

(REFERENCE COPY - Not for submission)

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

File Number: 0000142350 Submit Date: 2021-03-31 FRN: 0009660564

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 03/31/2021

Filing Status: Active

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

#### 1. Respondent

FRN	Entity Name	
0025845876	Brazos Educational Radio	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 78	College Station	TX	77841- 0078	+1 (979) 779- 5367	keos@keos. org

### 2. Contact Representative

Name	Organization
Michael L. Parr	Brazos Educational Radio

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 78	College Station	TX	77840-0078	+1 (979) 779-5367	keos@keos.org

## 3. Application Filing Fee

Not Applicable

## 4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	elationship to stations/permits Licensee			
Is the Respondent's governing boa indirectly under the control of ano	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):

icensee/Permittee Name	FRN
-ICCHSCC/FCHIIILCC Name	EDIN.

Brazos Educational Radio	0025845876

Fac. ID No.	Call Sign	City	State	Service
6670	KEOS	COLLEGE STATION	TX	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.

Not Applicable.

### 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	0025845876		
Entity Name	Brazos Educational Radio		
Address	РО Вох	78	
	Street 1		
	Street 2		
	City College Station		
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77841-0078	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent	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 (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	No		

Ownership Information				
FRN	9990131129	9990131129		
Name	Krista May	Krista May		
Address	РО Вох	78		
	Street 1	2620 Cavitt Avenue		
	Street 2			
	City	Bryan		
	State ("NA" if non-U.S. address)	TX		
	Zip/Postal Code	77801-2111		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer			
Principal Profession or Occupation	Associate Editor			
By Whom Appointed or Elected	Corporate Board			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	20.0%		
	Total assets (Equity Debt Plus)	20.0%		
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations	No	

Ownership Information		
FRN	9990131165	
Name	John Bondurant	
Address	РО Вох	

	Street 1	Street 1 4413 Rocky Meadows Drive	
	Street 2		
	City	College Station	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77845-1911	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Archivist		
By Whom Appointed or Elected	Corporate Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	20.0%	
	Total assets (Equity Debt Plus)	20.0%	
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990131178	
Name	Matthew Bachmeyer	
Address	PO Box	
	Street 1	2307 Auburn Court
	Street 2	
	City	College Station
	State ("NA" if non-U.S. address)	TX
	Zip/Postal Code	77840-4603
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	

Principal Profession or Occupation	Self Employed	
By Whom Appointed or Elected	Corporate Board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	20.0%
(enter percentage values from 0.0 to 100.0)	Equity	20.0%
	Total assets (Equity Debt Plus)	20.0%
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	9990143314	9990143314	
Name	Guy Milford		
Address	PO Box		
	Street 1	4704 Scrimshaw Lane	
	Street 2		
	City	College Station	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77845	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Retired		
By Whom Appointed or Elected	Corporate Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	20.0%	

	Total assets (Equity Debt Plus)	20.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

FRN	9990143318		
Name	Cara Wallis		
Address	PO Box		
	Street 1	2405 Burton Dr	
	Street 2		
	City	Bryan	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77802-2304	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Associate Professor		
By Whom Appointed or Elected	Corporate Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	20.0%	
	Total assets (Equity Debt Plus)	20.0%	
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

interests, not reported in this filing are non-attributable.

If "No," submit as an exhibit an explanation.

(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.

Brazos Educational Radio 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: Chief Engineer Exact Legal Title or Name of Respondent: Lance Parr Name: Michael Lance Parr Phone: 9798203468