postal Code	44601			
	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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No		

Ownership Information				
FRN	0019320787			
Entity Name	Jack M. Mortenson Revocal	Jack M. Mortenson Revocable Living Trust		
Address	PO Box			
	Street 1	FINANCIAL CENTER - KEY BANK SQUARE		
	Street 2	960 WEST STATE STREET, SUITE 141		
	City	Alliance		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	44601		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	Equity	100.0%	
	Total assets (Equity Debt Plus)	100.0%	
Does interest holder have ar that do not appear on this re	n attributable interest in one or port?	more broadcast stations	Yes

Ownership Information

FRN	0019320902				
Name	Jack Mortenson				
Address	PO Box				
	Street 1	FINANCIAL CENTER - KEY	FINANCIAL CENTER - KEY BANK SQUARE		
	Street 2	960 WEST STATE STREET,	960 WEST STATE STREET, SUITE 141		
	City	Alliance			
	State ("NA" if non-U.S. address)	ОН			
	Zip/Postal Code	44601			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Officer, Director, Other - trustee of 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	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 a that do not appear on this r	an attributable interest in one o	r more broadcast stations	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 No or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

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

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.

Certif	ication

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: Mortenson Broadcasting Company Name: Jack Mortenson Phone: 3308293944 02/27/2018