



(REFERENCE COPY - Not for submission)

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

File Number: **0000100475** | Submit Date: **2020-01-27** | FRN: **0007309636**
Purpose: **Noncommercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **01/27/2020**
Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0007309636	Indiana University of Pennsylvania

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1011 South Drive	Indiana	PA	15705	+1 (724) 357-2100	cbarber@iup.edu

2. Contact Representative

Name	Organization
Chris Barber	Indiana University of Pennsylvania

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
121 Stouffer Hall	Indiana	PA	15705	+1 (724) 357-2491	cbarber@iup.edu

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?	Yes

(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
Indiana University of Pennsylvania	0007309636

Fac. ID No.	Call Sign	City	State	Service
28604	WIUP-FM	INDIANA	PA	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.

Not Applicable.

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	0007309636	
Entity Name	Indiana University of Pennsylvania	
Address	PO Box	
	Street 1	1011 South Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15705
	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 (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	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?			No

Ownership Information			
FRN	9990139472		
Name	Michael A. Driscoll		
Address	PO Box		
	Street 1	1011 South Drive	
	Street 2	201 Sutton Hall	
	City	Indiana	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15705	
	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	University President		
By Whom Appointed or Elected	PA State System of Higher Education Board of Governors		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	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?			No

Ownership Information			
FRN	9990139473		
Name	Samuel H. Smith		

Address	PO Box		
	Street 1	826 Ridge Road	
	Street 2		
	City	Punxsutawney	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15787	
	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	Retired		
By Whom Appointed or Elected	Governor of the Commonwealth of Pennsylvania		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	9.1%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information		
FRN	9990139474	
Name	Susan S. Delaney	
Address	PO Box	
	Street 1	122 Greenview Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15701
	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	Auto Dealership Owner		
By Whom Appointed or Elected	Governor of the Commonwealth of Pennsylvania		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	9.1%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information		
FRN	9990139475	
Name	Mark Holman	
Address	PO Box	
	Street 1	79 Potomac Avenue SE
	Street 2	#448
	City	Washington
	State ("NA" if non-U.S. address)	DC
	Zip/Postal Code	20003
	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	Government Relations	
By Whom Appointed or Elected	Governor of the Commonwealth of Pennsylvania	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values	Voting	9.1%

from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990139476	
Name	Joyce R. Fairman	
Address	PO Box	
	Street 1	414 Randall Court
	Street 2	
	City	DuBois
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15801
	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	Accounting Manager	
By Whom Appointed or Elected	Governor of the Commonwealth of Pennsylvania	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990139477	
Name	A. Tim Cejka	
Address	PO Box	
	Street 1	495 Hoodsmill Road

	Street 2	
	City	Latrobe
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15650
	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	Governor of the Commonwealth of Pennsylvania	
By Whom Appointed or Elected	Retired Executive	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990139682	
Name	Timothy Moerland	
Address	PO Box	
	Street 1	333 N. 8th Street
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15701
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - University Executive Staff	

Principal Profession or Occupation	Higher Education Administration		
By Whom Appointed or Elected	University President		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	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?			No

Ownership Information		
FRN	9990139684	
Name	Thomas C. Segar	
Address	PO Box	
	Street 1	1011 South Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15705
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - University Executive Staff	
Principal Profession or Occupation	University Administrator	
By Whom Appointed or Elected	University President	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	Black or African American
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	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?		No

Ownership Information		
FRN	9990139687	
Name	Patricia C. McCarthy	
Address	PO Box	
	Street 1	161 Timbersprings Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15701
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - University Executive Staff	
Principal Profession or Occupation	Vice President for Enrollment Management	
By Whom Appointed or Elected	University President	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	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?		No

Ownership Information		
FRN	9990139689	
Name	Khatmeh Osseiran-Hanna	
Address	PO Box	
	Street 1	357 Heritage Run Road
	Street 2	

	City	Indiana	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	15701	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - University Executive		
Principal Profession or Occupation	Vice President for University Advancement		
By Whom Appointed or Elected	University President		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	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?		No	

Ownership Information		
FRN	9990139691	
Name	Nathan T. Spade	
Address	PO Box	
	Street 1	1011 South Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15705
	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	State Government Executive	

By Whom Appointed or Elected	Governor of Commonwealth of PA	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990139692	
Name	David Osikowicz	
Address	PO Box	
	Street 1	1101 South Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15705
	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	Executive	
By Whom Appointed or Elected	Governor of Commonwealth of Pennsylvania	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?	No
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Ownership Information		
FRN	9990139694	
Name	James C. Miller	
Address	PO Box	
	Street 1	1011 South Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15705
	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	Executive	
By Whom Appointed or Elected	Governor of Commonwealth of Pennsylvania	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990139696	
Name	Abigaelle Vertil	
Address	PO Box	
	Street 1	1011 South Drive
	Street 2	
	City	Indiana

	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15705
	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	Student	
By Whom Appointed or Elected	Governor of Commonwealth of Pennsylvania	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	Black or African American
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990139697	
Name	Glenn M. Cannon	
Address	PO Box	
	Street 1	1011 South Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15705
	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	Executive	
By Whom Appointed or Elected	Governor of Commonwealth of Pennsylvania	

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990139700	
Name	Laurie A. Kuzneski	
Address	PO Box	
	Street 1	1011 South Drive
	Street 2	
	City	Indiana
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	15705
	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	Executive	
By Whom Appointed or Elected	Governor of Commonwealth of Pennsylvania	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	9.1%
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
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(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)? If " <u>Yes</u> ," 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.	No
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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.

Ownership of WIUP-FM is the Indiana University of Pennsylvania (IUP) President and the IUP Council of Trustees.

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 LICENSE --OR 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: Indiana University of Pennsylvania Name: Michael Driscoll Phone: 7243572100 01/27/2020