

(REFERENCE COPY - Not for submission)

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

File Number: **0000089604** Submit Date: **2019-11-14** FRN: **0006160113**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/14/2019

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0006160113	WESTERN INDIAN MINISTRIES INC	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 9090	Window Rock	AZ	86515	+1 (505) 371- 5749	manager@westernindian.

2. Contact Representative

Name		Organization	
	John S. Neely	Miller and Neely PC	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
3750 University Blvd., West Suite 203	Kensington	MD	20895	+1 (301) 933-6304	johnsneely@yahoo.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 boaindirectly 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	10/01/2019	
	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
WESTERN INDIAN MINISTRIES INC	0006160113

Fac. ID No.	Call Sign	City	State	Service
71794	KTBA	TUBA CITY	AZ	AM
71795	KWIM	WINDOW ROCK	AZ	FM
71796	KHAC	TSE BONITO	NM	AM

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 and Bylaws		
Parties to contract or instrument	company		
Date of execution	12/1997		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: organizational documents		

Document Information			
Description of contract or instrument	Amendment to Articles of Incorporation		
Parties to contract or instrument	company		
Date of execution	02/1981		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: organizational 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	0006160113	0006160113		
Entity Name	WESTERN INDIAN MINISTR	IES INC		
Address	PO Box	9090		
	Street 1			
	Street 2			
	City	Window Rock		
	State ("NA" if non-U.S. address)	AZ		
	Zip/Postal Code	86515		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent	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%		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No	

Ownership Information			
FRN	0004057485		
Name	Timothy C. Cutforth	Timothy C. Cutforth	
Address	РО Вох		
	Street 1	965 S. Irving	
	Street 2		
	City	Denver	
	State ("NA" if non-U.S. address)	СО	
	Zip/Postal Code	80219	
	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	consulting broadcast engineer		
By Whom Appointed or Elected	board of directors		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.6%	
(enter percentage values from 0.0 to 100.0)	Equity 0.0%		
	Total assets (Equity Debt 0.0% Plus)		
	Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?		

FRN	9990030760	9990030760	
Name	Jeffrey Rush	Jeffrey Rush	
Address	РО Вох		
	Street 1	874 Link Road	
	Street 2		
	City	Morris	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	16938	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	executive director - Three Sp	executive director - Three Springs Ministry	
By Whom Appointed or Elected	board of directors		
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	16.6%	

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 the	ve an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990030802		
Name	Nelson Betony		
Address	PO Box		
	Street 1	RR Box 2203	
	Street 2		
	City	Window Rock	
	State ("NA" if non-U.S. address)	AZ	
	Zip/Postal Code	86515	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Pastor		
By Whom Appointed or Elected	board of directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.6%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990030844	
Name	Dan Fredericks	
Address	PO Box	
	Street 1	RR Box 6489

	Street 2		
	City	Window Rock	
	State ("NA" if non-U.S. address)	AZ	
	Zip/Postal Code	85312	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing	Board (or other governing entity)	
Principal Profession or Occupation	Exec. Director - United Indian Ministry		
By Whom Appointed or Elected	board of directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.6%	
(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 o	r more broadcast stations No	

Ownership Information			
FRN	9990103344		
Name	Fred White		
Address	РО Вох		
	Street 1	RR Box 2434	
	Street 2		
	City Window Rock		
	State ("NA" if non-U.S. AZ address)		
	Zip/Postal Code	86515	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	Member-Owner of Building Nations, LLC	
By Whom Appointed or Elected	board of directors	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural Gender Male		Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%
	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 No

Ownership Information			
FRN	9990134163	9990134163	
Name	Adrian Pete		
Address	PO Box		
	Street 1	RR Box 31	
	Street 2		
	City	Rehoboth	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code	87325	
	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	education	education	
By Whom Appointed or Elected	board of directors	board of directors	
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural Gender Male		Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.6%	
(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 o report?	r more broadcast stations	No	
• •	nat any interests, including equinat any interests, including equination. an explanation.	ty, financial, or voting	Yes	

(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 has no 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: Western Indian Ministries, Inc. Name: Nelson Betony Phone: 5053715749 11/14/2019