

(REFERENCE COPY - Not for submission)

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

File Number: **0000226454** Submit Date: **2023-11-16** FRN: **0005000526** 

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/16/2023

Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN Entity Na		Entity Name
0005000526		University of Southern Indiana Board of Trustees

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
8600 University Blvd	Evansville	IN	47712	+1 (812) 461- 5201	jmmorris@usi. edu

## 2. Contact Representative

Name	Organization
John Matthew Morris, Morris.	95.7 The Spin/University of Southern Indiana

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
8600 University Blvd	Evansville	IN	47712	+1 (812) 461-5201	jmmorris@usi.edu

## 3. Application Filing Fee

Not Applicable

## 4. Control of Respondent

(a) Provide the following information	ng 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	10/01/2023		
	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.		

#### and Station(s)

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

Licensee/Permittee Name	FRN	
University of Southern Indiana Board of Trustees	0005000526	

Fac. ID No.	Call Sign	City	State	Service
68924	WSWI	EVANSVILLE	IN	AM
142181	W239CI	EVANSVILLE	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	Ownership Information			
FRN	0005000526	0005000526		
Entity Name	University of Southern Indiana Board of Trustees			
Address	РО Вох			
	Street 1	8600 University Blvd		
	Street 2			
	City	Evansville		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	47712		
	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 (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 that do not appear on this report?			No

Ownership Information				
FRN	9990140722	9990140722		
Name	Harold Calloway	Harold Calloway		
Address	РО Вох			
	Street 1	11241 Blue Grass Road		
	Street 2			
	City	Evansville		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	47725		
	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	Governor			
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	11.1%		
(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 oreport?	r more broadcast stations No		

#### **Ownership Information**

FRN	9990140725			
Name	John Dunn			
Address	PO Box			
	Street 1	300 SE Riverside, Suite 100		
	Street 2			
	City	Evansville		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	47713		
	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	Chairman and CEO Dunn Hos	Chairman and CEO Dunn Hospitality		
By Whom Appointed or Elected	Governor			
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)			
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	9990140727	
Name	Christine Keck	
Address	РО Вох	
	Street 1	1 N Main St
	Street 2	
	City Evansville	
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	47711
	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	Vice President of National Government and REgulatory Affairs American Water		
By Whom Appointed or Elected	Governor		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	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)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	9990140728		
Name	Jeffery Knight		
Address	РО Вох		
	Street 1	4641 Lamb Lane	
	Street 2		
	City	Evansville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	47712	
	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	Governor		
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 from 0.0 to 100.0)	Voting	11.1%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

Ownership Information				
FRN	9990140731			
Name	Ronald Romain			
Address	PO Box			
	Street 1	11111 Browning Road		
	Street 2			
	City	Evansville		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	47725		
	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	CEO United Companies			
By Whom Appointed or Elected	Governor	Governor		
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)			
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations	No	

Ownership Information		
FRN	9990140733	
Name	Christina Ryan	
Address	PO Box	

	Street 1	2377 Briarcliff Drive		
	Street 2			
	City	Newburgh		
	State ("NA" if non-U.S. address)	IN		
	Zip/Postal Code	47630		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Member of Governing	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	CEO Women's Hospital at Deaconess			
By Whom Appointed or Elected	Governor			
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)			
Does interest holder have that do not appear on this	an attributable interest in one or report?	r more broadcast stations No		

Ownership Information		
FRN	9990140734	
Name	Kenneth Sendelweck	
Address	РО Вох	
	Street 1	1261 Rolling Ridge Road
	Street 2	
	City	Jasper
	State ("NA" if non-U.S. address)	IN
	Zip/Postal Code	47546
	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	Governor		
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)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	9990153705		
Name	Daniel M. Fuquay		
Address	PO Box		
	Street 1	8321 Schmuck Road	
	Street 2		
	City	Evansville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	47712	
	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		
By Whom Appointed or Elected	Governor	Governor	
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)		
Does interest holder have ar that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information			
FRN	9990153711		
Name	Fouad L. Hamami		
Address	PO Box		
	Street 1	915 Kirkwood Drive	
	Street 2		
	City	Evansville	
	State ("NA" if non-U.S. address)	IN	
	Zip/Postal Code	47715	
	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	Student		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
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)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

(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.

No vertical ownership structure

#### **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: Vice President for Finance and Administration  Exact Legal Title or Name of Respondent:  University of Southern Indiana  Name: Steven Bridges  Phone: 8124641849  11/16/2023