

(REFERENCE COPY - Not for submission)

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

File Number: 0000114940 Submit Date: 2020-05-29 FRN: 0006142236

Purpose: Noncommercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

05/29/2020 Filing Status: Active

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

#### 1. Respondent

FRN	Entity Name
0006142236	BOARD OF REGENTS, SOUTHEAST MISSOURI STATE UNIVERSITY

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
One University Plaza	Cape Girardeau	MO	63701	+1 (573) 651- 5070	djwoods@semo. edu

# 2. Contact Representative

Name	Organization
Danny Woods	KRCU-FM KSEF-FM

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
One University Plaza Mailstop 0300	Cape Girardeau	МО	63701	+1 (573) 651-5070	djwoods@semo.edu

# 3. Application Filing Fee

Not Applicable

# 4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits	Relationship to stations/permits Licensee			
Is the Respondent's governing boindirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No		

(b) Provide the following information about this report:		
Purpose	Transfer of control or assignment of license/permit	
"As of" date	05/29/2020	
	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)
/Permittees(s)
and Station(s)
/Permit(s)

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

Licensee/Permittee Name	FRN	
BOARD OF REGENTS, SOUTHEAST MISSOURI STATE UNIVERSITY	0006142236	

Fac. ID No.	Call Sign	City	State	Service
61212	KRCU	CAPE GIRARDEAU	MO	FM
81163	KDMC-FM	VAN BUREN	МО	FM
90232	KSEF	STE. GENEVIEVE	МО	FM

#### Section II – Non-Biennial Ownership Information

#### 1. 47 C.F.R. Section 73.3613 Documents

Licensee/Permittee Respondents 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/Permittee 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) or Permittee(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) or Permittee(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	0006142236		
Entity Name	BOARD OF REGENTS, SOUTHEAST MISSOURI STATE UNIVERSITY		
Address	PO Box		
	Street 1	One University Plaza	
	Street 2		
	City	Cape Girardeau	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	63701	
	Country (if non-U.S. address)	United States	

Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations  No that do not appear on this report?			

Ownership Information			
FRN	9990124869		
Name	Edward P. Gargas		
Address	PO Box		
	Street 1	302 N. Walnut St.	
	Street 2		
	City	Dexter	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	63841	
	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	Director of Operations and Sales, Bagby Wealth Management		
By Whom Appointed or Elected	Governor Jay Nixon		
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	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	9990125220	9990125220	
Name	Phillip M. Britt		
Address	РО Вох		
	Street 1	PO Box 805	
	Street 2		
	City	Kennett	

	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	63857	
	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 (	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Drug Court Commissioner - Ju	Drug Court Commissioner - Judge	
By Whom Appointed or Elected	Governor Jay Nixon		
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	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	9990137652		
Name	Tina Klocke	Tina Klocke	
Address	PO Box		
	Street 1	130 S. Benton Ave.	
	Street 2	Suite 303	
	City	Clayton	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code 63105		
	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	CFO and COO for Clark-Fox Family Foundation		
By Whom Appointed or Elected	Governor Eric Greitens	Governor Eric Greitens	
Interest Percentages	Voting 16.7%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	9990137655		
Name	James P. Limbaugh		
Address	РО Вох	1815	
	Street 1	2027 Broadway	
	Street 2		
	City	Cape Girardeau	
	State ("NA" if non-U.S. address)	MO	
	Zip/Postal Code	63702	
	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	Governor Mike Parson	Governor Mike Parson	
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one or	r more broadcast stations	No

Ownership Information		
FRN	9990137659	
Name	Luke M. LeGrand	
Address	РО Вох	
	Street 1	One University Plaza
	Street 2	MS3300
	City	Cape Girardeau
	State ("NA" if non-U.S. address)	MO
	Zip/Postal Code	63701
	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	Governor Eric Greitens		
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990137692		
Name	Kathy Mangels		
Address	РО Вох		
	Street 1	One University Plaza	
	Street 2	MS3300	
	City	Cape Girardeau	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	63701	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Principal Profession or Occupation	VP Finance and Administration	VP Finance and Administration, SEMO University - Board Treasurer	
By Whom Appointed or Elected	Respondent	Respondent	
Interest Percentages	Voting 0.0%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one or report?	r more broadcast stations	No

Ownership Information			
FRN	9990137693		
Name	Chris Martin	Chris Martin	
Address	РО Вох		
	Street 1	One University Plaza	
	Street 2	MS3300	
	City	Cape Girardeau	
	State ("NA" if non-U.S. address)	MO	

	Zip/Postal Code	63701		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer	Officer		
Principal Profession or Occupation	Chief of Staff - Board Secreta	Chief of Staff - Board Secretary		
By Whom Appointed or Elected	Respondent			
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	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 N	lo	

Ownership Information			
FRN	9990142464		
Name	Vivek Malik	Vivek Malik	
Address	РО Вох		
	Street 1	1067 N. Mason Rd	
	Street 2	Suite 4	
	City	St. Louis	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code 63141		
	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	Law Offices of Vivek Malik	Law Offices of Vivek Malik	
By Whom Appointed or Elected	Governor Mike Parson	Governor Mike Parson	
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	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	9990142465

Name	Lloyd Smith		
Address	PO Box		
	Street 1	PO Box 839	
	Street 2		
	City	Sikeston	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	63801	
	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 Mike Parson		
Interest Percentages	Voting	16.7%	
(enter percentage values from 0.0 to 100.0)	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
	nat any interests, including equinals filing are non-attributable.  an 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.	

#### 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: Vice President, Finance & Administration Exact Legal Title or Name of Respondent: Board of Regents, Southeast Missouri State University Name: Kathy M. Mangels Phone: 5736512570
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