

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

File Number: 0000111764 Submit Date: 2020-04-07 FRN: 0008576431 Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status Date: 04/07/2020 Status: Received Filing Status: Active

# **Section I - General Information**

### 1. Respondent

**Entity Name** 

0008576431 Bloomington Cor		mmunity Radio, Inc.				
Street Address	City (and Coun address)	try if non U.S.	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
108 West Fourth Street	Bloomngtn		IN	47404	+1 (812) 323- 1200	manager@wfhb. org

### 2. Contact Representative

Name	Organization
John Turner	Bloomington Community Radio, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
108 West Fourth Street	Bloomington	IN	47404	+1 (812) 323-1200	manager@wfhb.org

### 3. Application Filing Fee

Not Applicable

FRN

#### 4. Control of Respondent

	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 bo indirectly under the control of and	ard (or other governing entity) directly or ther entity?	No	
	on 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
Bloomington Community Radio, Inc.	0008576431

Fac. ID No.	Call Sign	City	State	Service
5878	WFHB	BLOOMINGTON	IN	FM
5879	W251AG	BLOOMINGTON	IN	FX
141812	W292DD	ELLETSVILLE	IN	FX
141820	W264BP	NASHVILLE	IN	FX

#### 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	0008576431		
Entity Name	Bloomington Community Radio, Inc.		
Address	PO Box		
	Street 1	108 West Fourth Street	
	Street 2		
	City	Bloomngtn	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	47404	

#### **Ownership Information**

	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
<b>Positional Interests</b> (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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	0

Ownership Information			
FRN	2130016328		
Name	Sarah Taylor		
Address	PO Box		
	Street 1	2376 E Winding Brook Circle	
	Street 2		
	City	Bloomington	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	47401	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer		
Principal Profession or Occupation	Tax Lawyer		
By Whom Appointed or Elected	Appointed by the board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
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?

No

Ownership Information				
FRN	0022711493			
Name	Thomas B. Henderson			
Address	PO Box			
	Street 1	546 W Lois Lane		
	Street 2			
	City	Bloomginton		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	47403		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Principal Profession or Occupation	Retired			
By Whom Appointed or Elected	Elected by membership 2017			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	0.0%		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	No	

# **Ownership Information**

FRN	2130016286		
Name	Emily Jackson		
Address	PO Box		
	Street 1	7465 Zikes Road	
	Street 2		
	City	Bloomington	

	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	47401	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer	Officer	
Principal Profession or Occupation	Self-employed		
By Whom Appointed or Elected	Elected by Membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
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 that do not appear on this	an attributable interest in one o report?	or more broadcast stations	No

# **Ownership Information**

FRN	2130016260	
Name	Charles Beckett	
Address	PO Box	
	Street 1	1815 E Southdowns Blvd
	Street 2	
	City	Bloomington
	State ("NA" if non-U.S. IN address)	
	Zip/Postal Code 47401	
	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	Retired	
By Whom Appointed or Elected	Appointed by the board	

Citizenship, Gender, Ethnicity, and Race	Citizenship	US	
Information (Natural Persons Only)	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 No		No	

#### **Ownership Information**

that do not appear on this report?

FRN	2130016278		
Name	Pamela Davidson		
Address	PO Box		
	Street 1	3940 Walcott Lane	
	Street 2		
	City	Bloomington	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	47404	
	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	Chirtibale Gift Planner and Consultant		
By Whom Appointed or Elected	Elected by Membership		
Citizenship, Gender,	Citizenship	Citizenship US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

Ownership Information				
FRN	2130016294			
Name	Sarah Lyttle			
Address	PO Box			
	Street 1	PO Box 1491		
	Street 2			
	City	Nashville		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	47448		
	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	Yoga Instructor			
By Whom Appointed or Elected	Elected by Membership			
Citizenship, Gender,	Citizenship	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Race White		
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 a that do not appear on this r	n attributable interest in one o eport?	r more broadcast stations	No	

Ownership Information		
FRN	2130016302	
Name	Sheryl Mitchell	
Address	PO Box	
	Street 1	2321 S Rockport Rd
	Street 2	
	City Bloomington	
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	47403

	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	Self-employed	Self-employed	
By Whom Appointed or Elected	Elected by Membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
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?

NO

FRN	2130016310		
Name	James Quinn	James Quinn	
Address	PO Box		
	Street 1	1929 E Southdowns Rd	
	Street 2		
	City	Bloomington	
	State ("NA" if non-U.S. address)		
	Zip/Postal Code 47401		
	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	Appointed by the board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural Persons Only)	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
., .	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
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.	

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>Board Secretary, Bloomington</b> <b>Radio, Inc.</b> Exact Legal Title or Name of Respondent: <b>Board Secretary, Bloomington Radio, Inc.</b> Name: <b>Thomas Henderson</b> Phone: <b>3172504646</b> 04/07/2020