

(REFERENCE COPY - Not for submission)

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

File Number: 0000044255 | Submit Date: 2018-02-27 | FRN: 0001792233

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 02/27/2018 |

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0001792233	Morehead State University	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
150 University Blvd. Box 903 Morehead State University VWMKY	Morehead	кү	40351- 1684	+1 (606) 783-2334	p. hitchc@moreheadstate. edu

2. Contact Representative

Name	Organization	
Ernest T. Sanchez	The Sanchez Law Firm PC	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1155 F Street NW Suite 1050	Washington	DC	20004	+1 (202) 237- 2814	emestsanchez2348@gmail. 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 bo Indirectly under the control of and	ard (or other governing entity) directly or other 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 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
Morehead State University	0001792233

Fac. ID No.	Call Sign	City	State	Service	
43765	WMKY	MOREHEAD	KY	FM	
88510	W202BH	INEZ	кү	FX	

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	NPR Network affiliation agreement
Parties to contract or instrument	National Public Radio and Morehead State University/WMKY
Date of execution	10/2017
Date of expiration	09/2018
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	PRI Network affiliation agreement
Parties to contract or instrument	Public Radio International and Morehead State University /WMKY
Date of execution	07/2017
Date of expiration	06/2018
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.

FRN	0001792233		
Entity Name	Morehead State University		
Address	PO Box		
	Street 1	150 University Blvd. Box 903	
	Street 2	Morehead State University/WMKY	
	City	Morehead	
	State ("NA" if non-U.S. address)	кү	
	Zip/Postal Code	40351-1684	
	Country (If non-U.S. address)	United States	
isting Type	Respondent		
Positional Interests check all that apply)	Respondent		
Fribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
nterest Percentages enter percentage values	Voting	0.0%	
rom 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

Ownership Informat	ion	
FRN	9990129831	
Name	Paul C. Goodpaster	
Address	PO Box	
	Street 1	150 University Blvd Box 903
	Street 2	Morehead State University
	City	Morehead

address)			
Zip/Postal Code	40351-1684		
Country (if non-U.S. address)	United States		
Other Interest Holder			
Officer, Member of Governing Board (or other governing entity)			
Bank officer			
Kentucky Governor			
Citizenship	US		
Gender	Male		
Ethnicity	Not Hispanic or Latino		
Race	White		
Voting	9.1%		
Equity	0.0%		
Total assets (Equity Debt			
	Zip/Postal Code Country (if non-U.S. address) Other Interest Holder Officer, Member of Governing Bank officer Kentucky Governor Citizenship Gender Ethnicity Race Voting Equity Total assets (Equity Debt	address) Zip/Postal Code 40351-1684 Country (if non-U.S. address) Other Interest Holder Officer, Member of Governing Board (or other governing entity) Bank officer Kentucky Governor Citizenship US Gender Male Ethnicity Not Hispanic or Latino Race White Voting 9.1% Equity 0.0% Total assets (Equity Debt	

Ownership Information			
FRN	9990129839		
Name	Eric C. Howard		
Address	РО Вох		
	Street 1	150 University Blvd Box 903	
	Street 2	Morehead State University	
	City	Morehead	
	State ("NA" if non-U.S, address)	ку	
	Zip/Postal Code	40351-1684	
	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	Human Resources Manager		
By Whom Appointed or Elected	Kentucky Governor		

Citizenshlp	US
Gender	Male
Ethnicity	Not Hispanic or Latino
Race	Black or African American
Voting	9.1%
Equity	0.0%
Total assets (Equity Debt Plus)	
	Gender Ethnicity Race Voting Equity Total assets (Equity Debt

FRN	9990129844			
rkn	9990129844			
Name	Deborah H. Long			
Address	PO Box			
	Street 1	150 University Blvd Box 903		
	Street 2	Morehead State University		
	City	Morehead		
	State ("NA" if non-U.S. address)	кү		
	Zlp/Postal Code	40351-1684		
	Country (if non-U.S. address)			
Isting Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Business Owner			
By Whom Appointed or Elected	Kentucky Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
nterest Percentages	Voting	9.1%		
enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt			

that do not appear on this report?

FRN	9990129846		
Name	Wayne M. Martin		
Address	РО Вох		
	Street 1	150 University Blvd Box 903	
	Street 2	Morehead State University	
	City	Morehead	
	State ("NA" if non-U.S. address)	кү	
	Zip/Postal Code	40351-1684	
	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	Television Consultant		
By Whom Appointed or Elected	Kentucky Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnlcity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt		

FRN	9990129850	9990129850		
Name	Craig Preece	Craig Preece		
Address	PO Box			
	Street 1	150 University Blvd Box 903		
	Street 2	Morehead State University		
	City	Morehead		
	State ("NA" If non-U.S. address)	ку		
	Zip/Postal Code	40351-1684		

	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	Chief Financial Officer			
By Whom Appointed or Elected	Kentucky Governor			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Male		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
nterest Percentages	Voting	9.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt			

Ownership Information			
FRN	9990129853		
Name	Patrick E. Price		
Address	РО Вох		
	Street 1	150 University Blvd Box 903	
	Street 2	Morehead State University	
	City	Morehead	
	State ("NA" if non-U.S. address)	кү	
	Zip/Postal Code	40351-1684	
	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	Kentucky Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race nformation (Natural	Gender	Male	

Ethnicity	Not Hispanic or Latino	
Race	White	
Voting	9.1%	
Equity	0.0%	
Total assets (Equity Debt		
	Voting Equity Total assets (Equity Debt	Race White Voting 9.1% Equity 0.0% Total assets (Equity Debt

FRN	9990129859			
Name	Kathy Walker			
Address	PO Box			
	Street 1	150 University Blvd Box 903		
	Street 2	Morehead State University		
	City	Morehead		
	State ("NA" if non-U.S. address)	ку		
	Zip/Postal Code	40351-1684		
	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	Chief Executive Officer			
By Whom Appointed or Elected	Kentucky 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	Voting	9.1%		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

Ownership Information		
FRN	9990129863	

	Terri Walters		
Address	РО Вох		
	Street 1	150 University Blvd Box 903	
	Street 2	Morehead State University	
	City	Morehead	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40351-1684	
	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	Kentucky Governor		
Citizenship, Gender,	Citizenship	US	
	Gender	Female	
Information (Natural	Gerider	Female	
Ethnicity, and Race Information (Natural Persons Only)	Ethnicity	Not Hispanic or Latino	
Information (Natural			
Information (Natural Persons Only) Interest Percentages	Ethnicity	Not Hispanic or Latino	
information (Natural Persons Only)	Ethnicity Race	Not Hispanic or Latino White	

Ownership Information		
FRN	9990129866	
Name	Jonathan Pidluzny	
Address	РО Вох	
	Street 1	150 University Blvd Box 903
	Street 2	Morehead State University
	City	Morehead
	Province/Region	
	Zip/Postal Code	
	Country (if non-U.S. address)	Canada
Listing Type	Other Interest Holder	"

Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Faculty Regent		
By Whom Appointed or Elected	Morehead State Faculty		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	9.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt		

FRN	9990129870	
Name	Shannon L. Harr	
Address	PO Box	
	Street 1	150 University Blvd Box 903
	Street 2	Morehead State University
	City	Morehead
	State ("NA" if non-U.S. address)	кү
	Zip/Postal Code	40351-1684
	Country (If non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board	d (or other governing entity)
Principal Profession or Occupation	Morehead State Staff Sta	ff Regent
By Whom Appointed or Elected	Staff of University	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	9.1%

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder ha that do not appear on the	ve an attributable Interest in one c	r more broadcast stations	No

FRN	9990129873		
Name	Rachel Malone		
Address	PO Box		
	Street 1	150 University Blvd Box 903	
	Street 2	Morehead State University	
	City	Morehead	
	State ("NA" if non-U.S. address)	ку	
	Zip/Postal Code	40351-1684	
	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 Representative		
By Whom Appointed or Elected	Student Body		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
nterest Percentages (enter percentage values	Voting	9.1%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Informat	ion	
FRN	9990129875	
Name	Jay Morgan	
Address	PO Box	
	Street 1	150 University Blvd Box 903
	OHOGE I	100 Officially Bive Box 000

	Street 2	Morehead State University	
	City	Morehead	
	State ("NA" If non-U.S. address)	KY	
	Zip/Postal Code	40351-1684	
	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 of Morehead State University		
By Whom Appointed or Elected	Board of Regents		
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%	out Hussian Continue to
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt		

Ownership Information		
FRN	9990129879	
Name	Beth Patrick	
Address	PO Box	
	Street 1	150 University Blvd Box 903
	Street 2	Morehead State University
	City	Morehead
	State ("NA" if non-U.S. address)	кү
	Zip/Postal Code	40351-1684
	Country (If non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	

Principal Profession or Occupation	MSU Chief Financial Officer and Board Treasurer		
By Whom Appointed or Elected	Morehead State University		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
nterest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

FRN	9990129882	
I IXIA	9990129862	
Name	Sharon S. Reynolds	
Address	РО Вох	
	Street 1	150 University Blvd Box 903
	Street 2	Morehead State University
	City	Morehead
	State ("NA" if non-U.S. address)	кү
	Zip/Postal Code	40351-1684
	Country (If non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Staff Member and Board Secretary	
By Whom Appointed or Elected	Morehead State University	
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 h that do not appear on	ave an attributable interest in one or more broadcast stations this report?	No
	es that any interests, including equity, financial, or voting l in this filing are non-attributable. hibit an explanation.	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.

EXHIBIT: Licensee Morehead State University 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 LICENSE —OR 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: General Manager Exact Legal Title or Name of Respondent: WMKY - Morehead State University Name: Paul Wilson Hitchcock Phone: 6067832334