

(REFERENCE COPY - Not for submission)

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

File Number: 0000098124 | Submit Date: 2020-01-17 | FRN: 0002487056

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/17/2020

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0002487056	Board of Governors of Missouri State University

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
901 S. National Avenue	Springfield	МО	65897	+1 (417) 836-3511	rachelknight@missouristate. edu

2. Contact Representative

Name	Organization
Derek Teslik	Gray Miller Persh LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2233 Wisconsin Ave NW Ste 226	Washington	DC	20007	+1 (202) 559- 7489	dteslik@graymillerpersh.

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information	on 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:	
Purpose	Biennial
"As of" date	10/01/2019
	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
Board of Governors of Missouri State University	0002487056

Fac. ID No.	Call Sign	City	State	Service
4210	KSMU	SPRINGFIELD	МО	FM
51101	KOZJ	JOPLIN	MO	DTV
51102	KOZK	SPRINGFIELD	MO	DTV
61519	KSMS-FM	POINT LOOKOUT	MO	FM
94057	KSMW	WEST PLAINS	МО	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	Annual Membership Certification of Good Standing
Parties to contract or instrument	Public Broadcasting Service
Date of execution	05/2001
Date of expiration	No expiration date
Agreement type (check all that apply)	Network Affiliation 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	0002487056

Entity Name	Board of Governors of Missou	uri State University
Address	РО Вох	
	Street 1	901 S. National Avenue
	Street 2	
	City	Springfield
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	65897
	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 that do not appear on this	an attributable interest in one o	or more broadcast stations No

FRN	9990120339		
Name	Gregory Spears		
Address	PO Box		
	Street 1	16100 S. Smart Road	
	Street 2		
	City	Pleasant Hill	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	64080	
	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	Financial Services		
By Whom Appointed or Elected	Governor of Missouri		
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	12.5%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	9990120340		
Name	Amelia Counts		
Address	РО Вох		
	Street 1	318 Panhurst Court	
	Street 2		
	City	Ballwin	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	63021	
	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	Account Executive - Sales		
By Whom Appointed or Elected	Governor of Missouri		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race Black or African American		
Interest Percentages	Voting	12.5%	
(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 that do not appear on this report?		

Ownership Information		
FRN	9990120342	
Name	Carol Silvey	
Address	PO Box	
	Street 1	1010 E. US Highway 60
	Street 2	
	City	West Plains
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	65775
	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	None	
By Whom Appointed or Elected	Governor of Missouri	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Female
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	12.5%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have a that do not appear on this i	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	9990120346		
Name	James Baker		
Address	PO Box		
	Street 1	6110 Hackamore Circle	
	Street 2 City Ozark		
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code 65721		

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	University Vice President	University Vice President	
By Whom Appointed or Elected	Board of Governors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(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 that do not appear on this report?		

Ownership Information		
FRN	9990120347	
Name	James Seal	
Address	РО Вох	
	Street 1	2100 Central Street Ste. 11E
	Street 2	
	City	Kansas City
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	64108
	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	Vice President and General Counsel	
By Whom Appointed or Elected	Governor of Missouri	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural Gender Male		Male
Persons Only)		

	Ethnicity	Not Hispanic or Latino	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Race	White	
	Voting	12.5%	
	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	9990120349	9990120349	
Name	Gabriel Gore		
Address	PO Box		
	Street 1	5066 Westminster Place	
	Street 2		
	City	St. Louis	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	63108	
	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	Governor of Missouri		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Race Black or African American	
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No	

Ownership Information	
FRN	9990120350

Name	Craig Frazier	Craig Frazier	
Address	PO Box		
	Street 1	704 S. Hickory Terrace	
	Street 2		
	City	Springfield	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	65809	
	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	Retired Healthcare Management		
By Whom Appointed or Elected	Governor of Missouri		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	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	9990120351		
Name	Clifton Smart		
Address	PO Box		
	Street 1	Street 1 1213 S. Weller Avenue	
	Street 2		
	City Springfield		
	State ("NA" if non-U.S. MO address)		
	Zip/Postal Code 65804		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		

Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	University President		
By Whom Appointed or Elected	Board of Governors		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(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 that do not appear on this report?		

Ownership Information		
FRN	9990120353	
Name	Carrie Tergin	
Address	РО Вох	
	Street 1	1003 Emily Lane
	Street 2	
	City	Jefferson City
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	65109
	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	Business Owner	
By Whom Appointed or Elected	Governor of Missouri	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting 12.5%	
(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 that do not appear on this report?		No	

Ownership Information	_		
FRN	9990136740		
Name	William Miller		
Address	PO Box		
	Street 1	3126 E. Valley Water Mill Road #5902	
	Street 2		
	City	Springfield	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	65803	
	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	Student, Bank Teller		
By Whom Appointed or Elected	Governor of Missouri		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	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	9990136742	
Name	Beverly Miller Keltner	
Address PO Box		
	Street 1	3980 E. Eaglescliffe

	Street 2		
	City	Springfield	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	65809	
	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	Retired Educator		
By Whom Appointed or Elected	Governor of Missouri		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations	No
	at any interests, including equi nis filing are non-attributable. an 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.	

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.

Broadcast operation is licensed to and operated by the Board of Governors of Missouri State University, a public, state institution of education. There is no parent entity.

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: VP - Research, Ec. Development, and Intl Programs Exact Legal Title or Name of Respondent: Board of Governors of Missouri State University Name: James P. Baker Phone: 4178363511 01/17/2020