

EXHIBIT E

The assignee is a state agency organized under the laws of the State of Mississippi for the purpose of providing public broadcast service to the state and is not directly controlled by any other entity. Attached is a copy of the assignee's most recent Ownership Report filed in connection with its public broadcast stations, which sets forth the members of its governing board.

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0084 (June 2002)	FOR FCC USE ONLY
FCC 323-E		
Ownership Report For Noncommercial Educational Broadcast Station		FOR COMMISSION USE ONLY FILE NO. BOA - 20150130AAC
Read INSTRUCTIONS Before Filling Out Form		

Section I - General

1.	Legal Name of the Licensee/Permittee MISSISSIPPI AUTHORITY FOR EDUCATIONAL TELEVISION		
	Mailing Address 3825 RIDGEWOOD ROAD		
	City JACKSON	State or Country (if foreign address) MS	ZIP Code 39211 -
	Telephone Number (include area code) 6014326565	E-Mail Address (if available) RONNIE.AGNEW@MPBONLINE.ORG	
	FCC Registration Number: 0001739002	Call Sign WMPN-TV	Facility ID Number 43168
2.	Contact Representative (if other than Licensee/Permittee) MALCOLM G. STEVENSON		Firm or Company Name SCHWARTZ, WOODS & MILLER
	Mailing Address 1233 20TH STREET, NW SUITE 610		
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20036 - 7322
	Telephone Number (include area code) 2028331700	E-Mail Address (if available) STEVENSON@SWMLAW.COM	
3.	Name of entity, if other than licensee or permittee, for which report is filed		
	Mailing Address		
	City	State or Country (if foreign address)	ZIP Code -
	Telephone Number (include area code)	E-Mail Address (if available)	

Section II - Ownership Information

4.

All of the information furnished in this Report is accurate as of 01/30/2015 *(Date must comply with 47 C.F.R. Section 73.3615(d), i.e., information must be current within 60 days of filing of this report, when 4(a) below is checked.)*

This Report is filed for *(check one)*

- a. Biennial
- b. Transfer of Control or Assignment of License/Permit
- c. Other
- d. Amendment to pending application

for the following stations:

[Enter Station Information]

Station List

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMPN-TV	43168	JACKSON MS	TV

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAB-TV	43192	ACKERMAN MS	TV

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAB-FM	43212	ACKERMAN MS	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAE-TV	43170	BOONEVILLE MS	TV

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAE-FM	43190	BOONEVILLE MS	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAH-TV	43197	BILOXI MS	TV

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAH-FM	43198	BILOXI MS	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAO-TV	43176	GREENWOOD MS	TV

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAO-FM	43177	GREENWOOD MS	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAU-TV	43184	BUDE MS	TV

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAU-FM	43185	BUDE MS	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAV-TV	43193	OXFORD MS	TV

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAV-FM	43213	OXFORD MS	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAW-TV	43169	MERIDIAN MS	TV

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMAW-FM	43188	MERIDIAN MS	FM

Call Letters	Facility ID Number	Location (City/State)	Class of service
WMPN-FM	46682	JACKSON MS	FM

5. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

Contracts/Instruments Information

List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject shall respond.)

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)
MEMBERSHIP CERTIFICATION		07/29/2014	

	PUBLIC BROADCASTING SERVICE	
--	-----------------------------------	--

6. Is the governing board directly or indirectly under the control of another entity? Yes No
 If Yes, is a separate FCC Form 323-E submitted for such entity? Yes No

7. List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages, if necessary.

[Enter Owner Information]

Owner Information

List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages if necessary.
(Read carefully - The numbered items below refer to line numbers in the following table.)

- a. Name and address of officer, member of governing board, and holders of 1% or more ownership interest (if other than individual also show name, address and citizenship of natural person authorized to vote the interest). List officers first, then board members, and thereafter, holders of 1% or more ownership interest, if any.
- b. Citizenship.
- c. Office held.
- d. Percent of interest held.
- e. Principal profession or occupation.
- f. By whom appointed or elected.
- g. Existing interests in any other broadcast station, including the nature and size of such interests.

a. Name and Address.	PERRY SANSING, PO BOX 1848, UNIVERSITY, MS 38677
b. Citizenship.	US
c. Office held.	CHAIR
d. Percent of interest held.	0.00
e. Principal profession or occupation.	ATTORNEY
f. By whom appointed or elected.	GOVERNOR
g. Existing interests	NONE

a. Name and Address.	DAVID ALLEN, 917 SAVANNAH PLACE, GULFPORT, MS 39507
b. Citizenship.	US
c. Office held.	VICE CHAIR

d. Percent of interest held.	0.00
e. Principal profession or occupation.	ELEMENTARY SCHOOL PRINCIPAL
f. By whom appointed or elected.	GOVERNOR
g. Existing interests	NONE

a. Name and Address.	RONNIE AGNEW, 3825 RIDGEWOOD ROAD, JACKSON, MS 39211
b. Citizenship.	US
c. Office held.	EXECUTIVE DIRECTOR, MAET
d. Percent of interest held.	0.00
e. Principal profession or occupation.	EXECUTIVE DIRECTOR, MAET
f. By whom appointed or elected.	BOARD OF DIRECTORS
g. Existing interests	NONE

a. Name and Address.	DR. ERIC CLARK, 3825 RIDGEWOOD ROAD, SUITE 630, JACKSON, MS 39211
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	0.00
e. Principal profession or occupation.	EXEC. DIRECTOR, MISSISSIPPI COMMUNITY COLLEGE BOARD
f. By whom appointed or elected.	MCCB APPOINTEE
g. Existing interests	NONE

a. Name and Address.	ALAN PERRY, PO BOX 22608, JACKSON, MS 39225
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	0.00
e. Principal profession or occupation.	ATTORNEY

f. By whom appointed or elected.	IHL BOARD APPOINTEE
g. Existing interests	NONE

a. Name and Address.	BOB SAWYER, PO BOX 1150, GULFPORT, MS 39502
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	0.00
e. Principal profession or occupation.	OWNER, TRINITY INVESTMENTS
f. By whom appointed or elected.	GOVERNOR
g. Existing interests	NONE

a. Name and Address.	PETE SMITH, 359 N. WEST STREET, SUITE 365, JACKSON, MS 39201
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	0.00
e. Principal profession or occupation.	DIRECTOR OF COMMUNICATIONS, MISS. DEPARTMENT OF EDUCATION
f. By whom appointed or elected.	STATE SUPT. OF PUBLIC EDUCATION, EX OFFICIO
g. Existing interests	NONE

a. Name and Address.	LESTER HAYES, PO BOX 220, JACKSON, MS 39205
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	0.00
e. Principal profession or occupation.	SPECIAL ASSISTANT ATTORNEY GENERAL
f. By whom appointed or elected.	BOARD OF DIRECTORS
g. Existing interests	NONE

SECTION III - CERTIFICATION

I certify that I am EXECUTIVE DIRECTOR

(Official Title)

of MISSISSIPPI AUTHORITY FOR EDUCATIONAL TELEVISION

(Exact legal title or name of respondent)

and 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.

(Date of certification must be within 60 days of the date shown in Question 4, Section II and in no event prior to that date.)

Signature RONNIE AGNEW	Date 01/30/2015
Telephone Number of Respondent (Include area code) 6014326565	

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).

Exhibits
