

(REFERENCE COPY - Not for submission)

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

File Number: 0000188760 | Submit Date: 2022-04-01 | FRN: 0011014099

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 04/01/2022

Filing Status: Active

Section I - General Information

1. Respondent

FRN Entity Name		Entity Name
	0011014099	Andrews Broadcasting Corporation

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
Andrews University	Berrien Springs	МІ	49104	+1 (269) 471- 3400	dudgeon@andrews.

2. Contact Representative

1	Name	Organization
	Donald Martin	Donald E Martin, P.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 8433	Falls Church	VA	22041	+1 (703) 642-2344	dempc@prodigy.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 boindirectly under the control of ano	ard (or other governing entity) directly or ther entity?	Yes

(b) Provide the following information about this report: Purpose Biennial 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.

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN
Andrews Broadcasting Corporation	0011014099

Fac. ID No.	Call Sign	City	State	Service	
2241	WAUS	BERRIEN SPRINGS	MI	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	Internal	
Date of execution	01/1969	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate governing document	

Document Information		
Description of contract or instrument	Bylaws	
Parties to contract or instrument	Internal	
Date of execution	07/1998	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Corporate organizational document	

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	Ownership Information		
FRN	0011014099	0011014099	
Entity Name	Andrews Broadcasting Corpo	ration	
Address	PO Box		
	Street 1	Andrews University	
	Street 2		
	City	Berrien Springs	
	State ("NA" if non-U.S. address)	MI	
	Zip/Postal Code	49104	
	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 Yes that do not appear on this report?			

Ownership Information		
FRN	0029642766	
Name	Andrea Luxton	
Address	PO Box	
	Street 1	3395 Niles Road
	Street 2	
	City	St. Joseph
	State ("NA" if non-U.S. address)	MI
	Zip/Postal Code	49065
	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	Andrews University Board of Trustees	
Citizenship, Gender,	Citizenship	CA
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	11.1%
(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 Yes that do not appear on this report?		

Ownership Information	Ownership Information			
FRN	0029636453			
Name	Sharon Dudgeon			
Address	PO Box			
	Street 1	204 South Oak		
	Street 2			
	City	Buchanan		
	State ("NA" if non-U.S. address)	MI		
	Zip/Postal Code	49107		
	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	Radio Station Manager			
By Whom Appointed or Elected	Andrews University Board of T	rustees		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
Race Wh		White		
Interest Percentages	Voting	11.1%		
(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?

Yes

Ownership Information				
FRN	0029636743			
Name	Harvey P. Kilsby			
Address	РО Вох			
	Street 1	4798 West Chapin Lane		
	Street 2			
	City	Berrien Springs		
	State ("NA" if non-U.S. address)	MI		
	Zip/Postal Code	49103		
	Country (if non-U.S. United States address)			
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	Andrews University Board of	Andrews University 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	11.1%		
(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 o	or more broadcast stations Yes		

Ownership Information				
FRN	0029636529	0029636529		
Name	Asta S. LaBianca	Asta S. LaBianca		
Address	РО Вох			
	Street 1	4075 Lake Chapin Road		
	Street 2			
	City	Berrien Springs		

	State ("NA" if non-U.S. address)	MI	
	Zip/Postal Code	49103	
	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 Professor		
By Whom Appointed or Elected	Andrews University Board of Trustees		
Citizenship, Gender,	Citizenship	CA	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	11.1%	
(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 creport?	or more broadcast stations	Yes

Ownership Information			
FRN	0029636487		
Name	Madeline Johnston		
Address	PO Box		
	Street 1	9368 Park Ridge Road	
	Street 2		
	City	Berrien Center	
	State ("NA" if non-U.S. MI address)		
	Zip/Postal Code 49102		
	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	Andrews University Board of Trustees		

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	11.1%
	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 creport?	or more broadcast stations Yes

Ownership Information				
FRN	0029636446			
Name	Glenn Meekma, Jr.			
Address	PO Box			
	Street 1	310 North Red Bud Trail		
	Street 2			
	City	Buchanan		
	State ("NA" if non-U.S. address)	MI		
	Zip/Postal Code	49107		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Univerity Administrator			
By Whom Appointed or Elected	Andrews University Board of Trustees			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Race White		
Interest Percentages	Voting	11.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations	Yes	

Ownership Information	Ownership Information			
FRN	0029642733	0029642733		
Name	Loida Medina			
Address	РО Вох			
	Street 1	8545 Kephert Lane		
	Street 2			
	City	Berrien Springs		
	State ("NA" if non-U.S. address)	MI		
	Zip/Postal Code	49103		
	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	Physician			
By Whom Appointed or Elected	Andrews University Board of	Andrews University Board of Trustees		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Asian		
Interest Percentages	Voting	11.1%		
(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 Yes that do not appear on this report?				

Ownership Information			
FRN	0029642949	0029642949	
Name	Dixie Wong		
Address	PO Box		
	Street 1	4627Greenfield Drive	
	Street 2		
	City	Berrien Springs	
	State ("NA" if non-U.S. address)	MI	
	Zip/Postal Code 49103		

	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	Real Estate Broker	Real Estate Broker		
By Whom Appointed or Elected	Andrews University 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	11.1%		
(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 i	an attributable interest in one oreport?	r more broadcast stations Yes		

Ownership Information				
FRN	0029636800			
Name	Rebecca May	Rebecca May		
Address	РО Вох			
	Street 1	6720 Long Lake Road		
	Street 2			
	City	Berrien Springs		
	State ("NA" if non-U.S. address)	MI		
	Zip/Postal Code	49103		
	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	Andrews University 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	11.1%	
	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 o	r more broadcast stations	Yes
(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

(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.

Respondent is a nonprofit corporation and a subsidiary of Andrews University, a nonprofit institution of higher education.

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: Secretary Exact Legal Title or Name of Respondent: Andrews Broadcasting Corporation Name: Sharon Dudgeon Phone: 2694713400