

(REFERENCE COPY - Not for submission)

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

File Number: 0000040887 | Submit Date: 2018-01-29 | FRN: 0002487056

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/29/2018

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	MO	65897	+1 (417) 836-6634	tammywiley@missouristate. edu

2. Contact Representative

Name	Organization
Barry Persh	Gray Miller Persh LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1200 New Hampshire Ave., NW	Washington	DC	20036- 6802	+1 (202) 776- 2458	bpersh@graymillerpersh. 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 boa indirectly under the control of another the control of an	ard (or other governing entity) directly or ther entity?	No

(b) Provide the following information about this report:		
Purpose	Biennial	
"As of" date	10/01/2017	
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this	

filed.

date must be Oct. 1 of the year in which this report is

5. Licensee(s) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Lic	censee/Permittee Name	FRN
Во	pard 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	МО	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 Missouri 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	РО Вох		
	Street 1	2231 Martha Lane	
	Street 2		
	City	Greenwood	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	64034	
	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	Citizenship	US
Persons Only)	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 an attributable interest in one or more broadcast stations No that do not appear on this report?		or more broadcast stations No

Ownership Information			
FRN	9990120340		
Name	Amelia Counts		
Address	РО Вох		
	Street 1	318 Panhurst Ct.	
	Street 2		
	City	Ballwin	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	63021	
	Country (if non-U.S. United States address)		
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	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 a that do not appear on this re	n attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990120342		
Name	Carol Silvey		
Address	PO Box		
	Street 1	1040 Circle Dr.	
	Street 2		
	City	West Plains	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	65775	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Fundraiser		
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	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 that do not appear on this report?			

Ownership Information			
FRN	9990120343	9990120343	
Name	Beverly Miller		
Address	PO Box		
	Street 1	406 Bluebird Ln	
	Street 2 City Lebanon		
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	64436	

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired Educator	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	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	9990120344	
Name	Virginia Fry	
Address	РО Вох	
	Street 1	2249 E. Wildwood Circle Dr. North
	Street 2	
	City	Springfield
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	65804
	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 Missouri	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Female
Persons Only)		

Interest Percentages (enter percentage values from 0.0 to 100.0)	Ethnicity	Not Hispanic or Latino	
	Race	White	
	Voting	11.1%	
	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	9990120345	
Name	Tyree Davis	
Address	PO Box	
	Street 1	5152 Westridge Circle
	Street 2	
	City	Raytown
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	64133
	Country (if non-U.S. United States address)	
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	Governor of Missouri	
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	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	9990120346

Name	James Baker		
Address	РО Вох		
	Street 1	6110 Hackamore Circle	
	Street 2		
	City	Ozark	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	65721	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	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 that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information		
FRN	9990120347	
Name	James Seal	
Address	PO Box	
	Street 1 2100 Central St. Ste. 11E	
	Street 2 City Kansas City State ("NA" if non-U.S. MO address)	
	Zip/Postal Code 64108	
	Country (if non-U.S. United States address)	
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 Persons Only)	Gender	Male	
	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	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		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%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this re	n attributable interest in one or eport?	r more broadcast stations	No

FRN	9990120350		
Name	Craig Frazier		
Address	РО Вох		
	Street 1	704 S. Hickory Terrace	
	Street 2		
	City	Springfield	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	65809	
	Country (if non-U.S. address)	United States	
_isting Type	Other Interest Holder		
Positional Interests (check all that apply)	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 nformation (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
nterest Percentages	Voting	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Information		
FRN	9990120351	
Name	Clifton Smart	
Address	PO Box	
	Street 1 1213 S. Weller Ave.	

	Street 2		
	City	Springfield	
	State ("NA" if non-U.S. address)	MO	
	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	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	9990120353	
Name	Carrie Tergin	
Address	PO Box	
	Street 1	1003 Emily Ln.
	Street 2	
	City Jefferson City	
	State ("NA" if non-U.S. MO address)	
	Zip/Postal Code 65109	
	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	Business Owner		
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	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	n attributable interest in one o eport?	r more broadcast stations	No
• •	at any interests, including equi is filing are non-attributable. n 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.

The Board of Governors of Missouri State University is a public, state institution of education. There is 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: VP for Research, Economic Dev. and Intl. Programs Exact Legal Title or Name of Respondent: Board of Governors of Missouri State University Name: James P Baker Phone: 4178368501
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