

(REFERENCE COPY - Not for submission)

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

File Number: 0000064070 Submit Date: 2018-12-10 FRN: 0002944114

Purpose: Noncommercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

12/10/2018 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0002944114	Ashland University

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
401 College Avenue 401 College Avenue	Ashland	ОН	44805	+1 (419) 289- 5137	news@wrdlfm.

2. Contact Representative

Name	Organization	
John Skrada	Journalism and Digital Media at Ashland University	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
401 College Avenue - CFA 215	Ashland	ОН	44805	+1 (419) 289-5137	news@wrdlfm.com

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 boa indirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No	

(b) Provide the following information about this report:	the following information about this report:	
Purpose	Report filed by Permittee in conjunction with Permittee's application for a station license	

"As of" date	12/10/2018
	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) /Permittees(s) and Station(s) /Permit(s)

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

Licensee/Permittee Name	FRN	
Ashland University	0002944114	

Fac. ID No.	Call Sign	City	State	Service
2933	WRDL	ASHLAND	ОН	FM

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee/Permittee Respondents 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/Permittee 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) or Permittee(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) or Permittee(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	0002944114	0002944114		
Entity Name	Ashland University	Ashland University		
Address	PO Box			
	Street 1	401 College Avenue		
	Street 2	401 College Avenue		
	City	Ashland		
		'		

	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	44805	
	Country (if non-U.S. address)	United States	
Listing Type	Listing Type Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt 0.0% Plus)		
Does interest holder have a that do not appear on this r	n attributable interest in one o	r more broadcast stations	No
	at any interests, including equi is filing are non-attributable. in 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)?	No
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.	

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: General Manager Exact Legal Title or Name of Respondent: General Manager Name: Derek Wood Phone: 4192895137