

FRN

0006162663

Not Applicable

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

File Number:0000097692Submit Date:2020-01-15FRN:0006162663Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:01/15/2020Filing Status:Active

# **Section I - General Information**

Lewis and Clark Community College

## 1. Respondent

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
5800 Godfrey Road	Godfrey	IL	62035- 2426	+1 (618) 468- 4940	mlemons@lc. edu

## 2. Contact Representative

Name	Organization
Michael Lemons	General Manager WLCA-FM Lewis & Clark Community College

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
5800 Godfrey Road 1316 Caldwell Hall	Godfrey	IL	62035-2426	+1 (618) 468-4940	mlemons@lc.edu

# 3. Application Filing Fee

4. Control of Respondent	(a) Provide the following information about the Respondent:			
	Relationship to stations/permits	Licensee		
	Is the Respondent's governing boa indirectly under the control of anot	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.	

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name			FRN	
Lewis and Clark Community College			0006162663	}
Fac. ID No.	Call Sign	City	State	Service
37167	WLCA	GODFREY	IL	FM

## Section II – Biennial Ownership Information

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.

Not Applicable.

#### 2. Ownership Interests

1.47 C.F.R.

**Documents** 

Section 73.3613

(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	0006162663	
Entity Name	Lewis and Clark Community College	
Address	PO Box	
	Street 1	5800 Godfrey Road
	Street 2	
	City	Godfrey
	State ("NA" if non-U.S. address)	IL
	Zip/Postal Code	62035-2426
	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 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%	

that do not appear on this report?

Ownership Information				
FRN	9990122762			
Name	David L. Heyen	David L. Heyen		
Address	PO Box			
	Street 1	12543 Heyen Road		
	Street 2			
	City	Bunker Hill		
	State ("NA" if non-U.S. address)	IL		
	Zip/Postal Code	62014		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Business Owner - Farmer			
By Whom Appointed or Elected	Elected by Public			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	14.3%		
(enter percentage values 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	an attributable interest in one o report?	r more broadcast stations No		

FRN	9990138492		
Name	Julie Johnson		
Address	PO Box		
	Street 1	7808 Bangert Lane	
	Street 2		
	City	Edwardsville	
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code	62035	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired CPA		
By Whom Appointed or Elected	Elected by Public		
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	14.3%	
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 r	an attributable interest in one o report?	r more broadcast stations	No

#### **Ownership Information**

FRN	9990138493	
Name	Kevin Rust	
Address	PO Box	
	Street 1	11 Squire Drive
	Street 2	
	City	Glen Carbon
	State ("NA" if non-U.S. address)	IL
	Zip/Postal Code	62034
	Country (if non-U.S. address)	United States

Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Financial Advisor		
By Whom Appointed or Elected	Elected by Public		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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 No			

that do not appear on this report?

Ownership Information			
FRN	9990138494		
Name	Charles Handfelder	Charles Handfelder	
Address	PO Box		
	Street 1	680 Washington Avenue	
	Street 2		
	City	East Alton	
	State ("NA" if non-U.S. IL address)		
	Zip/Postal Code 62024		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Insurance Agent		
By Whom Appointed or Elected	Elected by Public		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	

White

Race

Interest Percentages	Voting	14.3%
(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 o	r more broadcast stations

Does interest holder have an attributable interest in one or more broadcast sta that do not appear on this report?

NO

Ownership Information			
FRN	9990122751		
Name	Brenda Walker McCain	Brenda Walker McCain	
Address	<b>PO Box</b> 823		
	Street 1		
	Street 2		
	City	Alton	
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code	62002	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	CEO - Madison County Urban League		
By Whom Appointed or Elected	Elected by Public		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race Black or African American		
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
	an attributable interest in one o	r more broadcast stations	No

that do not appear on this report?

# **Ownership Information**

FRN	9990122745	
Name	Robert L. Watson	
Address	PO Box	

	Street 1	201 North Main Street	
	Street 2		
	City	Brighton	
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code	62012	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	Elected by Public		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Gender Male		Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

#### **Ownership Information**

that do not appear on this report?

FRN	9990122758	
Name	Dwight Werts	
Address	PO Box	
	Street 1	400 North Old St. Louis Road
	Street 2	
	City Wood River	
	State ("NA" if non-U.S. IL address)	
	Zip/Postal Code 62095	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	

Principal Profession or Occupation	President and CEO, Werts Welding		
By Whom Appointed or Elected	Elected by Public		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
Race		White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have	Does interest holder have an attributable interest in one or more broadcast stations		

that do not appear on this report?

Name A	9990138496 April Tulgetske <b>PO Box</b>	
	PO Box	
Address		
S	Street 1	1048 West Railroad
S	Street 2	
C	City	Shipman
	State ("NA" if non-U.S. address)	IL
Z	Zip/Postal Code 62685	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Student Trustee Member of Governing Board (or other governing entity)	
Principal Profession or S Occupation	Student	
By Whom Appointed or Elected	Elected by Student Body	
-	Citizenship US	
	Gender	Female
Persons Only) E	Ethnicity	Not Hispanic or Latino
F	Race	White
	Voting 0.0%	
(enter percentage values from 0.0 to 100.0)	Equity 0.0%	

Total assets ( Plus)	Equity Debt 0.0%	
Does interest holder have an attributable int that do not appear on this report?	erest in one or more broadcast stations	s No
(b) Respondent certifies that any interests, interests, not reported in this filing are non- If "No," submit as an exhibit an explanation.		Yes
(c) Is Respondent seeking an attribution exe	emption for any officer or director with	No
duties wholly unrelated to the Licensee(s)?	ed fields and submit an Exhibit fully describ	

# 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**

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: <b>Station General Manager</b> Exact Legal Title or Name of Respondent: <b>Lewis &amp; Clark Community College</b> Name: <b>Michael Lemons</b> Phone: <b>6184684940</b> 01/15/2020

### Certification