



(REFERENCE COPY - Not for submission)

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

File Number: **0000243699** | Submit Date: **2024-04-19** | FRN: **0008838104**

Purpose: **Noncommercial Broadcast Stations Non-Biennial Ownership Report** | Status: **Received** | Status Date:

04/19/2024 | Filing Status: **Active**

Section I - General Information

1. Respondent

FRN		Entity Name			
0008838120		Goshen College, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1700 S Main Street	Goshen	IN	46526	+1 (574) 535-7000	jasonks@goshen.edu

2. Contact Representative

Name		Organization			
Seth L. Williams		FLETCHER, HEALD & HILDRETH, PLC			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N 17th Street Suite 1100	Arlington	VA	22209	+1 (703) 812-0400	williams@fhhlaw.com

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:

Relationship to stations/permits	Entity required to file a Form 323-E because it holds an attributable interest in one or more Licensees or Permittees	
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	Transfer of control or assignment of license/permit
"As of" date	03/05/2024 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) /Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee Name	FRN
Goshen College Broadcasting Corporation	0008838104

Fac. ID No.	Call Sign	City	State	Service
24663	WGCS	GOSHEN	IN	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee/Permittee Respondents 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/Permittee 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) or Permittee(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) or Permittee(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	0008838120	
Entity Name	Goshen College, Inc.	
Address	PO Box	
	Street 1	1700 S Main Street
	Street 2	
	City	Goshen
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46526
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
Positional Interests (check all that apply)	Respondent	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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	9990127132		
Name	BRUCE STAHLY		
Address	PO Box		
	Street 1	714 BAINBRIDGE PLACE	
	Street 2		
	City	GOSHEN	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46528	
	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	ASSISTANT SUPERINTENDENT FOR BUSINESS SERVICES, SCHOOL OF MISHAWAKA		
By Whom Appointed or Elected	BOARD OF GOSHEN COLLEGE		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%	
	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	9990127138	
Name	SUSAN FISHER MILLER	
Address	PO Box	
	Street 1	1630 CLEVELAND ST
	Street 2	
	City	EVANSTON
	State ("NA" if non-U.S. address)	IL
	Zip/Postal Code	60202

	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	SR. ASSOC. DIRECTOR OF FOUNDATION RELATIONS, NORTHWESTERN UNIVERSITY	
By Whom Appointed or Elected	BOARD OF GOSHEN COLLEGE	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%
	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	9990129569	
Name	GERRY HORST	
Address	PO Box	
	Street 1	442 WINDING LN
	Street 2	
	City	NEW HOLLAND
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	17557
	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, HORST AND SON, INC.	
By Whom Appointed or Elected	BOARD OF GOSHEN COLLEGE	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%
	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	9990129582
Name	AARON ZOU

Address	PO Box		
	Street 1	19787 COUNTY ROAD 16	
	Street 2		
	City	BRISTOL	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46507	
	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	DIRECTOR OF CHINA SALES AND MARKETING, POWER STATION INTL, INC.		
By Whom Appointed or Elected	BOARD OF GOSHEN COLLEGE		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%	
	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	9990141772		
Name	Bart Miller		
Address	PO Box		
	Street 1	1156 Gunderson Ave	
	Street 2		
	City	Oak Park	
	State ("NA" if non-U.S. address)	IL	
	Zip/Postal Code	60304	
	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	Liquidity Risk Specialist for Federal Reserve Bank of Chicago		
By Whom Appointed or Elected	BOARD OF DIRECTORS		
Interest Percentages (enter percentage values	Voting	7.1%	

from 0.0 to 100.0)	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	9990141774		
Name	Dan Nussbaum		
Address	PO Box		
	Street 1	427 Lake Shore Road East	
	Street 2		
	City	Oakville	
	Province/Region	Ontario	
	Zip/Postal Code	L6J1K1	
	Country (if non-U.S. address)	Canada	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	President Arconas Corporation		
By Whom Appointed or Elected	BOARD OF DIRECTORS		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%	
	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	9990148217	
Name	Kevin Deary	
Address	PO Box	
	Street 1	2928 N Orlando Ave
	Street 2	
	City	Tucson
	State ("NA" if non-U.S. address)	AZ
	Zip/Postal Code	85712
	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	Professor of Pediatrics and Associate Dean, For Graduate Medical Education University of Arizona		
By Whom Appointed or Elected	MENNONITE EDUCATION AGENCY		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%	
	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	9990148218		
Name	David Gautsche		
Address	PO Box		
	Street 1	625 W Main Street	
	Street 2	P.O. Box 489	
	City	New Holland	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	17557-0489	
	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, CEO Goodville Mutual Insurance Group		
By Whom Appointed or Elected	MENNONITE EDUCATION AGENCY		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%	
	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	9990148219	
Name	Kelly Hartzler	
Address	PO Box	
	Street 1	201 S. Main St., Suite 400 South Bend, IN 46601
	Street 2	

	<div>City</div> <div>South Bend</div>	
	<div>State ("NA" if non-U.S. address)</div> <div>IN</div>	
	<div>Zip/Postal Code</div> <div>46601</div>	
	<div>Country (if non-U.S. address)</div> <div>United States</div>	
<div>Listing Type</div>	Other Interest Holder	
<div>Positional Interests</div> <div>(check all that apply)</div>	Member of Governing Board (or other governing entity)	
<div>Principal Profession or Occupation</div>	Attorney, Barnes and Thornburg LLP	
<div>By Whom Appointed or Elected</div>	MENNONITE EDUCATION AGENCY	
<div>Interest Percentages</div> <div>(enter percentage values from 0.0 to 100.0)</div>	<div>Voting</div> <div>7.1%</div>	
	<div>Total assets (Equity Debt Plus)</div> <div>0.0%</div>	
<div>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</div>		No

Ownership Information		
<div>FRN</div>	9990148223	
<div>Name</div>	Tonya Miller	
<div>Address</div>	<div>PO Box</div>	
	<div>Street 1</div>	5223 SW Jacobsen Rd
	<div>Street 2</div>	
	<div>City</div>	Seattle, WA
	<div>State ("NA" if non-U.S. address)</div>	WA
	<div>Zip/Postal Code</div>	98116-4351
	<div>Country (if non-U.S. address)</div>	United States
<div>Listing Type</div>	Other Interest Holder	
<div>Positional Interests</div> <div>(check all that apply)</div>	Member of Governing Board (or other governing entity)	
<div>Principal Profession or Occupation</div>	Pediatric Anesthesiologist, Boston Childrens Hospital	
<div>By Whom Appointed or Elected</div>	MENNONITE EDUCATION AGENCY	
<div>Interest Percentages</div> <div>(enter percentage values from 0.0 to 100.0)</div>	<div>Voting</div>	7.1%
	<div>Total assets (Equity Debt Plus)</div>	0.0%
<div>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</div>		No

Ownership Information		
FRN	9990148227	
Name	Joy Sutter	
Address	PO Box	
	Street 1	142 Mainland Square Dr
	Street 2	
	City	Harleysville
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	19438-2500
	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	Associate Administrator, Cancer Service Line University of Pennsylvania Health System	
By Whom Appointed or Elected	MENNONITE EDUCATION AGENCY	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%
	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	9990156211	
Name	Katie Villegas	
Address	PO Box	
	Street 1	1700 S Main Street
	Street 2	
	City	Goshen
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46526
	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	Board Member		
By Whom Appointed or Elected	Board		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%	
	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	9990156212		
Name	Susan Lehman		
Address	PO Box		
	Street 1	1700 S Main Street	
	Street 2		
	City	Goshen	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46526	
	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	Board Member		
By Whom Appointed or Elected	Governing Board		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%	
	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	9990156213		
Name	Ken Edwards		
Address	PO Box		
	Street 1	1700 S Main Street	
	Street 2		
	City	Goshen	

	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46526
	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	Board Member	
By Whom Appointed or Elected	Governing Board	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%
	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

(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 "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.	No
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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: Secretary/Treasurer Exact Legal Title or Name of Respondent: Goshen College Broadcasting Corporation Name: Deanna Risser Phone: 5745357000 04/19/2024

