



2014 FCC Biennial Ownership Report

Federal Communications Commission

FCC MB - CDBS Electronic Filing
Account number: 319542

Description: 2014 BIENNIAL OWNERSHIP REPORT
Application Reference Number: 20140805AAS
Successfully filed at Aug 5 2014 10:49AM

Based on the information supplied, no fee is required.

[Menu](#)

[Logout](#)

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0084 (June 2002)	FOR FCC USE ONLY
FCC 323-E		FOR COMMISSION USE ONLY
Ownership Report For Noncommercial Educational Broadcast Station		FILE NO. - 20140805AAS
Read INSTRUCTIONS Before Filling Out Form		

Section I - General

1.	Legal Name of the Licensee/Permittee WESTERN ILLINOIS UNIVERSITY		
	Mailing Address WIUM 1 UNIVERSITY CIRCLE		
	City MACOMB	State or Country (if foreign address) IL	ZIP Code 61455 -
	Telephone Number (include area code) 3092981873	E-Mail Address (if available)	
	FCC Registration Number: 0004287942	Call Sign WIUM	Facility ID Number 71791
2.	Contact Representative (if other than Licensee/Permittee) RICHARD A. HELMICK, ESQ.		
	Firm or Company Name COHN AND MARKS LLP		
	Mailing Address 1920 N STREET, N.W. SUITE 300		
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20036 - 1622
	Telephone Number (include area code) 2024524831	E-Mail Address (if available) RICHARD.HELMICK@COHNMARKS.COM	
3.	Name of entity, if other than licensee or permittee, for which report is filed		
	Mailing Address		
	City	State or Country (if foreign address)	ZIP Code -
	Telephone Number (include area code)	E-Mail Address (if available)	

Section II - Ownership Information

4.	All of the information furnished in this Report is accurate as of 7/15/2014 (<i>Date must comply with 47 C.F.R. Section 73.3615(d), i.e., information must be current within 60 days of filing of this report, when 4(a) below is checked.</i>)		
	This Report is filed for (<i>check one</i>)		
	a. <input checked="" type="radio"/> Biennial	b. <input type="radio"/> Transfer of Control or Assignment of License/Permit	c. <input type="radio"/> Other

d. ☒ Amendment to pending application

for the following stations:

[Enter Station Information]

Station List

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
WIUS	71788	MACOMB IL	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WIUM	71791	MACOMB IL	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WIUW	71792	WARSAW IL	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WQPT-TV	5468	MOLINE IL	TV

5. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

Contracts/Instruments Information

List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject shall respond.)

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
SATELLITE FEED OF PROGRAMMING	NATIONAL PUBLIC RADIO	6/1/1982	

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
SATELLITE FEED OF PROGRAMMING	PUBLIC RADIO INTERNATIONAL	10/1/1995	

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)

DAILY NEWS FEEDS

ASSOCIATED PRESS

7/1/1980

6. Is the governing board directly or indirectly under the control of another entity? ☐ Yes ☒ No
 If Yes, is a separate FCC Form 323-E submitted for such entity? ☐ Yes ☒ No

7. List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages, if necessary.

[Enter Owner Information]

Owner Information

List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

a. Name and address of officer, member of governing board, and holders of 1% or more ownership interest (if other than individual also show name, address and citizenship of natural person authorized to vote the interest). List officers first, then board members, and thereafter, holders of 1% or more ownership interest, if any.

b. Citizenship.

c. Office held.

d. Percent of interest held.

e. Principal profession or occupation.

f. By whom appointed or elected.

g. Existing interests in any other broadcast station, including the nature and size of such interests.

a. Name and Address.	JACK THOMAS, PH.D, 1 UNIVERSITY CIRCLE , MACOMB, IL 61455
b. Citizenship.	US
c. Office held.	PRESIDENT, WIU
d. Percent of interest held.	0.00
e. Principal profession or occupation.	PRESIDENT, WESTERN ILLINOIS UNIVERSITY
f. By whom appointed or elected.	BOARD OF TRUSTEES
g. Existing interests	NONE

a. Name and Address.	KENNETH HAWKINSON, PH.D., 1 UNIVERSITY CIRCLE, MACOMB, IL 61455
b. Citizenship.	US
c. Office held.	VICE PRESIDENT, WIU
d. Percent of interest held.	0.00
e. Principal profession or occupation.	PROVOST & ACADEMIC VP, WESTERN ILLINOIS UNIVERSITY
f. By whom appointed or elected.	BOARD OF TRUSTEES
g. Existing interests	NONE

a. Name and Address.	CATHY E. EARLY, MACOMB, IL
b. Citizenship.	US
c. Office held.	CHAIR, BD. OF TRUSTEES
d. Percent of interest held.	0.00

e. Principal profession or occupation.	INSURANCE AGENT
f. By whom appointed or elected.	GOVERNOR OF ILLINOIS
g. Existing interests	NONE

a. Name and Address.	ROGER CLAWSON, MOLINE, IL
b. Citizenship.	US
c. Office held.	VICE CHAIR, BD. OF TRUSTEES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	INSURANCE AGENT
f. By whom appointed or elected.	GOVERNOR OF ILLINOIS
g. Existing interests	NONE

a. Name and Address.	CAROLYN J. EHLERT FULLER, MILAN IL
b. Citizenship.	US
c. Office held.	MEMBER, BD. OF TRUSTEES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	RETIRED BUSINESSWOMAN
f. By whom appointed or elected.	GOVERNOR OF ILLINOIS
g. Existing interests	NONE

a. Name and Address.	LYNEIR R. COLE, CHICAGO, IL
b. Citizenship.	US
c. Office held.	MEMBER, BD. OF TRUSTEES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	CHILD WELFARE SPECIALIST, SEGUIN SERVICES
f. By whom appointed or elected.	GOVERNOR OF ILLINOIS
g. Existing interests	NONE

a. Name and Address.	PHIL G. HARE, ROCK ISLAND, IL
b. Citizenship.	US
c. Office held.	SECRETARY, BD. OF TRUSTEES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	RETIRED (FORMER US REPRESENTATIVE, 17 CONGRESSSION DISTRICT)
f. By whom appointed or elected.	GOVERNOR OF ILLINOIS
g. Existing interests	

g. Existing interests	NONE
-----------------------	------

a. Name and Address.	WILLIAM L. EPPERLY, CHICAGO, IL
b. Citizenship.	US
c. Office held.	MEMBER, BD. OF TRUSTEES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	OWNER, STONEAGE MARKETING
f. By whom appointed or elected.	GOVERNOR OF ILLINOIS
g. Existing interests	NONE

a. Name and Address.	YVONNE S. SAVALA, MOLINE, IL
b. Citizenship.	US
c. Office held.	MEMBER, BD. OF TRUSTEES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	EXECUTIVE OFFICES OF KJWW ENGINEERING
f. By whom appointed or elected.	GOVERNOR OF ILLINOIS
g. Existing interests	NONE

a. Name and Address.	MICHAEL QUIGLEY, STUDENT ORGANIZATIONAL CENTER, WIU, 1 UNIVERSITY CIRCLE, MACOMB, IL 61455
b. Citizenship.	US
c. Office held.	STUDENT MEMBER, BD. OF TRUSTEES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	STUDENT
f. By whom appointed or elected.	ELECTED BY STUDENT GOVERNMENT
g. Existing interests	NONE

a. Name and Address.	JULIE DEWEES, 1 UNIVERSITY CIRCLE, MACOMB, IL 61455
b. Citizenship.	US
c. Office held.	VICE PRESIDENT FOR ADMINISTRATIVE SERVICES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	ADMINISTRATIVE VICE PRESIDENT, WESTERN ILLINOIS UNIVERSTIY
f. By whom appointed or elected.	BOARD OF TRUSTEES
g. Existing interests	NONE

a. Name and Address.	GARY BILLER, PH.D., 1 UNIVERSITY CIRCLE, MACOMB, IL 61455
----------------------	---

b. Citizenship.	US
c. Office held.	VICE PRESIDENT FOR STUDENT SERVICES
d. Percent of interest held.	0.00
e. Principal profession or occupation.	WESTERN ILLINOIS UNIVERSTIY
f. By whom appointed or elected.	BOARD OF TRUSTEES
g. Existing interests	NONE

a. Name and Address.	BRAD BANTER, 1 UNIVERSITY CIRCLE, MACOMB, IL 61455
b. Citizenship.	US
c. Office held.	VICE PRESIDENT FOR ADVANCEMENT & PUBLIC SERVICE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	WESTERN ILLINOIS UNIVERSITY
f. By whom appointed or elected.	BOARD OF TRUSTEES
g. Existing interests	NONE

a. Name and Address.	JOSEPH RIVES, PH.D., 3300 RIVER DRIVE, MOLINE, IL 61265
b. Citizenship.	US
c. Office held.	VICE PRESIDENT FOR QUAD CITIES & PLANNING
d. Percent of interest held.	0.00
e. Principal profession or occupation.	WESTERN ILLINOIS UNIVERSITY
f. By whom appointed or elected.	BOARD OF TRUSTEES
g. Existing interests	NONE

SECTION III - CERTIFICATION

I certify that I am PRESIDENT

(Official Title)

of WESTERN ILLINOIS UNIVERSITY

(Exact legal title or name of respondent)

and 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.

(Date of certification must be within 60 days of the date shown in Question 4, Section II and in no event prior to that date.)

Signature JACK THOMAS, PH.D.	Date 7/30/2014
Telephone Number of Respondent (Include area code) 3092981824	

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).

Exhibits

FIND US ONLINE

