

(REFERENCE COPY - Not for submission)

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

File Number: 0000053144 Submit Date: 2018-04-20 FRN: 0005937545

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 04/20/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0005937545	BALDWIN WALLACE UNIVERSITY

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
275 Eastland Road	Berea	ОН	44017- 2088	+1 (440) 826- 2325	INFO@BW. EDU

2. Contact Representative

Name	Organization
Marissa G. Repp, Esq.	Repp Law Firm

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1629 K Street, NW Suite 300	Washington	DC	20006- 1631	+1 (202) 656- 1619	MARISSA@REPPLAWFIRM.

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 10/01/2017 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
BALDWIN WALLACE UNIVERSITY	0005937545

Fac. ID No.	Call Sign	City	State	Service
3638	WBWC	BEREA	ОН	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	Charter of Baldwin Wallace University (formerly Baldwin-Wallace College)	
Parties to contract or instrument	STATE OF OHIO	
Date of execution	04/1914	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Charter	

Document Information		
Description of contract or instrument	Certificate of Amendment to Articles	
Parties to contract or instrument	State of Ohio	
Date of execution	06/2012	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Amendment	

Document Information		
Description of contract or instrument	Bylaws of Baldwin Wallace University, as Revised Through October 11, 2013	
Parties to contract or instrument	Baldwin Wallace University	
Date of execution	10/2013	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Bylaws	

Document Information		
Description of contract or instrument	Board of Trustees Recusal Statement	
Parties to contract or instrument	Board of Trustees	
Date of execution	05/2016	

Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Board of Trustees Recusal Statement

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.

FRN	0005937545	0005937545		
Entity Name	BALDWIN WALLACE UNIVE	RSITY		
Address	РО Вох			
	Street 1	275 Eastland Road		
	Street 2			
	City	Berea		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	44017-2088		
	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	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%		

Ownership Information			
FRN	9990128474		
Name	Robert C. Helmer		
Address	PO Box		
	Street 1	c/o Baldwin Wallace University	
	Street 2	275 Eastland Road	
	City	Berea	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	44017-2088	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	University Administrator		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.7%	
(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	9990128475	
Name	Richard L. Fletcher	
Address	РО Вох	
	Street 1	c/o Baldwin Wallace University
	Street 2	275 Eastland Road
	City	Berea
	State ("NA" if non-U.S. address)	ОН
	Zip/Postal Code	44017-2088

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer	Officer	
Principal Profession or Occupation	University Administrator	University Administrator	
By Whom Appointed or Elected	President		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.7%	
(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	9990128476	9990128476	
Name	Stephen D. Stahl		
Address	РО Вох		
	Street 1	c/o Baldwin Wallace University	
	Street 2	275 Eastland Road	
	City	Berea	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	44017-2088	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	University Administrator		
By Whom Appointed or Elected	President		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)			

Interest Percentages (enter percentage values from 0.0 to 100.0)	Ethnicity	Not Hispanic or Latino	
	Race	White	
	Voting	16.7%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	No

Ownership Information				
FRN	9990128477	9990128477		
Name	William M. Reniff	William M. Reniff		
Address	PO Box			
	Street 1	c/o Baldwin Wallace University		
	Street 2	275 Eastland Road		
	City	Berea		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	44017-2088		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Principal Profession or Occupation	University Administrator			
By Whom Appointed or Elected	President			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	16.7%		
(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	9990128478	

Address	PO Box		
Address	РО ВОХ		
	Street 1	c/o Baldwin Wallace University	
	Street 2	275 Eastland Road	
	City	Berea	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	44017-2088	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	University Administrator		
By Whom Appointed or Elected	President		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Information		
FRN	9990128479	
Name	Trina Dobberstein	
Address	PO Box Street 1 c/o Baldwin Wallace University Street 2 275 Eastland Road City Berea State ("NA" if non-U.S. address)	
	Zip/Postal Code	44017-2088
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	University Administrator	University Administrator	
By Whom Appointed or Elected	President	President	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.7%	
(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
•	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	Yes
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.	

Attribution Exemption					
Name	No	Title	Other Officers		
Explanation	Listed in the Ownership Interest Section are only those Officers of the University who have a degree of influence or control over WBWC's operations, budget and/or programming.				

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 parent entity.

Section III - Certification

Certification	Section	Question	Response
	Section	Question	kesponse

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: Senior Vice President Exact Legal Title or Name of Respondent: Baldwin Wallace University Name: Richard L. Fletcher Phone: 4408262325