

(REFERENCE COPY - Not for submission)

FRN

0003402518

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

File Number:0000101650Submit Date:2020-01-29FRN:0003402518Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:01/29/2020Filing Status:Active

Section I - General Information

U. of R. Broadcasting Corporation

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
510 Wilson Commons	Rochester	NY	14627	+1 (585) 275- 4085	anne-marie. algier@rochester.edu

2. Contact Representative

Jerold L. Jacobs, Esq. Law Offices of Jerold L. Jacobs	Name	Organization
	Jerold L. Jacobs, Esq.	Law Offices of Jerold L. Jacobs

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1629 K St., NW Suite 300	Washington	DC	20006	+1 (202) 508- 3383	jerold.jacobs.esq@verizon. net

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

(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	F	RN		
U. of R. Broadcasting Corporation 0003402518				
Fac. ID No.	Call Sign	City	State	Service
69138	WRUR-FM	ROCHESTER	NY	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	0003402518		
Entity Name	U. of R. Broadcasting Corporat	tion	
Address PO Box			
	Street 1	510 Wilson Commons	
	Street 2		
	City	Rochester	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14627	
	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%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information				
FRN	0027305549			
Name	Holly Crawford			
Address	PO Box			
	Street 1	Univ. of Rochester, 208 Wallis	Hall	
	Street 2			
	City	Rochester		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	14627		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Sr. vice president and CFO			
By Whom Appointed or Elected	Board of Trustees			
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	14.0%		
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	0027305556	
Name	Jeffrey Runner	

Address	PO Box		
	Street 1	Univ. of Rochester, 317 Lattimore Hall	
	Street 2		
	City	Rochester	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14627	
	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	Dean		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt	0.0%	

Ownership Information			
FRN	0027305572		
Name	Douglas Phillips		
Address	PO Box		
	Street 1	110 Office Park Way	
	Street 2		
	City	Pittsford	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14534	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	

Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Senior Vice President		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.0%	
(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?

No

Ownership Information

FRN	0027305580		
Name	Elizabeth Stauderman		
Address	PO Box		
	Street 1	Univ. of Rochester, 247 Wallis Hall	
	Street 2		
	City	Rochester	
	State ("NA" if non-U.S. address)NYZip/Postal Code14627		
	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	Communications Officer		
By Whom Appointed or Elected	Board of Trustees		
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 14.0%		
(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		No	

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

Ownership Information			
FRN	0027305598	0027305598	
Name	Robert Clark	Robert Clark	
Address	PO Box		
	Street 1	Univ. of Rochester, 213 Wallis Hall	
	Street 2		
	City	Rochester	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14627	
	Country (if non-U.S. United States 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	Officer		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.0%	
(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 c report?	r more broadcast stations No	

Ownership Information			
FRN	0027305606		
Name	Anne-Marie Algier		
Address	PO Box Univ. of Rochester, 510 Wilson Commons		

	Street 2		
	City	Rochester	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14627	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Director of Student Activities		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.0%	
(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 r	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information		
FRN	9990141162	
Name	Sarah Mangelsdorf	
Address	PO Box	
	Street 1	240 Wallis Hall

Address	PO Box	
	Street 1	240 Wallis Hall
	Street 2	
	City	Rochester
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14627
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	

Principal Profession or Occupation	University President		
By Whom Appointed or Elected	Board of Trustees		
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 from 0.0 to 100.0)	Voting	14.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	or more broadcast stations	No
(h) Boonondont oortifics th	ot ony interacto, including agui	ity financial or voting	Yes
., .	at any interests, including equi his filing are non-attributable.	ity, financial, or voting	res
If "No," submit as an exhibit	-		

(c) Is Respondent seeking an attribution exemption for any officer or director with No 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.

3. Organizational Chart (Licensees Only)

Certification

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.

Vertical ownership: First tier: U. of R. Radio Broadcasting, licensee; second tier: Board of Trustees.

Section III - Certification

Question	Response
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).	
	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,

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: Vice President and Associate Dean of Students Exact Legal Title or Name of Respondent: U. of R. Broadcasting Corporation Name: Anne-Marie Algier Phone: 5852754085
		01/29/2020