

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

File Number:0000163230Submit Date:2021-10-07FRN:0009216797Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:10/07/2021Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0009216797	Piscataway Board of Education	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
100 Behmer Road	Piscataway	NJ	08854	+1 (732) 572- 2289	DOliveira@pway. org

2. Contact Representative

Name	Organization
Cary S. Tepper	Tepper Law Firm, LLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4900 Auburn Avenue Suite 100	Bethesda	MD	20814-2632	+1 (301) 718-1818	tepperlaw@aol.com

3. Application Filing Fee

5

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	mits 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	10/01/2021	
	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	
Piscataway Board of Educa	0009216797			
Fac. ID No.	Call Sign	City	State	Service
52686	WVPH	PISCATAWAY	NJ	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.

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		
FRN	0009216797	
Entity Name	Piscataway Board of Education	ı
Address	PO Box	
	Street 1	100 Behmer Road
	Street 2	
	City	Piscataway
	State ("NA" if non-U.S. address)	NJ
	Zip/Postal Code	08854
	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 No that do not appear on this report?			

Ownership Information			
FRN	9990120203		
Name	Ralph E. Johnson		
Address	PO Box		
	Street 1	39 E. Burgess Drive	
	Street 2		
	City	Piscataway	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08854	
	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	Educator		
By Whom Appointed or Elected	Piscataway residents		
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 (enter percentage values	Voting	11.1%	
from 0.0 to 100.0)	Equity	00.0%	
	Total assets (Equity Debt Plus)	00.0%	
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?		

Ownership Information FRN 9990120207 Name Shantell Cherry

Address	PO Box		
	Street 1	34 Wagner Avenue	
	Street 2		
	City	Piscataway	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08854	
	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	Homemaker		
By Whom Appointed or Elected	Piscataway residents		
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	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	00.0%	
	Total assets (Equity Debt Plus)	00.0%	

Ownership Information			
FRN	9990140191		
Name	Brenda Smith		
Address	PO Box	PO Box	
	Street 1	124 School Street	
	Street 2		
	City	Piscataway	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08854	
	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	Retired	
By Whom Appointed or Elected	Piscataway residents		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	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	00.0%	
	Total assets (Equity Debt Plus)	00.0%	
Does interest holder have	Plus) an attributable interest in one o	r more broadcast stations	No

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

Ownership Information

FRN	9990140192		
Name	Calvin Laughlin		
Address	PO Box		
	Street 1	1212 Charter Street	
	Street 2		
	City	Piscataway	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08854	
	Country (if non-U.S.United Statesaddress)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Law Enforcement		
By Whom Appointed or Elected	Piscataway residents		
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 (enter percentage values	Voting 11.1%		

from 0.0 to 100.0)	Equity	00.0%	
	Total assets (Equity Debt Plus)	00.0%	
Does interest holder have an attributable interest in one or more broadcast stations			No

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

Ownership Information			
FRN	9990140193	9990140193	
Name	Jeffrey Fields, Sr.	Jeffrey Fields, Sr.	
Address	PO Box	Box	
	Street 1	144 Walnut Street	
	Street 2		
	City	Piscataway	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08854	
	Country (if non-U.S. United States 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	Retired		
By Whom Appointed or Elected	Piscataway residents	Piscataway residents	
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	00.0%	
	Total assets (Equity Debt Plus)	00.0%	
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations N	0

Ownership Information		
FRN	9990140194 Kimberly Lane	
Name		
Address	PO Box	
	Street 1	18 Boxwood Road

	Street 2		
	City	Piscataway	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08854	
	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	Project Manager		
By Whom Appointed or Elected	Piscataway Residents		
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	00.0%	
	Total assets (Equity Debt Plus)	00.0%	
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?		

Ownershin	Information
Ownership	mormation

FRN	9990140195		
Name	Nitang B. Patel		
Address	PO Box		
	Street 1	37 Summershade Circle	
	Street 2		
	CityPiscatawayState ("NA" if non-U.S. address)NJZip/Postal Code08854		
	Country (if non-U.S. United States 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	Pharmacist		
By Whom Appointed or Elected	Piscataway residents	Piscataway residents	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Asian	
Interest Percentages	Voting	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	00.0%	
	Total assets (Equity Debt Plus)	00.0%	
Does interest holder have	an attributable interest in one o	or more broadcast stations	No

Ownership Information

that do not appear on this report?

Ownership Information			
FRN	9990140196		
Name	Shelia Hobson		
Address	PO Box		
	Street 1	2602 Wade Street	
	Street 2		
	City	Piscataway	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08854	
	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	Retired	Retired	
By Whom Appointed or Elected	Piscataway residents	Piscataway residents	
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	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	00.0%	

	Total assets (Equity Debt Plus)	00.0%	
holder have an attributable interest in one or more broadcast stations		No	

that do not appear on this report?

Does interest

	0000111007		
FRN	9990144007		
Name	Zoe Scotto		
Address	PO Box		
	Street 1	30 Wisteria Court	
	Street 2		
	City	Piscataway	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08854	
	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	Piscataway residents		
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	00.0%	
	Total assets (Equity Debt Plus)	00.0%	
Does interest holder have a that do not appear on this ı	an attributable interest in one o report?	r more broadcast stations	No

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)?

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.

No

Non-Licensee Respondents should select "N/A" in response to this question.

A vertical ownership structure exhibit is not required since the licensee does not have a parent entity.

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: Board President Exact Legal Title or Name of Respondent: Piscataway Board of Education Name: Shelia Hobson Phone: 7325722289 10/07/2021