

FRN

Not Applicable

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

File Number: 0000176162 Submit Date: 2021-12-01 FRN: 0007318348 Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 12/01/2021 Filing Status: Active

Section I - General Information

1. Respondent

Entity Name

00073183	48	Northwest Indiana Public Broadcasting, Inc.			
Street Address	City (and Country non U.S. address	· ·	J. Zip Code	Phone	Email
8625 Indiana Place	Merrillville	IN	46410	+1 (219) 756-5656	jmuhammad@lakeshorepublicmedia. org

2. Contact Representative

Name	Organization
Brad Deutsch	Foster Garvey PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac Street, NW Suite 200	Washington	DC	20007- 3501	+1 (202) 298- 1793	brad.deutsch@foster. com

3. Application Filing Fee

4. Control of Respondent	(a) Provide the following information	(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	10/01/2021	
	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	
Northwest Indiana Public Broadcasting, Inc.					3348
Fac. ID No.	Call Sign	City	State		Service
49803	WYIN	GARY	IN		DTV
89212	WLPR-FM	LOWELL	IN		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.

Document Information		
Description of contract or instrument	Articles of Incorporation	
Parties to contract or instrument	Northwest Indiana Public Broadcasting, Inc.	
Date of execution	03/1979	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation	

Document Information		
Description of contract or instrument	Bylaws	
Parties to contract or instrument	Northwest Indiana Public Broadcasting, Inc.	
Date of execution	11/2020	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Bylaws	

Document Information		
Description of contract or instrument	Membership Certification	
Parties to contract or instrument	Public Broadcasting Service	
Date of execution	07/2021	
Date of expiration	06/2022	
Agreement type (check all that apply)	Other Agreement Type: Membership Certification	

(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.

RN	0007219249	0007040040		
-KN	0007318348			
Entity Name	Northwest Indiana Public Broa	Northwest Indiana Public Broadcasting, Inc.		
Address	PO Box			
	Street 1	8625 Indiana Place		
	Street 2			
	City	Merrillville		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	46410		
	Country (if non-U.S. address)	United States		
isting Type	Respondent			
Positional Interests check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity			
nterest 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	0004864674		
Name	Larry A. Brechner		
Address	PO Box		

	Street 1	8625 Indiana Place	
	Street 2		
	City	Merrillville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46410	
	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	Retired School Administrator Theater Director		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations No	

•				
FRN	0027183649	0027183649		
Name	Bonita D. Neff			
Address	PO Box			
	Street 1	8625 Indiana Place		
	Street 2			
	City Merrillville			
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	46410		
	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	Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	Professor and Chair, Communication, Performing Arts		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership information			
FRN	0027183813		
Name	Larry G. Evans		
Address	PO Box		
	Street 1	8625 Indiana Place	
	Street 2		
	City	Merrillville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46410	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - EmeritusMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
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		

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

Dwnership Information				
FRN	9990124371			
Name	Janice Ryba			
Address	PO Box			
	Street 1	8625 Indiana Place		
	Street 2			
	City	Merrillville		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	46410		
	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	Hospital Administrator and CEO			
By Whom Appointed or Elected	Board			
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	8.3%		
	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations No		

·		
FRN	9990124372	
Name	Kenneth M. Wilk	
Address	PO Box	
	Street 1	8625 Indiana Place
	Street 2	
	City	Merrillville

	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	46410		
	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	Attorney			
By Whom Appointed or Elected	Board			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	Voting 8.3%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

Ownership Information

FRN	9990124374		
Name	Calvin Bellamy		
Address	PO Box		
	Street 1	8625 Indiana Place	
	Street 2		
	City Merrillville		
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code 46410		
	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	Attorney		
By Whom Appointed or Elected	Board		

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	8.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations		No	

that do not appear on this report?

FRN	0027240241		
Name	Ana M. Grandfield		
Address	PO Box		
	Street 1	8625 Indiana Place	
	Street 2		
	City	Merrillville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46410	
	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	Retired, Administrator, Library		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

FRN	9990133833		
Name	Karen Tallian		
Address	PO Box		
	Street 1	8625 Indiana Place	
	Street 2		
	City	Merrillville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46410	
	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 Senator		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

ownership information		
FRN	9990147328	
Name	Dewey Pearman	
Address	PO Box	
	Street 1	8625 Indiana Place
	Street 2	
	City	Merrillville
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46410
	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	Association Manager, Constru	uction Advancement Foundation of Northwest Indiana, inc.
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	8.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations No

FRN	9990147331		
Name	James A. Muhammad	James A. Muhammad	
Address	PO Box		
	Street 1	8625 Indiana Place	
	Street 2		
	City	Merrillville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46410	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Ex-Officio		
Principal Profession or Occupation	President and CEO, Lakeshor	re Public Media	
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	

Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

that do not appear on this report?

Ownership Information			
FRN	9990147332		
Name	Gina Van Baren		
Address	PO Box		
	Street 1	8625 Indiana Place	
	Street 2		
	City	Merrillville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	46410	
	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	Financial Advisor		
By Whom Appointed or Elected	Board		
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	8.3%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

that do not appear on this report?

IN

Ownership InformationFRN9990148389NameMichelle HassingerAddressPO BoxStreet 18625 Indiana Place

	Street 2	
	City	Merrillville
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46410
	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	Brand and Marketing Manage	r, ExxonMobil
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Female
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	8.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations No

Ownership information		
FRN	9990148391	
Name	Dan Gibson	
Address	PO Box	
	Street 1	8625 Indiana Place
	Street 2	
	City	Merrillville
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46410
	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 Talent Developme	nt

By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990148394	
Name	Dorothy Campbell	
Address	PO Box	
	Street 1	8625 Indiana Place
	Street 2	
	City	Merrillville
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	46410
	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	Emeritus Professor of Commu	nication
By Whom Appointed or Elected	Board	
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	8.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	

that do not appear on this report?

that do not appear on this report?	
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.	Yes
If "No," submit as an exhibit an explanation.	

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

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 without parent entities.

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 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: President and CEO Exact Legal Title or Name of Respondent: Northwest Indiana Public Broadcasting, Inc. Name: James A. Muhammad Phone: 2197565656 12/01/2021