Federal Communications Commission

FCC MB - CDBS Electronic Filing Account number: 977479

Description: WNTA ET AL. POST CONSUMMATION 323 (MID-WEST PARENT)
Application Reference Number: 20140626AAF
Successfully filed at Jun 26 2014 7:47AM

Based on the information supplied, no fee is required.

ederal Communications Commission ashington, D.C. 20554	Approved by OMB 3060-0010 (March 2013)	FOR FCC USE ONLY	
FCC 323		FOR COMMISSION USE ONLY	

OWNERSHIP REPORT FOR COMMERCIAL BROADCAST STATIONS

	- General Information Legal Name of the Respondent				
	MID-WEST MANAGEMENT, INC.				
- 41	Street Address (1) P.O. BOX 44408				
	Street Address (2)				
	City MADISON	State or Country (if foreign address) WI	ZIP Code 53744 - 4408		
	Telephone Number (include area code) 6082731000	E-Mail Address (if available)			
	FCC Registration Number: 0002714095	Call Sign WNTA	Facility ID Number 671		
	Contact Representative DAVID D. OXENFORD	Firm or Company Name WILKINSON BARKER KNAUER, LLP			
- 11	Street Address (1) 2300 N STREET, NW				
	Street Address (2) SUITE 700				
13	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20037 -		
	Telephone Number (include area code) 2027834141	E-Mail Address (if available) DOXENFORD@WBKLAW.COM			
	Nature of Respondent (See Instructions for defin Licensee Permittee Entity with an attributable interest	itions)			
	If this application has been submitted without a for Governmental Entity C Fee-exempt Report	ee, indicate reason for fee exemption (see 47 C.F.R. See, Other POST CONSUMMATION N/A (Fee R.	Section 1.1114):		
	All of the information furnished in this Report is (Date entered must (1) be Oct. 1 of the filing yea		1, 2009 in the case of the initial		
	Purpose: This Report is filed for: (choose one)	ATTEMPT OF THE STATE OF THE STA			
	a. C Biennial				
ĺ	b. C Validation and Resubmission of a previously filed Biennial Report (certifying no change from previous Report)				
	c. F Transfer of Control or Assignment of Licer				
	d. C Report by Permittee filing within 30 days a television broadcast station.	after the grant of a construction permit for a new com	mercial AM, FM or full power		
	e. C Update / certification of accuracy of an init	tial Ownership Report filed by Permittee (filing in co	njunction with Permittee's		
li		South Str. 1 Hospital Park Company			

	THE RESERVE THE PARTY NAMED IN COLUMN TWO IS NOT THE OWNER.		100	File Number: -			
	endment, submit as an Ext Report that are being revise	d.					[Exhibit 1]
	and Station Information. Th					entity:	
Licensee		Li	censee's FCC I	Registration Nu	mber (FRN)	N.	
MID-W	AY RADIO, INC.	0	022643456				
		This Ren	Station	List	ations:		
Сору	Call Sign	Facility ID Number		on (City/State)		C	lass of service
1.	WNTA	671	ROCKFO	ORD , ILLINOI	S		AM Station
2.	WXRX	672	BELVID	ERE , ILLINO	S		FM Station
3.	WRTB	59620	WINNEB	AGO , ILLINO	ois	24	FM Station
4.	WGFB	73975	ROCKT	ON , ILLINOI:	3		FM Station
Respond	ent is:			nalv ere			
Permits shall reagreem box; of	ct Information. List all cont tees, or Respondents with a espond. Other Respondents nent (LMA) or a radio joint therwise, select "Other" for t Applicable	majority interest i should select "Not sales agreement (J	truments required in or that others. Applicable" in (SA), or if the a	red to be filed by wise exercise de response to this greement is a n	y 47 C.F.R. Sect <u>facto</u> control ov s question.) If the etwork affiliation	ion 73.3 er the s	ubject Licensee or Pe ment is a local marke
Permits shall reagreem box; of	ct Information, List all cont tees, or Respondents with a espond. Other Respondents nent (LMA) or a radio joint therwise, select "Other" for	racts and other ins majority interest i should select "Not sales agreement (J	truments required in or that others. Applicable in (SA), or if the a SA or network	red to be filed by wise exercise de response to this greement is a n	y 47 C.F.R. Sect <u>facto</u> control ov s question.) If the etwork affiliation	ion 73.3 er the s	ubject Licensee or Pe ment is a local marke
Permits shall reagreem box; of	ct Information, List all cont tees, or Respondents with a espond. Other Respondents nent (LMA) or a radio joint therwise, select "Other" for t Applicable	racts and other ins majority interest is should select "Not sales agreement (J non-LMA/radio J or Name o organ with who	truments required in or that others. Applicable in (SA), or if the a SA or network	red to be filed b wise exercise de response to thi greement is a n affiliation agree	y 47 C.F.R. Sect <u>facto</u> control ov s question.) If the etwork affiliation	ion 73.3 ver the s ne agreen n agreen	ubject Licensee or Pe ment is a local marke
Permittishall reagreem box; of North	ct Information. List all cont tees, or Respondents with a espond. Other Respondents nent (LMA) or a radio joint therwise, select "Other" for t Applicable	racts and other ins majority interest is should select "Not sales agreement (J non-LMA/radio J or Name o organ with whom	truments requirements requirements requirements applicable" in SA), or if the a SA or network Contract I f person or inization micontract is	red to be filed be wise exercise de response to the greement is a neaffiliation agreement in affiliation agreement in a filiation agreement in a f	y 47 C.F.R. Sect <u>facto</u> control ov s question.) If the etwork affiliation ements.	tion 73.3	ubject Licensee or Poment is a local market nent, check the appro-

s	subject L	ation (Only Licensees icensee shall respond pplicable	, Permittees, or e	entities with a ma	njority interest in or t	hat otherwise exer	cises <u>de facto</u> control over	
	Capitalization Information							
	Сору	Class of stock	Voting or Non-		Number o	of shares		
		(preferred, common or other)	voting	Authorized	Issued and Outstanding	Treasury	Unissued	
		Preferred Common Other (specify)	Voting Non- Voting	30000	8153	0	21847	
List each person or entity with a direct attributable interest in the Respondent separately. Entities that are part of an org structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In do not report or file separate reports for persons or entities that do not have an attributable interest in the Licensee or Powhich the report is being submitted. Ownership Interests Information								
	Conv			-				
	Copy	Name	MID-WES	T MANAGEME	ENT. INC.		The second secon	
	1.	Address	Street 730 RAYO City/State	N , WISCONSIN Code				
	1.		Street 730 RAYO City/State MADISON Postal/ZIP 53711 - Country (i)	OVAC DR. I, WISCONSIN Code f not U.S.)				
	1.	Address	Street 730 RAYO City/State MADISON Postal/ZIP 53711 - Country (ii Respor Other I C License	OVAC DR. N, WISCONSIN Code f not U.S.) Indent Interest Holder	Officer/Director of Li	censee/Permittee)		

	layer and the second se	Attributable Creditor Attributable Investor	
		Other (please specify):	
		(J. 100.000 Sports)	
	FCC Registration Number	0002714095	
	Percentage of votes	0.0 %	
	Percentage of total assets (equity debt plus)	0.0 %	
Сору	Name	RICHARD TRAUTSCHOLD	
2.	Address	Street 3331 NORTH STONE CREEK CIRCLE	
Copy 2.		City/State MADISON, WISCONSIN Postal/ZIP Code 53719 - Country (if not U.S.)	
	Listing Type	Respondent C Other Interest Holder	
	Relationship to Licensee/Permittee	C Entity with attributable interest Entity with attributable interest	1
	Positional Interest (Check all that apply)	Officer Director General Partner Limited Partner	
		☐ LC/LLC/PLLC Member ☐ Owner ☐ Stockholder ☐ Attributable Creditor ☐ Attributable Investor ☐ Other (please specify):	
	FCC Registration Number	0019422997	
	Percentage of votes	4.0 %	
	Percentage of total assets (equity debt plus)	4.0 %	
	Name	RICHARD RECORD	
3.	Address	Street 3615 EBNER COULEE ROAD	
	×	City/State LACROSSE, WISCONSIN Postal/ZIP Code 54601 - Country (if not U.S.)	
	Listing Type	Respondent	

		Other Interest Holder	
	Relationship to	C Licensee/Permittee (or Officer/Director of Licensee/Permittee)	
	Licensee/Permittee	C Person with attributable interest	
		C Entity with attributable interest	
	Positional Interest		
	(Check all that apply)	Officer	
	(☑ Director	
	ŀ	General Partner	
		Limited Partner	
		LC/LLC/PLLC Member	
		Owner	
		Stockholder	1
		Attributable Creditor	
		Attributable Investor	
		Other (please specify):	
		other (picase specify).	
	FCC Registration	0010422840	
	Number	0019422849	
	Percentage of votes	6.0 %	
	Percentage of total assets	6.0 %	
	(equity debt plus)		-
Comm	Name	PAT O'NEILL	
Copy 4.			
	Address	Street 3309 PRAIRIE GLADE RD	
		3309 PRAIRIE GLADE RD	
		City/State	
		MIDDLETON, WISCONSIN	
	. V.	Postal/ZIP Code	1
		53562 -	
		Country (if not U.S.)	
	Listing Type	Respondent	
		Other Interest Holder	
	Relationship to	Licensee/Permittee (or Officer/Director of Licensee/Permittee)	
	Licensee/Permittee	Person with attributable interest	
		Entity with attributable interest	
	D. C. LT.	Entity with attroduction interest	
	Positional Interest (Check all that apply)	Officer	
	(Check all that apply)	Director	
		General Partner	
		11	
		Limited Partner	
	ži.	LC/LLC/PLLC Member	
		Owner	
		Stockholder	
		Attributable Creditor	
1000		Attributable Investor	
		Other (please specify):	
	FCC Registration		
	Number	0019422781	
	Percentage of votes	6.0 %	
<u> </u>	Ji creentage of votes	[O·0 / J	

	Percentage of total assets (equity debt plus)	6.0 %	
Сору	Name	THOMAS WALKER	
5.	Address	Street 7709 WELTON DR City/State MADISON, WISCONSIN Postal/ZIP Code 53719 - Country (if not U.S.)	77
	Listing Type	Respondent Other Interest Holder	
	Relationship to Licensee/Permittee	C Licensee/Permittee (or Officer/Director of Licensee/Permittee) C Person with attributable interest C Entity with attributable interest	
	Positional Interest (Check all that apply)	✓ Officer ✓ Director ✓ General Partner ✓ Limited Partner ✓ LC/LLC/PLLC Member ✓ Owner ✓ Stockholder ✓ Attributable Creditor ✓ Attributable Investor ✓ Other (please specify):	
	FCC Registration Number	0019423078	
	Percentage of votes	21.0 %	
	Percentage of total assets (equity debt plus)	21.0 %	
Сору	Name	JASON MCCUTCHIN	
6.	Address	Street 1707 E BLOCKADE COURT City/State REPUBLIC, MISSOURI Postal/ZIP Code 65728 - Country (if not U.S.)	
	Listing Type	Respondent C Other Interest Holder	
	Relationship to Licensee/Permittee	Licensee/Permittee (or Officer/Director of Licensee/Permittee) Person with attributable interest Entity with attributable interest	
	Positional Interest (Check all that apply)	Officer Director	

		ECC P	General Partner Limited Partner LC/LLC/PLLC Member Owner Stockholder Attributable Creditor Attributable Investor Other (please specify):	
		FCC Registration Number	0019422609	
		Percentage of votes	2.0 %	
		Percentage of total assets (equity debt plus)	2.0 %	
***************************************	Сору	Name	DAVID DOETSCH	
the second secon	7.	Address	Street 510 DUNE RIDGE NORTH City/State ST. JOSEPH, MICHIGAN Postal/ZIP Code 49085 - Country (if not U.S.)	
		Listing Type	C Respondent	
	g g	Relationship to Licensee/Permittee	Other Interest Holder Licensee/Permittee (or Officer/Director of Licensee/Permittee) Person with attributable interest Entity with attributable interest	
		Positional Interest (Check all that apply)	Officer Director General Partner Limited Partner LC/LLC/PLLC Member Owner Stockholder Attributable Creditor Attributable Investor Other (please specify):	
		FCC Registration Number	0019421957	
		Percentage of votes	2.0 %	
mayor an area		Percentage of total assets (equity debt plus)	2.0 %	
	Copy 8.		PHIL FISHER	
	δ.	Address	Street 4633 SIGNATURE DR. City/State	
H		J		

a	8	Postal/ZIP Code 53562 - Country (if not U.S.)	
	Listing Type	Respondent Other Interest Holder	
	Relationship to Licensee/Permittee	C Licensee/Permittee (or Officer/Director of Licensee/Permittee) Person with attributable interest Entity with attributable interest	
Positional Interest (Check all that apply) Officer Director General Partner Limited Partner LC/LLC/PLLC Member Owner Stockholder Attributable Creditor Attributable Investor Other (please specify):			
	FCC Registration Number	0019422062	
	Percentage of votes	24.0 %	
	Percentage of total assets (equity debt plus)	24.0 %	
Сору	Name	HOWARD GLOEDE	
9.	A 11	Street	=1
	Address	43231 KINGS BLUFF DRIVE City/State WINONA, MINNESOTA Postal/ZIP Code 55987 - Country (if not U.S.)	
	Listing Type	43231 KINGS BLUFF DRIVE City/State WINONA, MINNESOTA Postal/ZIP Code 55987 -	
		43231 KINGS BLUFF DRIVE City/State WINONA, MINNESOTA Postal/ZIP Code 55987 - Country (if not U.S.)	4

		Other (please specify):	
	FCC Registration Number	0019422211	
	Percentage of votes	3.0 %	
	Percentage of total assets (equity debt plus)	s 3.0 %	
b.)	Respondent certifies that any equity attributable.	y and financial interests not reported in response to Question 3(a) are non-	FYes No [Exhibit 3]
	If "No," submit as an Exhibit an ex	planation.	
c.)	Does the Respondent or any person interest in any other broadcast stati Section 73.3555?	Ventity with an attributable interest in the Respondent also hold an attributable on, or in any newspaper entities in the same market, as defined in 47 C.F.R.	e Yes C N
	of entries to submit should use the Spreadsheet" format with the approx	ribing the interest(s), using EITHER the subform OR the spreadsheet option terest (broadcast or newspaper). Respondents with a large number (50 or more) spreadsheet option. NOTE: Spreadsheets must be submitted in a special "XML opriate structure that is specified in the documentation. For instructions on how implete this question (including templates to start with), please Click Here.	
	[Broadcast Interests Subform]		
	[Newspaper Interests Subform]		
d.)	Are any of the individuals listed in siblings?	response to Question 3(a) married, related as parent-child, or related as	C Yes © No
	If "Yes", complete the information	describing the relationship.	
	[Enter Familial Relationships Inf	formation]	
e.)	Is Respondent seeking an attribution Permittee ?	n exemption for any officer or director with duties unrelated to the Licensee or	C Yes G N
	If "Yes", complete the information	in the required fields and submit an Exhibit fully describing that individual's	
	duties and responsibilities, and exp	laining why that individual should not be attributed an interest.	

SECTION III - CERTIFICATION

I certify that I am TREASURER

(Official Title)

of MID-WEST MANAGEMENT, INC.

(Exact legal title or name of Respondent)

and 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.

(Date of the signature below must (1) be no earlier than Oct. 1 of the filing year when filing a Biennial Ownership Report (and no earlier than Nov. 1, 2009 in the case of the initial filing); or (2) be no more than 60 days prior to the date of filing when filing a non-biennial Ownership Report.)

Signature	Date
JASON MCCUTCHIN	6/25/2014
Telephone Number of Respondent (Include area code) 6084413609	Z CYNT ASS.

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 LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Spreadsheets

	Description	
Other Broadcast Interests		AFINE COUNTY TO THE