

FRN

0004247938

Not Applicable

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

File Number:0000042228Submit Date:2018-02-15FRN:0004247938Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:02/15/2018Filing Status:Active

Section I - General Information

1. Respondent

University Corporation at Monterey Bay

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
100 Campus Center Building 201	Seaside	CA	93955	+1 (831) 582- 5298	mbenedek@csumb. edu

2. Contact Representative

Name	Organization
John Crigler	Garvey Schubert Barer

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac St. NW 2nd Floor	Washington	DC	20007	+1 (202) 965-7880	JCrigler@gsblaw.com

3. Application Filing Fee

4. Control	of
Responder	nt

(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			
University Corporation at Monterey Bay 0004247938				
Fac. ID No.	Call Sign	City	State	Service
43591	KAZU	PACIFIC GROVE	СА	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 California			
Date of execution	07/1994			
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	By-Laws	
Parties to contract or instrument	University Corporation at Monterey Bay	
Date of execution	07/1994	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: By-Laws	

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	Ownership Information				
FRN	0004247938				
Entity Name	University Corporation at Monterey Bay				
Address	PO Box				
	Street 1	100 Campus Center			
	Street 2	Building 201			
	City	Seaside			
	State ("NA" if non-U.S. address)	CA			
	Zip/Postal Code	93955			
	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

Ownership mormation				
FRN	9990122053			
Name	Patsy Tinsley McGill			
Address	PO Box			
	Street 1	495 Ranchitos Del Sol		
	Street 2			
	City	Aptos		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	95003		
	Country (if non-U.S. United States address) United States			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - DirectorMember of Governing Board (or other governing entity)			

Principal Profession or Occupation	Professor			
By Whom Appointed or Elected	Board			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	11.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations No				

Ownership Information

that do not appear on this report?

Ownership Information		
FRN	9990122054	
Name	Barbara Zappas	
Address	PO Box	
	Street 1	100 Campus Center
	Street 2	
	City	Seaside
	State ("NA" if non-U.S. address)	CA
	Zip/Postal Code	93955
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - DirectorMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	University Vice President for Development	
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	11.1%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%

	Total assets (Equity Debt Plus)		
Does interest holder have ar that do not appear on this re	attributable interest in one or port?	more broadcast stations	No

Ownership Information			
FRN	9990122055		
Name	Robert C. Taylor, Jr.		
Address	PO Box		
	Street 1	951 Blanco Circle	
	Street 2	Ste A	
	City	Salinas	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	93901	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - DirectorMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	President of the University		
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	11.1%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this	an attributable interest in one c report?	or more broadcast stations No	

Ownership Information		
FRN	9990122056	
Name	Eduardo M. Ochoa	
Address	PO Box	
	Street 1	1716 Eichelberger Court
	Street 2	

	City	Marina	
	State ("NA" if non-U.S. address)	СА	
	Zip/Postal Code	93933	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Board Preside	Officer, Other - Board PresidentMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	University Administrator		
By Whom Appointed or Elected	CSU Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	11.1%	
(enter percentage values from 0.0 to 100.0)		0.0%	
	Equity	0.0%	

Ownership Information		
FRN	9990122057	
Name	Chris Carpenter	
Address	PO Box	
	Street 1	412 Kipling Street
	Street 2	
	City	Salinas
	State ("NA" if non-U.S. address)	CA
	Zip/Postal Code	93901
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	,
Positional Interests (check all that apply)	Other - DirectorMember of Gov	verning Board (or other governing entity)
Principal Profession or Occupation	Operations Manager	

By Whom Appointed or Elected	Board		
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)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	9990122058		
Name	Kevin R. Saunders		
Address	PO Box		
	Street 1	100 Campus Center	
	Street 2		
	City	Seaside	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	93955	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - DirectorMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	University Administrator	University Administrator	
By Whom Appointed or Elected	President of the University		
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	Voting	11.1%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

that do not appear on this report?

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

No

FRN	9990122059		
Name	Ronnie Higgs		
Address	PO Box		
	Street 1	28065 Robinson Canyon Road	
	Street 2		
	City	Carmel	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	93923	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - DirectorMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Vice President of Student Affairs		
By Whom Appointed or Elected	President of the University		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one or	more broadcast stations No	

Ownership Information

FRN	9990122060	
Name	Nathaniel Bond	
Address	PO Box	
	Street 1	400 8th St.
	Street 2	Apt. 317A
	City	Marina

	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	93933		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Student RepresentativeMember of Governing Board (or other governing entity)			
Principal Profession or Occupation	Executive Vice President, Associated Students			
By Whom Appointed or Elected	President of the University			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages	Voting	11.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	0.0%	
	Total assets (Equity Debt Plus)			

RN	9990122061	
Name	Bonnie D. Irwin	
Address	PO Box	
	Street 1	1728 Eichelberger Court
	Street 2	
	City	Marina
	State ("NA" if non-U.S. address)	CA
	Zip/Postal Code	93933
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - SecretaryMe	ember of Governing Board (or other governing entity)
Principal Profession or Occupation	Provost and Vice President	for Academic Affairs
By Whom Appointed or Elected	Board	

Ethnicity, and Race	Citizenship	US	
Information (Natural Persons Only)	Gender	Female	
	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)		
Does interest holder have an attributable interest in one or more broadcast stations			No
Does interest holder have that do not appear on this			
that do not appear on this (b) Respondent certifies th	report? nat any interests, including equ his filing are non-attributable.		Yes
that do not appear on this (b) Respondent certifies th interests, not reported in t If "No," submit as an exhibit	report? hat any interests, including equ his filing are non-attributable. an explanation. an attribution exemption for ar	ity, financial, or voting	

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.

Licensee has 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 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: Executive Director Exact Legal Title or Name of Respondent: University Corporation at Monterey Bay Name: Kevin Saunders Phone: 8315823397 02/15/2018