

(REFERENCE COPY - Not for submission)

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

File Number: **0000170081** Submit Date: **2021-11-22** FRN: **0023199839** 

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/22/2021

Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN	Entity Name
0023199839	Stu-Comm, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2250 Old Ivy Road Suite 2	Charlotteville	VA	22903	+1 (434) 971- 4096	mkeefe@wnrn. org

# 2. Contact Representative

Name	Organization
David D. Oxenford	Wilkinson Barker Knauer, LLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street, NW Suite 800N	Washington	DC	20036	+1 (202) 783- 4141	doxenford@wbklaw. com

## 3. Application Filing Fee

Not Applicable

## 4. Control of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	its 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
Stu-Comm, Inc.	0023199839

Fac. ID No.	Call Sign	City	State	Service
8438	WHAN	ASHLAND	VA	AM
8710	WNRN	CHARLOTTESVILLE	VA	FM
67683	WFTH	RICHMOND	VA	AM
74157	WNRS-FM	SWEET BRIAR	VA	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	Articles of Incorporation	
Parties to contract or instrument	State of Virginia	
Date of execution	09/1993	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation	

Document Information		
Description of contract or instrument	Constitution and Bylaws	
Parties to contract or instrument	Stu-Comm, Inc.	
Date of execution	02/1994	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Constitution and Bylaws	

### 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	0023199839			
Entity Name	Stu-Comm, Inc.			
Address	PO Box			
	Street 1	2250 Old Ivy Road		
	Street 2	Suite 2		
	City	Charlotteville		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	22903		
	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	9990121667	9990121667		
Name	Laura Galgano	Laura Galgano		
Address	PO Box			
	Street 1	512 W. Main Street		
	Street 2			
	City	Charlottesville		
	State ("NA" if non-U.S. address)	VA		
	Zip/Postal Code	22901		
	Country (if non-U.S. address)	United States		

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Small Business Owner	Small Business Owner	
By Whom Appointed or Elected	Board Members		
Citizenship, Gender, Citizenship US			
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Equity	9.0%	
	Total assets (Equity Debt Plus)		
	Does interest holder have an attributable interest in one or more broadcast stations  No that do not appear on this report?		

Ownership Information		
FRN	9990121669	
Name	Aaron Mahler	
Address	PO Box	
	Street 1	c/o Sweet Briar College
	Street 2	134 Chapel Road
	City	Sweet Briar
	State ("NA" if non-U.S. address)	VA
	Zip/Postal Code 24595	
	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	Director of Network Services at Sweet Briar College	
By Whom Appointed or Elected	Board Members	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%	
	Equity	9.0%	
	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	9990136991		
Name	Sarah Margaret Amirah Omar Abubaker		
Address	РО Вох		
	Street 1	5212 Devonshire Road	
	Street 2		
	City	Richmond	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	23225	
	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	Director, Advancement Operations, Univ. of Richmond		
By Whom Appointed or Elected	Board Members		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Equity	9.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one or	or more broadcast stations	No

Ownership Information		
FRN	9990136992	
Name	Martin Andrew Conn	
Address	PO Box	
	Street 1 3511 Old Gun Road East	

	Street 2		
	City	Midlothian	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	23113	
	Country (if non-U.S. 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	Attorney		
By Whom Appointed or Elected	Board Members		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Equity	9.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990136993	
Name	Edgar J.T. Perrow, Jr.	
Address	PO Box	
	Street 1	3620 Manton Drive
	Street 2	
	City  Lynchburg  State ("NA" if non-U.S. VA address)	
	Zip/Postal Code	24503
	Country (if non-U.S. 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	Consulting Engineer	

By Whom Appointed or Elected	Board Members	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	9.0%
(enter percentage values from 0.0 to 100.0)	Equity	9.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or more broadcast stations  No that do not appear on this report?		

Ownership Information		
FRN	9990145512	
Name	James Shannon	
Address	PO Box	
	Street 1	5501 Matoaka Road
	Street 2	
	City	Richmond
	State ("NA" if non-U.S. address)	VA
	Zip/Postal Code	23226
	Country (if non-U.S. 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	Investment Advisor	
By Whom Appointed or Elected	Board Members	
Citizenship, Gender,	Citizenship	us
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	9.0%
(enter percentage values from 0.0 to 100.0)	Equity	9.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have a	n attributable interest in one or	r more broadcast stations No

Ownership Information			
FRN	9990145773		
Name	Greg Brown		
Address	РО Вох		
	Street 1	9617 Hatton Ferry Road	
	Street 2		
	City	Scottsville	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	24590	
	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	Defense Intelligence Analyst		
By Whom Appointed or Elected	Board Members	Board Members	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.0%	
(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			
9990145775			
Kayti Sewell			
PO Box Street 1 285 Turkey Ridge Road Street 2			
		City Charlottesville	
		State ("NA" if non-U.S. address)	VA
	Kayti Sewell  PO Box  Street 1  Street 2  City  State ("NA" if non-U.S.		

	Zip/Postal Code	22901	
	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	Director of Advancement	Director of Advancement	
By Whom Appointed or Elected	Board Members		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.0%	
(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 hat do not appear on this report?		

Ownership Information			
FRN	9990145776	9990145776	
Name	Lorna Wyckoff		
Address	PO Box		
	Street 1	716 Westover Road	
	Street 2		
	City	Richmond	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	23220	
	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	Consultant		
By Whom Appointed or Elected	Board Members		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	

Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%	
	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	9990145778		
Name	Dan Krasnegor		
Address	PO Box		
	Street 1	801 Park St.	
	Street 2		
	City	Charlottesville	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	22902	
	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	Board Members		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one oreport?	or more broadcast stations No	

FRN 9990145779	Ownership Information	
		FRN
Name Rebecca Frye		Name

	PO Box		
	Street 1	209 Rowland Dr.	
	Street 2		
	City	Lynchburg	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code	24503	
	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	Product Manager		
By Whom Appointed or Elected	Board Members		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No
	at any interests, including equi	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.	

# 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.

### **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: President of the Board Exact Legal Title or Name of Respondent: Stu Comm, Inc. Name: Martin Conn Phone: 4349714096