

Federal Communications Commission Washington, D C 20554	Approved by OMB 3060-0010 (March 2013)	FOR FCC USE ONLY
FCC 323 OWNERSHIP REPORT FOR COMMERCIAL BROADCAST STATIONS		FOR COMMISSION USE ONLY FILE NO.

Section I - General Information

1.	Legal Name of the Respondent NICOLET BROADCASTING, INC.	
	Street Address (1) 30 NORTH 18TH AVENUE, SUITE 8	
	Street Address (2)	
	City STURGEON BAY	State or Country (if foreign address) WI
		ZIP Code 54235 -
	Telephone Number (include area code) 9207469430	E-Mail Address (if available)
	FCC Registration Number:	Call Sign WBDK
		Facility ID Number 48848
2.	Contact Representative DAVID D. OXENFORD	Firm or Company Name WILKINSON BARKER KNAUER LLP
	Street Address (1) 2300 N ST., NW, SUITE 700	
	Street Address (2)	
	City WASHINGTON	State or Country (if foreign address) DC
		ZIP Code 20037 -
	Telephone Number (include area code) 2027834141	E-Mail Address (if available) DOXENFORD@WBKLA.W.COM
3.	Nature of Respondent (See Instructions for definitions)	
	<input checked="" type="radio"/> Licensee <input type="radio"/> Permittee <input type="radio"/> Entity with an attributable interest	
4.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Fee-exempt Report <input type="radio"/> Other Other <input type="radio"/> N/A (Fee Required)	
5.	All of the information furnished in this Report is accurate as of 10/01/2013 (Date entered must (1) be Oct. 1 of the filing year when filing a Biennial Ownership Report (or 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.)	
6.	Purpose: This Report is filed for: (choose one)	
	a. <input checked="" type="radio"/> Biennial	
	b. <input type="radio"/> Validation and Resubmission of a previously filed Biennial Report (certifying no change from previous Report)	
	c. <input type="radio"/> Transfer of Control or Assignment of License/Permit	
	d. <input type="radio"/> Report by Permittee filing within 30 days after the grant of a construction permit for a new commercial AM, FM or full power television broadcast station.	

e. Update / certification of accuracy of an initial Ownership Report filed by Permittee (filing in conjunction with Permittee's application for a station license)

f. Amendment to a previously filed Ownership Report

If an Amendment, submit as an Exhibit a listing by Section and Question Number the portions of the previous Report that are being revised.

File Number: BOA-20111114BHH

[Exhibit 1]

7. Licensee and Station Information. The stations listed below are all licensed to the following person or entity:

Licensee Name	Licensee's FCC Registration Number (FRN)
NICOLET BROADCASTING, INC.	0002703197

Station List

This Report is filed for the following stations:

Copy	Call Sign	Facility ID Number	Location (City/State)	Class of service
1.	WRLU	85829	ALGOMA , WISCONSIN	FM Station
2.	WBDK	48848	ALGOMA , WISCONSIN	FM Station
3.	WRKU	85794	FORESTVILLE , WISCONSIN	FM Station
4.	WSBW	165986	SISTER BAY , WISCONSIN	FM Station

8. Respondent is:

Sole Proprietorship Not-for-profit corporation Limited partnership

For-profit corporation General partnership Other

If "Other," describe nature of the Respondent in an Exhibit. [Exhibit 2]

Section II-B - Biennial Ownership Information

1. Contract Information. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only Licensees, or Respondents with a majority interest in or that otherwise exercise *de facto* control over the subject Licensee shall respond. Other Respondents should select "Not Applicable" in response to this question.) If the agreement is a local marketing agreement (LMA) or a radio joint sales agreement (JSA), or if the agreement is a network affiliation agreement, check the appropriate box; otherwise, select "Other" for non-LMA/radio JSA or network affiliation agreements.

Not Applicable

Contract Information

Copy	Description of contract or instrument	Name of person or organization with whom contract is made	Date of Execution	Date of Expiration	Agreement Type (check all that apply)
1.	ARTICLES OF INCORPORATION	WISCONSIN	Month MARCH Year 1985	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other

2.	BY-LAWS	NICOLET BROADCASTING, INC.	Month MARCH Year 1985	Month Year <input checked="" type="checkbox"/> No Expiration Date	<input type="checkbox"/> LMA/radio JSA <input type="checkbox"/> Network Affiliation Agreement <input checked="" type="checkbox"/> Other
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2. Capitalization (Only Licensees or entities with a majority interest in or that otherwise exercises de facto control over the subject Licensee shall respond.)
 Not Applicable

Capitalization Information

Copy	Class of stock (preferred, common or other)	Voting or Non-voting	Number of shares			
			Authorized	Issued and Outstanding	Treasury	Unissued
1.	<input type="checkbox"/> Preferred <input checked="" type="checkbox"/> Common <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Voting <input type="checkbox"/> Non-Voting	200	200	0	0

3. (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, noninsulated partners, members and other persons or entities with a direct attributable interest in the Respondent. (A "direct" interest is one that is not held through any intervening companies or entities.) In the case of vertical or indirect ownership structures, report only those interests in the Respondent that also represent an attributable interest in the Licensee for which the Report is being submitted.

List each person or entity with a direct attributable interest in the Respondent separately. 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 separate reports for persons or entities that do not have an attributable interest in the Licensee for which the report is being submitted.

Ownership Interests Information

Copy 1.	Name	NICOLET BROADCASTING, INC.
	Address	Street 30 NORTH 18TH AVENUE, SUITE 8 City/State STURGEON BAY , WISCONSIN Postal/ZIP Code 54235 - Country (if not U.S.)
	Listing Type	<input checked="" type="checkbox"/> Respondent <input type="checkbox"/> Other Interest Holder

Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0002703197	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input checked="" type="checkbox"/> N/A (entity) Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino Race (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White Citizenship US	
Percentage of votes	0 %	
Percentage of equity	0 %	
Percentage of total assets (equity debt plus)	0 %	
Copy 2.	Name	ROGER UTNEHMER
	Address	Street 776 SOUTH TOMAHAWK AVENUE City/State STURGEON BAY , WISCONSIN Postal/ZIP Code 54235 - Country (if not U.S.)
	Listing Type	<input type="checkbox"/> Respondent <input checked="" type="checkbox"/> Other Interest Holder

Relationship to Licensee	<input checked="" type="radio"/> Licensee (or Officer/Director of Licensee) <input type="radio"/> Person with attributable interest <input type="radio"/> Entity with attributable interest	
Positional Interest (Check all that apply)	<input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> General Partner <input type="checkbox"/> Limited Partner <input type="checkbox"/> LC/LLC/PLLC Member <input type="checkbox"/> Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Attributable Creditor <input type="checkbox"/> Attributable Investor <input type="checkbox"/> Other (please specify):	
FCC Registration Number	0009375957	
Gender, Ethnicity, Race and Citizenship Information (Natural Persons)	<input type="checkbox"/> N/A (entity) Gender <input checked="" type="radio"/> Male <input type="radio"/> Female Ethnicity <input type="radio"/> Hispanic or Latino <input checked="" type="radio"/> Not Hispanic or Latino Race (Check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input checked="" type="checkbox"/> White Citizenship US	
Percentage of votes	100.0 %	
Percentage of equity	100.0 %	
Percentage of total assets (equity debt plus)	100.0 %	
Copy 3.	Name	KAREN UTNEHMER
	Address	Street 776 SOUTH TOMAHAWK AVENUE City/State STURGEON BAY , WISCONSIN Postal/ZIP Code 54235 - Country (if not U.S.)
	Listing Type	<input type="radio"/> Respondent <input checked="" type="radio"/> Other Interest Holder

Relationship to Licensee
 Licensee (or Officer/Director of Licensee)
 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 0019958768

Gender, Ethnicity, Race and Citizenship Information (Natural Persons)
 N/A (entity)
Gender
 Male Female
Ethnicity
 Hispanic or Latino
 Not Hispanic or Latino
Race (Check all that apply)
 American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White
Citizenship
 US

Percentage of votes	0.0 %	
Percentage of equity	0.0 %	
Percentage of total assets (equity debt plus)	0.0 %	

(b.) Respondent certifies that any equity and financial interests not reported in response to Question 3(a) are non-attributable. Yes No [Exhibit 3]
 If "No," submit as an Exhibit an explanation.

(c.) Does the Respondent or any person/entity with an attributable interest in the Respondent also hold an attributable interest in any other broadcast station, or in any newspaper entities in the same market, as defined in 47 C.F.R. Section 73.3555? Yes No
 If "Yes", provide information describing the interest(s), using EITHER the subform OR the

spreadsheet option below for the applicable type of interest (broadcast or newspaper). 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](#).

[Broadcast Interests Subform]

[Newspaper Interests Subform]

(d.) Are any of the individuals listed in response to Question 3(a) married, related as parent-child, or related as siblings? Yes No

If "Yes", complete the information describing the relationship.

Familial Relationships				
Copy	Name	Parent/Child	Spouse	Siblings
1.	ROGER AND KAREN UTNEHMER	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

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

[Enter Attribution Exemption Information]

4.	<p>Respondent's Interests Held. Each Respondent other than a Licensee should list the name and FCC Registration Number of all entities in which the Respondent holds a direct attributable ownership interest, where that listed entity has an attributable ownership interest in the Licensee of the stations associated with the Report. Licensees should select "N/A" in response to this question.</p> <p>For any listing that includes the name of a person or entity reported on multiple Ownership Reports, ensure that the FRN information is consistent among all such Ownership Reports. Respondents should coordinate with each other to ensure such consistency.</p> <p>[Enter Respondent Interests Held Information]</p>	<input checked="" type="checkbox"/> N/A
5.	<p>Organizational Chart. LICENSEES ONLY: Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all persons/entities that have attributable interests in the Licensee.</p> <p>Non-Licensee Respondents should select "N/A" in response to this question.</p>	<input checked="" type="checkbox"/> N/A [Exhibit 5]

SECTION III - CERTIFICATION

I certify that I am **PRESIDENT**

(Official Title)

of **NICOLET BROADCASTING, 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 ROGER UTNEHMER	Date 11/13/2013
Telephone Number of Respondent (Include area code) 9207469430	

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