

(REFERENCE COPY - Not for submission)

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

File Number: **0000099348** Submit Date: **2020-01-22** FRN: **0004247938**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/22/2020

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0004247938	University Corporation at Monterey Bay

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

ı	Name	Organization
	Melodie A. Virtue	Foster Garvey PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac Street NW Suite 200	Washington	DC	20007	+1 (202) 965- 7880	melodie.virtue@foster. com

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 boaindirectly 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
University Corporation at Monterey Bay	0004247938

Fac. ID No.	Call Sign	City	State	Service
43591	KAZU	PACIFIC GROVE	CA	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				
FRN	0004247938	0004247938		
Entity Name	University Corporation at Mon	University Corporation at Monterey Bay		
Address	РО Вох			
	Street 1	100 Campus Center Building	201	
	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	Respondent			
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal r	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 a that do not appear on this r	n attributable interest in one o eport?	r more broadcast stations	No	

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 an attributable interest in one or more broadcast stations No that do not appear on this report?		

Ownership Information				
FRN	9990122055			
Name	Robert C. Taylor, Jr.	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	Voting	11.1%		
(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 re	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information			
FRN	9990122056		
Name	Eduardo M. Ochoa		
Address	РО Вох		
	Street 1	1716 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 - 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)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this r	in attributable interest in one o eport?	r more broadcast stations No	

Ownership Information			
FRN	9990122058	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 Go	overning Board (or other govern	ing 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	Voting	11.1%	
(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	9990122059		
Name	Ronnie Higgs		
Address	PO Box		
	Street 1	28065 Robinson Canyon Road	
	Street 2		
	City Carmel State ("NA" if non-U.S. CA address) 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, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	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%
	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	9990139467		
Name	Scott Fausti		
Address	PO Box		
	Street 1	427 Combs 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)	Other - DirectorMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	College Professor		
By Whom Appointed or Elected	Ex-Officio		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
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)	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	9990139468			
Name	Mary Jo Zenk			
Address	РО Вох			
	Street 1	1508 Devers 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)	Other - DirectorMember of Governing Board (or other governing entity)			
Principal Profession or Occupation	Administration			
By Whom Appointed or Elected	Board	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)	0.0%		
Does interest holder have a that do not appear on this	an attributable interest in one o	or more broadcast stations No		

Ownership Information			
FRN	9990139470	9990139470	
Name	Jaspreet Bhardwaj		
Address	PO Box		
	Street 1	P.O. Box 228	
	Street 2		
	City	Gonzales	

	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	93906		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Student DirectorMem	ber of Governing Board (or othe	r governing entity)	
Principal Profession or Occupation	Vice President of Financial A	Vice President of Financial Affairs for Associated Students		
By Whom Appointed or Elected	Board			
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US		
	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Asian		
Interest Percentages	Voting	11.1%		
(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	

Ownership Information				
FRN	9990139471			
Name	Fran Horvath			
Address	PO Box			
	Street 1	1113 Melton Place		
	Street 2			
	City	Pacific Grove		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	93950		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - SecretaryMember of Governing Board (or other governing entity)			
Principal Profession or Occupation	Interim Provost, Vice President for Academic Affairs			
By Whom Appointed or Elected	Board			

• • •	at any interests, including equi	ty, financial, or voting	Yes	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	
	Total assets (Equity Debt Plus)	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
Information (Natural Persons Only) Interest Percentages	Voting	11.1%		
	Race	White		
	Ethnicity	Not Hispanic or Latino		
	Gender	Female		
Citizenship, Gender, Ethnicity, and Race	Citizenship	US		

(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.

Licensee does not have a 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