

(REFERENCE COPY - Not for submission)

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

File Number: **0000174131** Submit Date: **2021-11-30** FRN: **0008690430**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/30/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0008690430	Montana State University-Billings

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
KEMC - FM 1500 University Drive	Billings	MT	59101	+1 (406) 657- 2941	ken@ypradio. org

2. Contact Representative

Name	Organization
Melodie A. Virtue	Foster Garvey PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac St. NW Suite 200	Washington	DC	20007	+1 (202) 965- 7880	melodie.virtue@foster.

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(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 indirectly under the control of another entity?		No

(b) Provide the following information about this report:		
Purpose Biennial		
"As of" date	10/01/2021	
	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	
Montana State University-Billings	0008690430	

Fac. ID No.	Call Sign	City	State	Service
42382	KYPR	MILES CITY	MT	FM
43571	KEMC	BILLINGS	MT	FM
43572	KBMC	BOZEMAN	MT	FM
89885	KPRQ	SHERIDAN	WY	FM
164087	KYPZ	FORT BENTON	MT	FM
172568	KYPC	COLSTRIP	MT	FM
172578	KYPM	LIVINGSTON	MT	FM
172585	KYPF	STANFORD	MT	FM
172712	KYPW	WOLF POINT	MT	FM
174030	КҮРН	HELENA	MT	FM
174918	КҮРВ	BIG TIMBER	MT	FM
189560	KYPX	HELENA VALLEY SE	MT	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	0008690430			
Entity Name	Montana State University-Billi	Montana State University-Billings		
Address	РО Вох			
	Street 1	KEMC - FM		
	Street 2	1500 University Drive		
	City	Billings		
	State ("NA" if non-U.S. address)	MT		
	Zip/Postal Code	59101		
	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	rest holder have an attributable interest in one or more broadcast stations No st appear on this report?			

Ownership Information			
FRN	9990117864	9990117864	
Name	Casey Lozar		
Address	РО Вох	203201	
	Street 1	C/O Commissioner of Higher Education	
	Street 2	560 N. Park Ave.	
	City	Helena	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59620-3201	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Chair; Member of Governing Board (or other governing entity) Economic Development		
Principal Profession or Occupation			

By Whom Appointed or Elected	Governor	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	14.3%
(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? Yes		

Ownership Information			
FRN	9990117859		
Name	Robert A. Nystuen		
Address	РО Вох	203201	
	Street 1	C/O Commissioner of Higher Education	
	Street 2	560 N. Park Ave.	
	City	Helena	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59620-3201	
	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		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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?

Yes

Ownership Information			
FRN	9990137571	9990137571	
Name	Joyce Dombrouski		
Address	PO Box	PO Box 203201	
	Street 1	C/O Commissioner of Higher Education	
	Street 2	560 N. Park Ave.	
	City	Helena	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59620-3201	
	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	Hospital Administrator		
By Whom Appointed or Elected	Governor	Governor	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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 o	r more broadcast stations Yes	

Ownership Information			
FRN	9990137574	9990137574	
Name	Brianne Rogers	Brianne Rogers	
Address	РО Вох	PO Box 203201	
	Street 1	C/O Commissioner of Higher Education	
	Street 2	560 N. Park Ave.	
	City	Helena	

	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59620-3201	
	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 Consultant	Business Consultant	
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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 Yes that do not appear on this report?			

Ownership Information		
FRN	9990139755	
Name	Waded Cruzado	
Address	РО Вох	172420
	Street 1	
	Street 2	
	City	Bozeman
	State ("NA" if non-U.S. address)	MT
	Zip/Postal Code 59717-2420	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	President, Montana State University	
By Whom Appointed or Elected	Board	

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or that do not appear on this report?		er more broadcast stations Yes

Ownership Information		
FRN	9990141449	
Name	Susan Simmers	
Address	PO Box	
	Street 1	1500 University Dr.
	Street 2	
	City	Billings
	State ("NA" if non-U.S. address)	MT
	Zip/Postal Code	59101-0245
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Vice Chancellor for Administration and Finance, Montana State University Billings	
Principal Profession or Occupation	Vice Chancellor for Administration and Finance, Montana State University Billings	
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	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)	
Does interest holder have	an attributable interest in one o	r more broadcast stations No

Ownership Information			
FRN	9990145625		
Name	Todd Buchanan		
Address	PO Box 203201		
	Street 1	c/o Commissioner of Higher Education	
	Street 2	560 N. Park Ave.	
	City	Helena	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59620-3201	
	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	Governor	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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 Yes that do not appear on this report?			

Ownership Information		
FRN	9990145626	
Name	Amy Sexton	
Address	РО Вох	
	Street 1	c/o Commissioner of Higher Education
	Street 2 560 N. Park Ave.	
	City	Helena
	State ("NA" if non-U.S. address)	MT
	Zip/Postal Code	59620-3201

	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	Student	Student	
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender Female Ethnicity Not Hispanic or Latino		
Persons Only)			
	Race	White	
Interest Percentages	Voting	14.3%	
(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 Yes that do not appear on this report?		

Ownership Information			
FRN	9990145624		
Name	Loren Bough	Loren Bough	
Address	РО Вох		
	Street 1	c/o Commissioner of Higher Education	
	Street 2	560 N. Park Ave.	
	City	Helena	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59620-3201	
	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		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender Male		
Persons Only)			

	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or more that do not appear on this report?		r more broadcast stations Yes

Ownership Information			
FRN	9990147188		
Name	Stefani Hicswa		
Address	PO Box		
	Street 1	1500 University Dr.	
	Street 2		
	City	Billings	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59101-0245	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Chancellor, Montana State University Billings		
Principal Profession or Occupation	Chancellor, Montana State University Billings		
By Whom Appointed or Elected	Board		
tizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	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)		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No	

(b) Respondent certifies that any interests, including equity, financial, or voting		Yes
	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.

Licensee does not have a 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: Vice Chancellor for Administration and Finance Exact Legal Title or Name of Respondent: Montana State University - Billings Name: Susan Simmers Phone: 4062475748