

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

File Number: 0000046539Submit Date: 2018-03-01FRN: 0017570847Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 03/01/2018Filing Status: ActiveStatusStatus

### **Section I - General Information**

#### 1. Respondent

 FRN
 Entity Name

 0017570847
 J.M.J. Radio, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1880 Highway 315	Pittston	PA	18640	+1 (570) 650- 9130	ed. niewinski@gmail. com

#### 2. Contact Representative

Name	Organization
Stuart W. Nolan, Jr.	LegalWorks Apostolate, PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4 Family Life Lane	Front Royal	VA	22630	+1 (540) 622- 8070	Nolan@LegalWorks. 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 boa indirectly under the control of ano	ard (or other governing entity) directly or ther 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.	

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

Licensee/Permittee Name				FRN		
J.M.J. Radio, Inc.		00175	70847			
Fac. ID No.	Call Sign	City		State	Service	
177311	WCOZ	NEW ALBANY		PA	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	Commonwealth of Pennsylvania	
Date of execution	12/2007	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: governing document	

Document Information		
Description of contract or instrument	Bylaws	
Parties to contract or instrument	JMJ Radio, Inc.	
Date of execution	12/2007	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: governing document	

#### 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	0017570847			
Entity Name	J.M.J. Radio, Inc.	J.M.J. Radio, Inc.		
Address	PO Box			
	Street 1	1880 Highway 315		
	Street 2			
	City	Pittston		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	18640		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
<b>Positional Interests</b> (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 that do not appear on this	have an attributable interest in one or more broadcast stations Yes n this report?			

Ownership Information	
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FRN	9990132815		
Name	Edward Niewinski		
Address	PO Box		
	Street 1	27 SUSQUEHANNA AVE	
	Street 2		
	City	Forty Fort	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	18704	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Other - PresidentMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retiree		

By Whom Appointed or Elected	Members of the Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	51.0%	
(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 Yes			

Ownership Information				
FRN	9990132820			
Name	Carol A. Niewinski			
Address	PO Box			
	Street 1	27 SUSQUEHANNA AVE		
	Street 2			
	City	Forty Fort		
	State ("NA" if non-U.S. address)	ΡΑ		
	Zip/Postal Code	18704		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retiree			
By Whom Appointed or Elected	Members of the Boarde			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	49.0%		
	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		

that do not appear on this report?

(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.Yes(c) Is Respondent seeking an attribution exemption for any officer or director withNo	Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?	No
(c) Is Respondent seeking an attribution exemption for any officer or director with No		Yes
duties wholly unrelated to the Licensee(s)?	If "No," submit as an exhibit an explanation.	

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.

Respondent is a nonprofit corporation and is the station licensee. Respondent has direct ownership of the station, and there are no parent business entities with ownership stakes or voting interests in respondent.

#### **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: <b>President</b> Exact Legal Title or Name of Respondent: <b>J.M.</b> <b>J. Radio, Inc.</b> Name: <b>Ed Niewinski</b> Phone: <b>5702874670</b> 03/01/2018