

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000047485 | Submit Date: 2018-03-02 | FRN: 0023939689

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 03/08/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0023939689	St. Joseph Catholic Radio Group LLC	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
54195 IRONWOOD ROAD	South Bend	IN	46635	+1 (260) 436-9598	cindy. black@redeemerradio. 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.

3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	No

Fees

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAR	1	95	\$70.00
				Total	\$70.00

4. Nature of Respondent

(a) Provide the following information about the Respondent: Relationship to stations/permits Licensee Nature of Respondent Limited liability company

(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):

Licensee/Permittee Name	FRN
St. Joseph Catholic Radio Group LLC	0023939689

Fac. ID No.	Call Sign	City	State	Service
49174	WRDI	NAPPANEE	IN	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.

Document Information		
Description of contract or instrument	Articles of Organization	
Parties to contract or instrument	State of Indiana	
Date of execution	09/2013	
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, 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	0023939689	0023939689		
Entity Name	St. Joseph Catholic Radio Gr	St. Joseph Catholic Radio Group LLC		
Address	РО Вох			
	Street 1	54195 IRONWOOD ROAD		
	Street 2			
	City	South Bend		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	46635		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent	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 an attributable interest in one or more broadcast stations that do not appear on this report?				

Ownership Information				
FRN	0014348551			
Entity Name	Fort Wayne Catholic Radio Group, Inc.			
Address	PO Box			

	Street 1	dba Redeemer Radio	
	Street 2	4618 E. STATE BLVD. , Suite	200
	City	Fort Wayne	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46815	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Owner		
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?
from 0.0 to 100.0)	Equity	100.0%	
	Total assets (Equity Debt Plus)	100.0%	
	Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?		Yes

Ownership Information		
FRN	9990132954	
Name	Michael Ripley	
Address	PO Box	
	Street 1	7306 Dry Creek Ct
	Street 2	
	City	Fort Wayne
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46835
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Director	
Citizenship, Gender, Citizenship US		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)	Voting	14.3%	Jointly Held? No
	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	9990132956		
Name	Matt Marshall	Matt Marshall	
Address	PO Box		
	Street 1	9829 Cinderella Ln	
	Street 2		
	City	Fort Wayne	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46835	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
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	14.3%	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 re	n attributable interest in one o eport?	r more broadcast stations	Yes

Ownership Information		
FRN	9990132957	
Name	Parry Leavell	
Address	PO Box	
	Street 1	1205 Phaeton Way
	Street 2	

	City	Auburn	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46706	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
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	14.3%	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	r more broadcast stations	Yes

Ownership Information			
FRN	9990132964		
Name	Joey Colone		
Address	РО Вох		
	Street 1	4823 Schwartz Rd	
	Street 2		
	City	New Haven	
	State ("NA" if non-U.S. IN address)		
	Zip/Postal Code	46774	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Director	Officer, Director	
Citizenship, Gender,			
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)	Voting	14.3%	Jointly Held? No
	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	Yes

Ownership Information			
FRN	9990132966		
Name	Christian Davey	Christian Davey	
Address	PO Box		
	Street 1	17160 Wheatridge Ct	
	Street 2		
	City	Granger	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46530	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	14.3%	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 re	n attributable interest in one o eport?	r more broadcast stations	Yes

Ownership Information		
FRN	9990132959	
Name	Jeremy Reidy	
Address	PO Box	
	Street 1	5710 Hartford Dr
	Street 2	

	City	Fort Wayne	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46835	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	14.3%	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	r more broadcast stations	Yes

Ownership Information			
FRN	9990132962	9990132962	
Name	Sr Madeleine Schumacker		
Address	РО Вох	766	
	Street 1		
	Street 2		
	City	Mishawaka	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46546	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Director	Director	
Citizenship, Gender, Citizenship US		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	14.3%	Jointly Held? No
	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

FRN	9990133483		
Name	Cynthia Black		
Address	РО Вох		
	Street 1	4618 E. STATE BLVD. , Suite 200	
	Street 2		
	City	Fort Wayne	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46815	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Executive Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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

interests, not reported in this filing are non-attributable.

If "No," submit as an exhibit an explanation.

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?

If "Yes," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.

NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.

If using the subform, 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 newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.

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.

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?

No

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

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

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.

Respondent is a LLC and he station licensee. All of the equity in Respondent is held by a single parent nonprofit corporation, which exercises no voting interests. Each director of the parent corporation exercises an equal voting interest in Respondent.

Section III - Certification

Certification Section Question Response

No

No

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: Executive Director Exact Legal Title or Name of Respondent: St. Joseph Catholic Radio Group, LLC Name: Cynthia Black Phone: 2604369598
		03/02/2018