

(REFERENCE COPY - Not for submission)

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

File Number: **0000100952** Submit Date: **2020-01-28** FRN: **0002861383**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/28/2020

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0002861383	Augustana College

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
639 38TH STREET	ROCK ISLAND	IL	61201	+1 (309) 794- 7500	INFO@WVIK. ORG

2. Contact Representative

Name	Organization	
Barry S. Persh	Gray Miller Persh LLP	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2233 Wisconsin Ave., NW Suite 226	Washington	DC	20007	+1 (202) 776- 2458	bpersh@graymillerpersh. 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 board (or other governing entity) directly or indirectly under the control of another entity?		No	

Purpose	Biennial
"As of" date	10/01/2019

(b) Provide the following information about this report:

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	
Augustana College	0002861383	

Fac. ID No.	Call Sign	City	State	Service
3242	WVIK	ROCK ISLAND	IL	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	CONSTITUTION AND SPECIAL CHARTER OF AUGUSTANA COLLEGE	
Parties to contract or instrument	N/A	
Date of execution	01/1992	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: BYLAWS	

Document Information		
Description of contract or instrument	RESOLUTION OF BOARD OF TRUSTEES PROVIDING FOR TRANSFER OF LICENSE	
Parties to contract or instrument	N/A	
Date of execution	10/1992	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: RESOLUTION OF BOARD OF TRUSTEES PROVIDING FOR TRANSFER OF LICENSE	

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	0002861383			
Entity Name	Augustana College			
Address	РО Вох			
	Street 1	639 38TH STREET		
	Street 2			
	City	ROCK ISLAND		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	61201		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal r	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 an attributable interest in one or more broadcast stations that do not appear on this report?			

Ownership Information				
FRN	9990126196	9990126196		
Name	John Murabito	John Murabito		
Address	PO Box			
	Street 1	CIGNA Corporation		
	Street 2	1601 Chestnut Street		
	City	Philadelphia		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	19192		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	CIGNA Corporation, EVP Human Resources and Services		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			No

Ownership Information			
FRN	9990126155		
Name	Wiley Adams		
Address	PO Box		
	Street 1	2070 Fairview Lane	
	Street 2		
	City	South Holland	
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code	60473	
	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	PGIM, Inc. Chief Legal Officer		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race Black or African American		
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information				
FRN	9990138278			
Name	Gail J. Richard			
Address	РО Вох			
	Street 1	721 W. Coolidge Ave		
	Street 2			
	City	Charleston		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	61920		
	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	Eastern Illinois University, Professor Emeritus			
By Whom Appointed or Elected	Board	Board		
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	Voting	16.7%		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this r	n attributable interest in one o eport?	r more broadcast stations	No	

Ownership Information		
FRN	9990138273	
Name	Michael Gapen	
Address	РО Вох	
	Street 1	98 Larchmont Avenue
	Street 2	

	City	Larchmont		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10538		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Barclays, Managing Director,	Barclays, Managing Director, Head of US Economics Research		
By Whom Appointed or Elected	Board	Board		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	16.7%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No	

Ownership Information			
FRN	9990126179		
Name	Doug Hultquist		
Address	РО Вох		
	Street 1	3551 7th Street	
	Street 2		
	City Moline State ("NA" if non-U.S. IL address)		
	Zip/Postal Code 61262		
	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	President and CEO, QCR Holdings, Inc., retired		

By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	16.7%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No

Ownership Information			
FRN	9990126204		
Name	Peter Simshauser		
Address	PO Box		
	Street 1	500 Boylston Street, 23rd Floor	
	Street 2		
	City	Boston	
	State ("NA" if non-U.S. address)	MA	
	Zip/Postal Code	02116	
	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	Skadden, Arps, Slate, Meagher and Flom LLP, Partner Attorney		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?	No
(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 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.

File Name	Uploaded By	Attachment Type	Description
Augustana College FCC 323-E Exhibit (exec cmte).pdf	Applicant	Ownership Chart	Ownership Structure

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: Augustana College Name: Steven C. Bahls Phone: 3097947208 01/28/2020