



(REFERENCE COPY - Not for submission)

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

File Number: **0000168070** | Submit Date: **2021-11-10** | FRN: **0005012729**  
Purpose: **Noncommercial Broadcast Stations Biennial Ownership Report** | Status: **Superceded** | Status Date:  
**07/06/2022** | Filing Status: **InActive**

Section I - General Information

1. Respondent

FRN		Entity Name			
0005012729		Ohio University			

  

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
9 S College Street	Athens	OH	45701	+1 (740) 593-1771	woub@woub.org

2. Contact Representative

Name		Organization			
Mark Brewer		WOUB Public Media			

  

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
9 S College Street	Athens	OH	45701	+1 (740) 593-1771	brewer@ohio.edu

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
Ohio University	0005012729

Fac. ID No.	Call Sign	City	State	Service
50140	WOUZ-FM	ZANESVILLE	OH	FM
50141	WOUC-TV	CAMBRIDGE	OH	DTV
50142	WOUC-FM	CAMBRIDGE	OH	FM
50143	WOUH-FM	CHILLICOTHE	OH	FM
50145	WOUB	ATHENS	OH	AM
50146	WOUL-FM	IRONTON	OH	FM
50147	WOUB-TV	ATHENS	OH	DTV
50149	WOUB-FM	ATHENS	OH	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	Public Broadcasting Service Membership Certification and Agreement (television)
Parties to contract or instrument	Public Broadcasting Service Ohio University/WOUB Public Media
Date of execution	06/2021
Date of expiration	06/2022
Agreement type (check all that apply)	Other <b>Agreement Type:</b> PBS Membership Agreement

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	0005012729	
Entity Name	Ohio University	
Address	PO Box	
	Street 1	9 S College Street
	Street 2	
	City	Athens
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	45701
	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	9990124017	
Name	Peggy Viehweger	
Address	PO Box	
	Street 1	747 Adams Road
	Street 2	
	City	Loveland
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	45140
	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	Chemical Co. Executive - retired	

By Whom Appointed or Elected	Governor	
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	16.7%
	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	9990124024	
Name	Diane Smullen	
Address	PO Box	
	Street 1	609 Oxford Street
	Street 2	
	City	Worthington
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	43085
	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	VP of Corporate Affairs, Cameron Mitchell Restaurants, LLC	
By Whom Appointed or Elected	Governor	
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	16.7%
	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
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Ownership Information		
FRN	9990124040	
Name	Cary Rodman Cooper	
Address	PO Box	
	Street 1	42 Exmoor
	Street 2	
	City	Toledo
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	43615
	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	Attorney	
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	16.7%
	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	9990124042	
Name	Janelle Coleman	
Address	PO Box	
	Street 1	7247 Poppy Hills Court
	Street 2	
	City	Blacklick

	<b>State ("NA" if non-U.S. address)</b>	OH
	<b>Zip/Postal Code</b>	43004
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Community Engagement and Diversity, Equity, Inclusion	
<b>By Whom Appointed or Elected</b>	Governor	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Female
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	Black or African American
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	16.7%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	0.0%
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

Ownership Information		
<b>FRN</b>	9990124046	
<b>Name</b>	Steve Casciani	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	8321 River Rock Lane
	<b>Street 2</b>	
	<b>City</b>	Delaware
	<b>State ("NA" if non-U.S. address)</b>	OH
	<b>Zip/Postal Code</b>	43015
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Venture Capitalist and Energy Entrepreneur	
<b>By Whom Appointed or Elected</b>	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	11.1%
	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	9990139306	
Name	Matthew Evans	
Address	PO Box	
	Street 1	2238 Yorkshire Road
	Street 2	
	City	Columbus
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	43221
	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, Boich Companies	
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	11.1%
	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	9990139307	
Name	Eileen Sheil	
Address	PO Box	
	Street 1	998 Gilpin Circle
	Street 2	
	City	Erie
	State ("NA" if non-U.S. address)	CO
	Zip/Postal Code	80516
	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	Corporate Communications, Cleveland Clinic	
By Whom Appointed or Elected	Governor	
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	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	9990139811	
Name	David Moore	
Address	PO Box	
	Street 1	6379 Gura Road
	Street 2	
	City	Athens
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	45701



	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Professor, Board Secretary, Ohio University	
By Whom Appointed or Elected	Board of Trustees	
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	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	9990144589	
Name	Ellen M. Gill-Franks	
Address	PO Box	
	Street 1	33 W. State Street
	Street 2	
	City	Athens
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	45701
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Student TrusteeMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Student, Ohio University	
By Whom Appointed or Elected	Governor	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female

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

<b>Ownership Information</b>		
<b>FRN</b>	9990144590	
<b>Name</b>	Lorrie L. Platt	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	10473 Storybook Dr.
	<b>Street 2</b>	
	<b>City</b>	Montgomery
	<b>State ("NA" if non-U.S. address)</b>	OH
	<b>Zip/Postal Code</b>	45242
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Business Communication	
<b>By Whom Appointed or Elected</b>	Governor	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Female
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	Asian, White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	16.7%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

<b>Ownership Information</b>	
<b>FRN</b>	9990144591

Name	Sarah Ladipo		
Address	PO Box		
	Street 1	363 Richland Ave.	
	Street 2	Apt. 270	
	City	Athens	
	State ("NA" if non-U.S. address)	OH	
	Zip/Postal Code	45701	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Student TrusteeMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Student, Ohio University		
By Whom Appointed or Elected	Governor		
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	0.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information		
FRN	9990144592	
Name	Jeff Laturell	
Address	PO Box	
	Street 1	6340 Inland Shores Dr.
	Street 2	
	City	Mentor
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	44060
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	

<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
<b>Principal Profession or Occupation</b>	VP of Finance and Treasurer		
<b>By Whom Appointed or Elected</b>	Alumni Association Representative		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%	
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No	

Ownership Information		
<b>FRN</b>	9990144593	
<b>Name</b>	Scott Borgemenke	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	8830 Birgham Ct N
	<b>Street 2</b>	
	<b>City</b>	Dublin
	<b>State ("NA" if non-U.S. address)</b>	OH
	<b>Zip/Postal Code</b>	43017
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	SVP for Advocacy and Communications	
<b>By Whom Appointed or Elected</b>	Governor	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Male
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values	<b>Voting</b>	16.7%

from 0.0 to 100.0)	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		No

Ownership Information		
FRN	9990145053	
Name	Misty Crosby	
Address	PO Box	
	Street 1	1400 Pike St.
	Street 2	
	City	Marietta
	State ("NA" if non-U.S. address)	OH
	Zip/Postal Code	45750
	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	Executive Director of an 8-county Council of Governments	
By Whom Appointed or Elected	Board of Trustees	
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	0.0%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990145054	
Name	Anna Harvey	
Address	PO Box	
	Street 1	7 Washington Square North, 6A

	Street 2	
	City	New York
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	10003
	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	Professor of Politics, New York University and President, Social Science Research Council	
By Whom Appointed or Elected	Board of Trustees	
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	0.0%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
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
(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.		No

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.**

Ohio University is the direct licensee of the stations. There is no 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 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: <b>General Manager</b> Exact Legal Title or Name of Respondent: <b>Ohio University</b> Name: <b>Mark Brewer</b> Phone: <b>7405934785</b>  11/10/2021