

FCC 323-E

Ownership Report For Noncommercial Educational Broadcast Station

Read INSTRUCTIONS Before Filing Out Form

- 20161103AAM

Section I - General

1. Legal Name of the Licensee/Permittee

ST CLOUD STATE UNIVERSITY

Mailing Address

27 STEWART HALL

City

ST. CLOUD

Telephone Number (include area code)

3203083053

FCC Registration Number:

0010940120

Call Sign
KVSC

Facility ID Number
62112

2. Contact Representative (if other than Licensee/Permittee)

JO MCMULLEN-BOYER

Mailing Address

27 STEWART HALL

City

ST. CLOUD

Telephone Number (include area code)

3203083053

3. Name of entity, if other than licensee or permittee, for which report is filed

Mailing Address

City

Telephone Number (include area code)

State or Country (if foreign address)

MN

E-Mail Address (if available)

INFO@KVSC.ORG

Facility ID Number

62112

Firm or Company Name

KVSC RADIO

State or Country (if foreign address)

MIN

E-Mail Address (if available)

INFO@KVSC.ORG

State or Country (if foreign address)

F-E-Mail Address (if available)

ZIP Code

56301 - 4498

Section II - Ownership Information

4.

All of the information furnished in this Report is accurate as of 11/3/2016 (Date must comply with 47 C.F.R. Section 73.3615(d), i.e., information must be current within 60 days of filing of this report, when 4(a) below is checked.)

This Report is filed for (check one)

a. Biennial

b. Transfer of Control or Assignment of License/Permit

c. Other

d. Amendment to pending application

for the following stations:

[Enter Station Information]

Station List

This Report is filed for the following stations:

Call Letters	Facility ID Number	Location (City/State)	Class of service
KVSC	62112	SAINT CLOUD, MN MN	FM

5. List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.)

[Enter Contract/Instrument Information]

Contracts/Instruments Information

List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject shall respond.)

Description of Contract or Instrument	Name of person or organization with whom contract is made	Date of Execution (mm/dd/yyyy)	Date of Expiration (mm/dd/yyyy)

6. Is the governing board directly or indirectly under the control of another entity?

If Yes, is a separate FCC Form 323-E submitted for such entity?

Yes No
 Yes No

7. List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages, if necessary.
 [Enter Owner Information]

Owner Information

List officers, members of governing board, and holders of 1% or more ownership interest, if any. Use one column for each individual or entity. Attach supplemental pages if necessary. (Read carefully - The numbered items below refer to line numbers in the following table.)

- a. Name and address of officer, member of governing board, and holders of 1% or more ownership interest (if other than individual also show name, address and citizenship of natural person authorized to vote the interest). List officers first, then board members, and thereafter, holders of 1% or more ownership interest, if any.
- b. Citizenship.
- c. Office held.
- d. Percent of interest held.
- e. Principal profession or occupation.
- f. By whom appointed or elected.
- g. Existing interests in any other broadcast station, including the nature and size of such interests.

a. Name and Address.	ANN ANAYA, MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	TRUSTEE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	3M LITIGATION AND PREVENTION LAW
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	STEVEN ROSENSTONE MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 E. 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	CHANCELLOR MINNESOTA STATE COLLEGES AND UNIV.
d. Percent of interest held.	0.00
e. Principal profession or occupation.	CHANCELLOR
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	BASIL AJO MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	STUDENT REPRESENTATIVE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	STUDENT
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	ELISE BOURDEAU MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	TRUSTEE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	STATE UNIVERSITY STUDENT
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	JAY COWLES, MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET
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	ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	TREASURER
d. Percent of interest held.	0.00
e. Principal profession or occupation.	UNITY AVENUE ASSOC. FAMILY INVESTMENTS
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	ROBERT HOFFMAN MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	TRUSTEE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	RETIRED FROM HIGHER EDUCATION
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	AMANDA FREDLUND, MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	STUDENT
d. Percent of interest held.	0
e. Principal profession or occupation.	TECHNICAL COLLEGE STUDENT
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	JERRY JANEZICH MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	TRUSTEE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	HIGHER EDUCATION
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	LOUISE SUNDIN MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
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b. Citizenship.	US
c. Office held.	TRUSTEE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	MINNEAPOLIS REGIONAL LABOR FEDERATION
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	DAWN ERLANDSON MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	TRUSTEE AT LARGE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	MNSCU EMPLOYEE
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	RUDY RODRIGUEZ MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	TRUSTEE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	UNKNOWN
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	CHERYL TEFER MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	TRUSTEE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	UNKNOWN
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	ALEXANDER CIRILLO, JR. MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US

c. Office held.	TRUSTEE AT LARGE
d. Percent of interest held.	0.00
e. Principal profession or occupation.	UNKNOWN
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	MICHAEL VEKICH MNSCU BOARD OF TRUSTEES OFFICE 500 WELLS FARGO PLACE 30 EAST 7TH STREET ST. PAUL, MN 55101
b. Citizenship.	US
c. Office held.	CHAIR
d. Percent of interest held.	0.00
e. Principal profession or occupation.	CEO OF VEKICH ASSOCIATES
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	MARGARET ANDERSON KELLIHER, MINNESOTA STATE COLLEGES AND UNIVERSITIES, 30 7TH ST E, SUITE 350 ST. PAUL, MN 55101
b. Citizenship.	BR
c. Office held.	VICE CHAIR
d. Percent of interest held.	0.00
e. Principal profession or occupation.	MINNESOTA HIGH TECH ASSOCIATION
f. By whom appointed or elected.	GOVERNOR OF MINNESOTA
g. Existing interests	HIGHER EDUCATION

a. Name and Address.	
b. Citizenship.	
c. Office held.	
d. Percent of interest held.	
e. Principal profession or occupation.	
f. By whom appointed or elected.	
g. Existing interests	

a. Name and Address.	
b. Citizenship.	
c. Office held.	
d. Percent of interest held.	

e. Principal profession or occupation.	
f. By whom appointed or elected.	
g. Existing interests	
a. Name and Address.	
b. Citizenship.	
c. Office held.	
d. Percent of interest held.	
e. Principal profession or occupation.	
f. By whom appointed or elected.	
g. Existing interests	

SECTION III - CERTIFICATION

I certify that I am JO McMULLEN BOYER

(Official Title)

of KVSC STATION MANAGER

(Exact legal title or name of respondent)

and 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.

(Date of certification must be within 60 days of the date shown in Question 4, Section II and in no event prior to that date.)

Signature JO McMULLEN BOYER	Date 11/2/2016
Telephone Number of Respondent (include area code) 3203083053	

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 LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 3126(a)(1)), AND/OR FORTHURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits