(REFERENCE COPY - Not for submission)

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

File Number: 0000043289 Submit Date: 2018-02-23 $_{\text {20 }}$ FRN: 0001774793<br>Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received $^{\text {Status Date: 02/23/2018 }}$ Filing Status: Active

## Section I-General Information

| 1. Respondent | FRN Entity Name |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 0001774793 |  | Murray State University |  |  |  |  |
|  | Street <br> Address | City (and Country if non U.S. address) |  | State ("NA" if non-U.S. address) | Zip <br> Code | Phone | Email |
|  | $2018$ <br> University Station | Murray |  | KY | 42071 | $\begin{aligned} & +1(270) 809- \\ & 4359 \end{aligned}$ | clampe@murraystate. edu |

2. Contact Representative

## 3. Application

 Filing Fee4. Control of Respondent

| Name | Organization |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Chad Lampe | WKMS-FM, Murray State University |  |  |  |  |
| Street <br> Address | City (and Country if non U.S. address) | State | Zip <br> Code | Phone | Email |
| $2018$ <br> University Station | Murray | KY | 42071 | $\begin{aligned} & +1(270) 809- \\ & 4745 \end{aligned}$ | clampe@murraystate. edu |

Not Applicable
(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 No indirectly under the control of another entity?
(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 |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Murray State University |  |  | 0001774793 |  |
| Fac. ID No. | Call Sign | City | State | Service |
| 47080 | WKMS-FM | MURRAY | KY | FM |
| 81313 | WKMD | MADISONVILLE | KY | FM |
| 174018 | WKMT | FULTON | KY | FM |

## Section II - Biennial Ownership Information

1. 47 C.F.R.

Section 73.3613 Documents

## 2. Ownership Interests

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.
(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.

| Frnership Information | 0001774793 |  |
| :--- | :--- | :--- |
| Entity Name | Murray State University |  |
| Address | PO Box |  |
|  | Street 1 | 2018 University Station |
| Street 2 | Murray |  |
|  | City | KY |
|  | State ("NA" if non-U.S. <br> address) | Uner\| |
|  | Zip/Postal Code | United States |
|  | Country (if non-U.S. <br> address) |  |


| Listing Type | Respondent |  |
| :--- | :--- | :--- |
| Positional Interests <br> (check all that apply) | Respondent |  |
| Tribal Nation or Tribal <br> Entity | Interest holder is not a Tribal nation or Tribal entity |  |
| Interest Percentages <br> (enter percentage values <br> from 0.0 to 100.0) | Voting | Equity |


| Ownership Information |  |  |
| :--- | :--- | :--- |
| FRN | 9990119004 |  |
| Name | Palter G. Bumphus |  |
| Address | Por |  |
|  | Street 1 | Street 2 |

## Ownership Information

| FRN | 9990119005 |  |  |
| :---: | :---: | :---: | :---: |
| Name | Kathrine Farmer |  |  |
| Address | PO Box |  |  |
|  | Street 1 | 35 Arbor Drive |  |
|  | Street 2 |  |  |
|  | City | Murray |  |
|  | State ("NA" if non-U.S. address) | KY |  |
|  | Zip/Postal Code | 42071 |  |
|  | 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 | Librarian, Associate Professor |  |  |
| By Whom Appointed or Elected | Faculty of Murray State University |  |  |
| Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only) | Citizenship | US |  |
|  | Gender | Female |  |
|  | Ethnicity | Not Hispanic or Latino |  |
|  | Race | White |  |
| Interest Percentages (enter percentage values from 0.0 to 100.0) | Voting | 9.1\% |  |
|  | 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 |  |  |
| :--- | :--- | :--- |
| Name | Sharon L. Green |  |
| Address | PO Box |  |
|  | Street 1 | 129 Arbor Ridge Drive |
|  | Street 2 | Mayfield |
|  | City | KY |
|  | State ("NA" if non-U.S. <br> address) | 42006 |
|  | Zip/Postal Code |  |


|  | 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 Crime Victim's Advocate |  |  |
| By Whom Appointed or Elected | Governor of Kentucky |  |  |
| Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only) | Citizenship | US |  |
|  | Gender | Female |  |
|  | Ethnicity | Not Hispanic or Latino |  |
|  | Race | White |  |
| Interest Percentages (enter percentage values from 0.0 to 100.0) | Voting | 9.1\% |  |
|  | 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 | 9990119007 |  |
| Name | Phil Schooley |  |
| Address | PO Box |  |
|  | Street 1 | 504 Stone Ridge Lane |
|  | Street 2 |  |
|  | City | Murray |
|  | State ("NA" if non-U.S. address) | KY |
|  | Zip/Postal Code | 42071 |
|  | 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 | Academic Advisor |  |
| By Whom Appointed or Elected | The Staff of Murray State University |  |
| Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only) | Citizenship | US |
|  | Gender | Male |


|  | Ethnicity | Not Hispanic or Latino |  |
| :--- | :--- | :--- | :--- |
|  | Race | White |  |
| Interest Percentages <br> (enter percentage values <br> from 0.0 to 100.0) | Voting | Equity | $9.1 \%$ |
|  | Total assets (Equity Debt <br> Plus) | $0.0 \%$ |  | | Does interest holder have an attributable interest in one or more broadcast stations |
| :--- |
| that do not appear on this report? |


| Ownership Information |  |  |  |
| :---: | :---: | :---: | :---: |
| FRN | 9990119008 |  |  |
| Name | Lisa Rudolph |  |  |
| Address | PO Box |  |  |
|  | Street 1 | 984 Tucker Garland Rd. |  |
|  | Street 2 |  |  |
|  | City | Kirksey |  |
|  | State ("NA" if non-U.S. address) | KY |  |
|  | Zip/Postal Code | 42054 |  |
|  | 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 | Co-Owner Rudolph Inc. |  |  |
| By Whom Appointed or Elected | Governor of Kentucky |  |  |
| Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only) | Citizenship | US |  |
|  | Gender | Female |  |
|  | Ethnicity | Not Hispanic or Latino |  |
|  | Race | White |  |
| Interest Percentages (enter percentage values from 0.0 to 100.0) | Voting | 9.1\% |  |
|  | Equity | 0.0\% |  |
|  | Total assets (Equity De Plus) |  |  |
| Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report? |  |  | No |

## Ownership Information

| Name | J. Daniel Kemp |  |  |
| :---: | :---: | :---: | :---: |
| Address | PO Box |  |  |
|  | Street 1 | 605 Deepwood Dr. |  |
|  | Street 2 |  |  |
|  | City | Hopkinsville |  |
|  | State ("NA" if non-U.S. address) | KY |  |
|  | Zip/Postal Code | 42240 |  |
|  | 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 | Attorney |  |  |
| By Whom Appointed or Elected | Governor of Kentucky |  |  |
| 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 | 9.1\% |  |
|  | 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 | 9990119031 |  |
| :--- | :--- | :--- |
| Name | Jerry P. Rhoads |  |
| Address | PO Box |  |
|  | Street 1 | 811 University Circle |
|  | Street 2 | Madisonville |
|  | City | KY |
|  | State ("NA" if non-U.S. <br> address) | Zip/Postal Code |
|  | Country (if non-U.S. <br> address) | United States |
| Listing Type | Other Interest Holder |  |


| Positional Interests <br> (check all that apply) | Member of Governing Board (or other governing entity) |  |
| :--- | :--- | :--- |
| Principal Profession or <br> Occupation | Attorney |  |
| By Whom Appointed or <br> Elected | Governor of Kentucky |  |
| Citizenship, Gender, <br> Ethnicity, and Race <br> Information (Natural <br> Persons Only) | Citizenship | Gender |
| Ethnicity | US |  |
|  | Race | Not Hispanic or Latino |
| Interest Percentages <br> (enter percentage values <br> from 0.0 to 100.0) | Voting | White |
| Equity | 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 | 9990119033 |  |
| Name | Susan Guess |  |
| Address | PO Box |  |
|  | Street 1 | 150 Rosebower Ch. Rd. |
|  | Street 2 |  |
|  | City | Paducah |
|  | State ("NA" if non-U.S. address) | KY |
|  | Zip/Postal Code | 42003 |
|  | 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 | Senior Vice President Marketing Director, Paducah Bank |  |
| By Whom Appointed or Elected | Governor of Kentucky |  |
| Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only) | Citizenship | US |
|  | Gender | Female |
|  | Ethnicity | Not Hispanic or Latino |
|  | Race | White |
| Interest Percentages (enter percentage values | Voting | 9.1\% |


| Equity | $0.0 \%$ |
| :--- | :--- |
| Total assets (Equity Debt <br> Plus) |  |

Does interest holder have an attributable interest in one or more broadcast stations

## Ownership Information

| FRN | 9990119035 |  |
| :---: | :---: | :---: |
| Name | Don I. Tharpe |  |
| Address | PO Box |  |
|  | Street 1 | 107 Windridge Drive |
|  | Street 2 |  |
|  | City | Nicholasville |
|  | State ("NA" if non-U.S. address) | KY |
|  | Zip/Postal Code | 40356 |
|  | 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 |  |
| By Whom Appointed or Elected | Governor of Kentucky |  |
| 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 (enter percentage values from 0.0 to 100.0) | Voting | 9.1\% |
|  | Equity | 0.0\% |
|  | Total assets (Equity De Plus) |  |

Does interest holder have an attributable interest in one or more broadcast stations

## that do not appear on this report?

## Ownership Information

| FRN | 9990119036 |  |  |
| :--- | :--- | :--- | :---: |
| Name | Tori Wood |  |  |
| Address | PO Box |  |  |
|  | Street 1 | 1210 Olive St. Apt. B |  |


|  | Street 2 |  |  |
| :---: | :---: | :---: | :---: |
|  | City | Murray |  |
|  | State ("NA" if non-U.S. address) | KY |  |
|  | Zip/Postal Code | 42071 |  |
|  | 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 |  |  |
| By Whom Appointed or Elected | Students of Murray State University |  |  |
| Citizenship, Gender, <br> Ethnicity, and Race <br> Information (Natural Persons Only) | Citizenship | US |  |
|  | Gender | Female |  |
|  | Ethnicity | Not Hispanic or Latino |  |
|  | Race | White |  |
| Interest Percentages (enter percentage values from 0.0 to 100.0) | Voting | 9.1\% |  |
|  | 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 | 9990120629 |  |
| :--- | :--- | :--- |
| FRN | Stephen A. Williams |  |
| Address | PO Box |  |
|  | Street 1 | 1017 Essex Court |
|  | Street 2 | Goshen |
|  | City | KY |
|  | State ("NA" if non-U.S. <br> address) | Zip/Postal Code |
|  | Country (if non-U.S. <br> address) | United States |
| Listing Type | Other Interest Holder |  |
| Positional Interests | Officer, Member of Governing Board (or other governing entity) |  |
| (check all that apply) |  |  |


| Principal Profession or <br> Occupation | Retired Healthcare Executive |  |
| :--- | :--- | :--- |
| By Whom Appointed or <br> Elected | Governor of Kentucky |  |
| Citizenship, Gender, <br> Ethnicity, and Race <br> Information (Natural <br> Persons Only) | Citizenship | Gender |
|  | Ethnicity | US |
|  | Race | Nale Hispanic or Latino |
| Interest Percentages |  |  |
| (enter percentage values |  |  |
| from 0.0 to 100.0) | Voting | Equity |
|  | Total assets (Equity Debt | Plus) |


| Ownership Information |  |  |
| :---: | :---: | :---: |
| FRN | 9990122350 |  |
| Name | Robert O. Davies |  |
| Address | PO Box |  |
|  | Street 1 | 218 Wells Hall |
|  | Street 2 |  |
|  | City | Murray |
|  | State ("NA" if non-U.S. address) | KY |
|  | Zip/Postal Code | 42071 |
|  | Country (if non-U.S. address) | United States |
| Listing Type | Other Interest Holder |  |
| Positional Interests (check all that apply) | Other - Murray State University President and administrative unit head |  |
| Principal Profession or Occupation | President, Murray State University |  |
| By Whom Appointed or Elected | Board of Regents, Murray State University |  |
| 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 | 0.0\% |
|  | Equity | 0.0\% |



| (c) Is Respondent seeking an attribution exemption for any officer or director with | No |
| :--- | :--- |
| duties wholly unrelated to the Licensee(s)? |  |
| 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.

| File Name | Uploaded By | Attachment Type | Description |
| :--- | :--- | :--- | :--- |
| WKMS ORG Chart 2017.docx | Applicant | Ownership Chart | WKMS ORGANIZATIONAL CHART 2017 |

## Section III - Certification

Certification

| Section |  | Question |
| :--- | :--- | :--- |
| Authorized Party to Sign | WILLFUL FALSE STATEMENTS ON <br> THIS FORM ARE PUNISHABLE BY <br> FINE AND/OR IMPRISONMENT (U.S. <br> CODE, TITLE 18, SECTION 1001), AND <br> IOR REVOCATION OF ANY STATION <br> LICENSE --OR CONSTRUCTION |  |
|  | PERMIT (U.S. CODE, TITLE 47, <br> SECTION 312(a)(1)), AND/OR <br> FORFEITURE (U.S. CODE, TITLE 47, <br> SECTION 503). |  |
| Certification | I certify that I have examined this report <br> and that to the best of my knowledge and <br> belief, all statements in this report are <br> true, correct and complete. | Official Title: Station Manager <br> Exact Legal Title or Name of Respondent: <br> Station Manager <br> Name: Chad W Lampe |

