

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

File Number:0000046782Submit Date:2018-03-02FRN:0009469826Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:03/02/2018Filing Status:Active

Section I - General Information

1. Respondent

 FRN
 Entity Name

 0009469826
 WASU-FM

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
Department of Communications 920 Rivers Street	Boone	NC	28608	+1 (828) 262- 3295	valliehill@appstate. edu

2. Contact Representative

Name	Organization
Stephen Hartzell	Brooks, Pierce et al.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
150 Fayetteville Street Suite 1700	Raleigh	NC	27601	+1 (919) 839- 0300	shartzell@brookspierce. com

3. Application Filing Fee

Not Applicable

4. Control of	(a) Provide the following information about the Respondent:				
Respondent	Relationship to stations/permits	Licensee			
	Is the Respondent's governing boa indirectly under the control of anot		ntity) directly or	No	
	(b) Provide the following information	on about this report:			
	Purpose		Biennial		
	"As of" date		10/01/2017		
			and resubmitting a price	ownership report or validating or biennial ownership report, this the year in which this report is	

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name		F	FRN	
WASU-FM		C	009469826	
Fac. ID No.	Call Sign	City	State	Service
2467	WASU-FM	BOONE	NC	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	State Charter	
Parties to contract or instrument	State of North Carolina	
Date of execution	01/1972	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: State Charter	

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	0009469826		
Entity Name	WASU-FM		
Address	PO Box		
	Street 1 Department of Communications		

	Street 2	920 Rivers Street	
	City	Boone	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28608	
	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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

FRN	9990128973		
Name	James M. Barnes		
Address	PO Box		
-	Street 1	NAI Carolantic Realty, Inc.	
-	Street 2	5121 Kingdom Way, Suite 200	
-	City	Raleigh	
	State ("NA" if non-U.S. address)	NC	
-	Zip/Postal Code	27607	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - ChairMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Commercial Real Estate		
By Whom Appointed or Elected	Board of Governors		
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	an attributable interest in one o	r more broadcast stations	No

Ownership Information				
FRN	9990128974			
Name	M. Lee Barnes, Jr.			
Address	PO Box			
	Street 1	4220 Neal Road		
	Street 2			
	City	Durham		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	27705	27705	
	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	President-Director, M.M. Fowler, Inc.			
By Whom Appointed or Elected	Board of Governors			
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)			

FRN	9990128975
Name	Donald C. Beaver

Address	PO Box		
	Street 1	Beaver Sports Properties, Inc.	
	Street 2	3763 Golf Drive, NE	
	City	Conover	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28613	
	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	Business Executive		
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	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Information			
FRN	9990128976	9990128976	
Name	John M. Blackburn		
Address	PO Box		
	Street 1Linville Resorts, Inc.Street 2P.O. Box 218		
	City	Linville	
	State ("NA" if non-U.S. NC address) NC		
	Zip/Postal Code 28646		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		

Other - Vice ChairMember of Governing Board (or other governing entity)		
President-General Manager, Linville Resorts, Inc.		
Board of Governors	Board of Governors	
Citizenship	US	
Gender	Male	
Ethnicity	Not Hispanic or Latino	
Race	White	
Voting	8.3%	
Equity	0.0%	
Total assets (Equity Debt Plus)		
	 President-General Manager, I Board of Governors Citizenship Gender Ethnicity Race Voting Equity Total assets (Equity Debt 	

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

No

FRN	9990128977		
Name	Susan M. Branch		
Address	PO Box		
	Street 1	Office of the Chancellor	
	Street 2	438 Academy Street, Suite 400	
	City	Boone	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code 28608		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - SecretaryMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Vice President, Ciena Capital LLC		
By Whom Appointed or Elected	Board of Governors		
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 (enter percentage values	Voting	8.3%	

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder hav	e an attributable interest in one o	more broadcast stations	No

Ownership Information				
FRN	9990128978			
Name	Anderson Clayton	Anderson Clayton		
Address	PO Box			
	Street 1	Plemmons Student Union Suite 213		
	Street 2	263 Locust Street		
	City	Boone		
	State ("NA" if non-U.S. address)	NC		
	Zip/Postal Code	28608		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - ex officio member of board			
Principal Profession or Occupation	Student President of Appalachian's SGA			
By Whom Appointed or Elected	Automatic by Virtue of Presidency of SGA			
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 a that do not appear on this i	an attributable interest in one or report?	r more broadcast stations No		

Ownership Information FRN 9990128979 Name Robert C. Hatley Address PO Box Street 1 Office of the Chancellor

	Street 2	438 Academy Street, Suite 400	
	City	Boone	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28608	
	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	President and CEO, Paragon Bank		
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	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	0

FRN	9990128980		
Name	Scott Lampe		
Address	PO Box		
	Street 1	Office of the Chancellor	
	Street 2 438 Academy Street, Suite 400		
	CityBooneState ("NA" if non-U.S. address)NCZip/Postal Code28608Country (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	CFO and VP, Hendrick Motorsports, Inc.		
By Whom Appointed or Elected	Board of Governors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	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	9990128981	9990128981	
Name	Charles V. Murray		
Address	PO Box		
	Street 1	Murray Supply Company	
	Street 2	102 W. 3rd Street, Suite 810	
	City	Winston-Salem	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code 27101		
	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	Chairman, Murray Supply Company		
By Whom Appointed or Elected	Board of Governors		
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 ar that do not appear on this re	n attributable interest in one or port?	more broadcast stations	No

FRN Name Address	9990128982 E. Bonnie Schaefer			
	E Bonnie Schaefer			
Address		E. Bonnie Schaefer		
	PO Box			
	Street 1	Westglow Resort and Spa		
	Street 2	224 Westglow Circle		
	City	Blowing Rock	Blowing Rock	
	State ("NA" if non-U.S. address)	NC	NC	
	Zip/Postal Code	28605		
	Country (if non-U.S. address)	United States		
_isting Type	Other Interest Holder			
Positional Interests check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Dccupation	Owner, Westglow Resort and Spa			
By Whom Appointed or Elected	Board of Governors			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race nformation (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
nterest Percentages	Voting	8.3%		
enter percentage values rom 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

Ownership Information			
FRN	9990128984		
Name	D. Kenan Smith		
Address	PO Box		
	Street 1	Second Creek Development Company	
	Street 2	401 West Innes Street, Second Floor	

	City	Salisbury	
	State ("NA" if non-U.S. address)	NC	
	Zip/Postal Code	28144	
	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	Managing Partner, Second Creek Development Company		
By Whom Appointed or Elected	Governor		
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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information		
FRN	9990128985	
Name	Carole P. Wilson	
Address	PO Box	
	Street 1	Office of the Chancellor
	Street 2438 Academy Street, Suite 400CityBooneState ("NA" if non-U.S. address)NCZip/Postal Code28608	
	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	Business Executive	

By Whom Appointed or Elected	Board of Governors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No
(b) Paspondent certifics th	at any interests, including equi	ty financial or voting	Yes

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
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 " <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.	

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 has no parent entity.

Section III - 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).	
	Authorized Party to Sign	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,

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: Chancellor Exact Legal Title or Name of Respondent: Appalachian State University Name: Sheri N. Everts Phone: 8282627621 03/02/2018