



(REFERENCE COPY - Not for submission)

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

File Number: **0000169494** | Submit Date: **2021-11-18** | FRN: **0011518016**
Purpose: **Noncommercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **11/18/2021**
Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0011518016	Bloomfield Hills School District-Board Of Education

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
4200 Andover Road	Bloomfield Hills	MI	48302	+1 (248) 341-5690	wbfh@bloomfield.org

2. Contact Representative

Name	Organization
JOHN C. TRENT, ESQ.	PUTBRESE HUNSAKER & TRENT, P.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
200 S. CHURCH ST.	WOODSTOCK	VA	22664	+1 (540) 459-7646	FCCMAN3@SHENTEL.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 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.

5. Licensee(s)

and Station(s)

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

Licensee/Permittee Name			FRN	
Bloomfield Hills School District-Board Of Education			0011518016	

Fac. ID No.	Call Sign	City	State	Service
5872	WBFH	BLOOMFIELD HILLS	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.

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	0011518016	
Entity Name	Bloomfield Hills School District-Board Of Education	
Address	PO Box	
	Street 1	4200 Andover Road
	Street 2	
	City	Bloomfield Hills
	State ("NA" if non-U.S. address)	MI
	Zip/Postal Code	48302
	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 that do not appear on this report?			No

Ownership Information			
FRN	9990139444		
Name	HOWARD BARON		
Address	PO Box		
	Street 1	1355 JUNIPER LANE	
	Street 2		
	City	BLOOMFIELD HILLS	
	State ("NA" if non-U.S. address)	MI	
	Zip/Postal Code	48304	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - TRUSTEE/Treasurer		
Principal Profession or Occupation	RETIRED EXECUTIVE		
By Whom Appointed or Elected	ELECTED BY SCHOOL DISTRICT RESIDENTS		
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	14.2%	
	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?			No

Ownership Information			
FRN	9990139547		
Name	JENNIFER Matlow		

Address	PO Box		
	Street 1	3856 NORMANWOOD DRIVE	
	Street 2		
	City	ORCHARD LAKE	
	State ("NA" if non-U.S. address)	MI	
	Zip/Postal Code	48304	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - TRUSTEE Acting President		
Principal Profession or Occupation	VETERINARIAN Tech		
By Whom Appointed or Elected	ELECTED BY THE SCHOOL DISTRICT 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	14.2%	
	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?		No	

Ownership Information		
FRN	9990139548	
Name	LISA EFROS	
Address	PO Box	
	Street 1	5437 LASHER ROAD
	Street 2	
	City	BLOOMFIELD HILLS
	State ("NA" if non-U.S. address)	MI
	Zip/Postal Code	48304
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

Positional Interests (check all that apply)	Other - TRUSTEE		
Principal Profession or Occupation	ATTORNEY		
By Whom Appointed or Elected	ELECTED BY THE SCHOOL DISTRICT 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	14.2%	
	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?		No	

Ownership Information		
FRN	9990139549	
Name	PAUL KOLIN	
Address	PO Box	
	Street 1	4297 SUNNINGDALE DRIVE
	Street 2	
	City	BLOOMFIELD HILLS
	State ("NA" if non-U.S. address)	MI
	Zip/Postal Code	48302
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - TRUSTEE	
Principal Profession or Occupation	PARTNER, EXECUTIVE DIRECTOR OF PROFESSIONAL SERVICES FIRM	
By Whom Appointed or Elected	ELECTED BY THE SCHOOL DISTRICT RESIDENTS	
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	Voting	14.2%

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?		No

Ownership Information		
FRN	9990146307	
Name	Johnathan Van Gemert	
Address	PO Box	
	Street 1	1081 Rock Spring Road
	Street 2	
	City	Bloomfield Hills
	State ("NA" if non-U.S. address)	MI
	Zip/Postal Code	48304
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Trustee/Secretary	
Principal Profession or Occupation	Attorney	
By Whom Appointed or Elected	Elected by school district residents	
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	14.2%
	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?		No

Ownership Information		
FRN	9990146309	
Name	Siva Kumar	
Address	PO Box	
	Street 1	177 E. Long Lake Road

	Street 2	
	City	Bloomfield Hills
	State ("NA" if non-U.S. address)	MI
	Zip/Postal Code	48304
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee	
Principal Profession or Occupation	Engineering Consultant	
By Whom Appointed or Elected	Elected by school district residents	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	Asian
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.2%
	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?		No

Ownership Information		
FRN	9990146312	
Name	Michelle Southward	
Address	PO Box	
	Street 1	2778 Plum Brook Dr.
	Street 2	
	City	Bloomfield Township
	State ("NA" if non-U.S. address)	MI
	Zip/Postal Code	48204
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee	

Principal Profession or Occupation	Academic Advisor	
By Whom Appointed or Elected	Elected by school district residents	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	Black or African American
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.2%
	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?		No

(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
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(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)? 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.	No
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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.

There is no vertical ownership.

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 LICENSE --OR 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: Station Manager Exact Legal Title or Name of Respondent: Bloomfield Hills School District-Board Of Education Name: Ronald Wittebols Phone: 2483415690 11/18/2021
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