

(REFERENCE COPY - Not for submission)

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

File Number: 0000095467 | Submit Date: 2020-01-07 | FRN: 0007209133

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/07/2020

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0007209133	Stephen F. Austin State University

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 13048	Nacogdoches	TX	75962	+1 (936) 468- 1278	swilliford@sfasu. edu

2. Contact Representative

Name	Organization
Sherry Williford	Stephen F. Austin State University

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 13048	Nacogdoches	TX	75962	+1 (936) 468-1278	swilliford@sfasu.edu

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits Entity required to file a Form 323-E because it holds an attributable interest in more Licensees or Permittees		olds an attributable interest in one or	
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another 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)

Licensee/Permittee Name	FRN
Stephen F. Austin State University	0007209133

Fac. ID No.	Call Sign	City	State	Service
63249	KSAU	NACOGDOCHES	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	0007209133	0007209133	
Entity Name	Stephen F. Austin State University		
Address	РО Вох	13048	
	Street 1		
	Street 2		
	City	Nacogdoches	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	75962	
	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 an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information			
FRN	9990131346		
Name	David Alders		
Address	РО Вох		
	Street 1	8740 FM 226	
	Street 2		
	City	Nacogdoches	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	75961-7143	
	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) Real Estate Manager		
Principal Profession or Occupation			
By Whom Appointed or Elected	Texas Governor		
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	9990131392
Name	Nelda Blair

Address	РО Вох		
	Street 1	#7 Grogans Park Drive	
	Street 2	Redbud Bldg. #3	
	City	The Woodlands	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77380-2402	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	Texas Governor		
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 or report?	r more broadcast stations No	

Ownership Information			
FRN	9990131408	9990131408	
Name	Scott Coleman	Scott Coleman	
Address	РО Вох	PO Box	
	Street 1	1245 Fries Road	
	Street 2		
	City	Houston	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77055-4719	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	

Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Dentist		
By Whom Appointed or Elected	Texas Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	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	or more broadcast stations No	

FRN	9990131419		
Name	Alton Frailey		
Address	РО Вох		
	Street 1	29827 Forest Hill Lane	
	Street 2		
	City	Fulshear	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77406-2499	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Independent Education Con	Independent Education Consultant	
By Whom Appointed or Elected	Texas Governor		
Citizenship, Gender,	Citizenship	Citizenship US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values	Voting 12.5%		

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 of eport?	r more broadcast stations	No

Ownership Information			
FRN	9990131427		
Name	Brigettee Henderson		
Address	PO Box		
	Street 1	102 Kiawah Court	
	Street 2		
	City	Lufkin	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	75901-7385	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	Interior Designer		
By Whom Appointed or Elected	Texas Governor		
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 that do not appear on this	an attributable interest in one o report?	r more broadcast stations No	

Ownership Information			
FRN	9990138767	9990138767	
Name	Karen G. Gantt	Karen G. Gantt	
Address	РО Вох	PO Box	
	Street 1	Street 1 7850 Collin McKinney Parkway, Suite 202	

	Street 2		
	City	McKinney	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	75070	
	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	Attorney		
By Whom Appointed or Elected	Texas Governor		
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)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations	No

Ownership Information			
FRN	9990138769		
Name	M. Thomas Mason		
Address	PO Box		
	Street 1	7619 Marquette Street	
	Street 2		
	City Dallas		
	State ("NA" if non-U.S. TX address)		
	Zip/Postal Code	75225	
	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	Real Estate Developer CFO		
By Whom Appointed or Elected	Texas Governor		
Citizenship, Gender,			
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)	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	9990138772	9990138772	
Name	Judy Larson Olson		
Address	PO Box		
	Street 1	1525 Lake Front Circle	
	Street 2		
	City	Woodlands	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	77830	
	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	Banker		
By Whom Appointed or Elected	Texas Governor	Texas Governor	
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 (Equi	ty Debt 0.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or more broadcast station	s No

Ownership Information			
FRN	9990138773		
Name	Jennifer Wade Winston		
Address	РО Вох		
	Street 1	700 Harmony Hill Drive	
	Street 2		
	City	Lufkin	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	75901	
	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 Entrepreneur		
By Whom Appointed or Elected	Texas Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	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)	0.0%	
Does interest holder have a that do not appear on this r	n attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990138774	
Name	Zoe Smiley	
Address	РО Вох	74
	Street 1	
	Street 2	

	City	Corrigan	
	State ("NA" if non-U.S. address)	TX	
	Zip/Postal Code	75939	
	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	Texas Governor		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Female	
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)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No
	nat any interests, including equi	ity, 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.	

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: KSAU Faculty Advisor Exact Legal Title or Name of Respondent: Sherry Williford Name: Sherry Williford Phone: 9364681278
---------------	--	---