

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0084 (June 2002)	FOR FCC USE ONLY
<b>FCC 323-E</b>		
<b>Ownership Report For Noncommercial Educational Broadcast Station</b>		FOR COMMISSION USE ONLY FILE NO. BOA - 20081001ASZ
Read INSTRUCTIONS Before Filling Out Form		

**Section I - General**

1. Legal Name of the Licensee/Permittee THE CURATORS OF THE UNIVERSITY OF MISSOURI		
Mailing Address 1105 CARRIE FRANCKE DRIVE		
City COLUMBIA	State or Country (if foreign address) MO	ZIP Code 65211 -
Telephone Number (include area code) 5738825768	E-Mail Address (if available)	
FCC Registration Number: 0002511491	Call Sign KCOU	Facility ID Number 28513
2. Contact Representative (if other than Licensee/Permittee) RICHARD R. ZARAGOZA, ESQ.	Firm or Company Name PILLSBURY WINTHROP SHAW PITTMAN LLP	
Telephone Number (include area code) 2026638266	E-Mail Address (if available) RICHARD.ZARAGOZA@PILLSBURYLAW.COM	
3. Name of entity, if other than licensee or permittee, for which report is filed		
Mailing Address		
City	State or Country (if foreign address)	ZIP Code
		-
Telephone Number (include area code)	E-Mail Address (if available)	

**Section II - Ownership Information**

4.	<p>All of the information furnished in this Report is accurate as of 09/01/2008 (<i>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.</i>)</p> <p>This Report is filed for (<i>check one</i>)</p> <p>a. <input checked="" type="radio"/> Biennial      b. <input type="radio"/> Transfer of Control or Assignment of License/Permit      c. <input type="radio"/> Other</p> <p>d. <input type="radio"/> Amendment to pending application</p> <p>for the following stations:</p> <p>[Enter Station Information]</p> <hr/> <p style="text-align: center;"><b>Station List</b></p>
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This Report is filed for the following stations:			
Call Letters	Facility ID Number	Location (City/State)	Class of service
KBIA	69180	COLUMBIA, MO	FM
Call Letters	Facility ID Number	Location (City/State)	Class of service
KCOU	28513	COLUMBIA, MO	FM
Call Letters	Facility ID Number	Location (City/State)	Class of service
KCUR-FM	14738	KANSAS CITY, MO	FM
Call Letters	Facility ID Number	Location (City/State)	Class of service
KMNR	14740	ROLLA, MO	FM
Call Letters	Facility ID Number	Location (City/State)	Class of service
KMST	69041	ROLLA, MO	FM
Call Letters	Facility ID Number	Location (City/State)	Class of service
KWMU	65585	ST. LOUIS, MO	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	Date of Expiration
ON FILE			

6. Is the governing board directly or indirectly under the control of another entity? ☐ Yes ☒ No  
If Yes, is a separate FCC Form 323-E submitted for such entity? ☐ 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.	MARION H. CAIRNS, 1115 WEBSTER OAKS LANE, WEBSTER GROVES, MO 63119
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	11.10
e. Principal profession or occupation.	RETIRED
f. By whom appointed or elected.	GOVERNOR OF STATE OF MISSOURI
g. Existing interests	NONE

a. Name and Address.	CHERYL D.S. WALKER, CITADEL PARTNERS, LLC, 1113 MISSISSIPPI, SUITE 110, ST. LOUIS, MO 63104
b. Citizenship.	US
c. Office held.	CHAIR
d. Percent of interest held.	11.10
e. Principal profession or occupation.	ATTORNEY
f. By whom appointed or elected.	GOVERNOR OF STATE OF MISSOURI
g. Existing interests	NONE

a. Name and Address.	DON WALSWORTH, WALSWORTH PUBLISHING CO., 306 N. KANSAS AVE., MARCELINE, MO 64658
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	11.10
e. Principal profession or occupation.	PUBLISHER
f. By whom appointed or elected.	GOVERNOR OF STATE OF MISSOURI
g. Existing interests	NONE

a. Name and Address.	JOHN M. CARNAHAN, III, 4467 BANNISTER ROAD, SPRINGFIELD, MO 65809
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	11.10

e. Principal profession or occupation.	ATTORNEY
f. By whom appointed or elected.	GOVERNOR OF STATE
g. Existing interests	NONE

a. Name and Address.	DOUG RUSSELL, 1616 ARBOUR DRIVE, LEBANON, MO 65536
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	11.10
e. Principal profession or occupation.	BUSINESS OWNER
f. By whom appointed or elected.	GOVERNOR OF STATE
g. Existing interests	NONE

a. Name and Address.	DAVID G. WASINGER, MURPHY WASINGER, LC, MAGNA PLACE, SUITE 550, 1401 BRENTWOOD BLVD., ST. LOUIS, MO 63144
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	11.10
e. Principal profession or occupation.	ATTORNEY
f. By whom appointed or elected.	GOVERNOR OF STATE
g. Existing interests	NONE

a. Name and Address.	KATHLEEN M. MILLER, 316 UNIVERSITY HALL, COLUMBIA, MO 65211
b. Citizenship.	US
c. Office held.	SECRETARY OF BOARD OF CURATORS
d. Percent of interest held.	0.00
e. Principal profession or occupation.	SECRETARY TO BOARD OF CURATORS
f. By whom appointed or elected.	BOARD OF CURATORS
g. Existing interests	NONE

a. Name and Address.	WARREN K. ERDMAN, 1015 AMO ROAD, KANSAS CITY, MO 64113
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	11.10
e. Principal profession or occupation.	BUSINESS EXECUTIVE
f. By whom appointed or elected.	GOVENOR OF STATE

g. Existing interests	NONE
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a. Name and Address.	BUFORD M. (BO) FRASER, 1601 STONEHAVEN RD., COLUMBIA, MO 65203
b. Citizenship.	US
c. Office held.	VICE CHAIR
d. Percent of interest held.	11.10
e. Principal profession or occupation.	BUSINESS EXECUTIVE
f. By whom appointed or elected.	GOVENOR OF STATE
g. Existing interests	NONE

  

a. Name and Address.	JUDITH G. HAGGARD, 300 W. WASHINGTON, KENNETT, MO 63857
b. Citizenship.	US
c. Office held.	BOARD MEMBER
d. Percent of interest held.	11.10
e. Principal profession or occupation.	MEDICAL PROFESSIONAL
f. By whom appointed or elected.	GOVENOR OF STATE
g. Existing interests	NONE

  

a. Name and Address.	TONY LUETKEMEYER, 316 UNIVERSITY HALL, COLUMBIA, MO 65211
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.	
g. Existing interests	NONE

### SECTION III - CERTIFICATION

I certify that I am ASSOCIATE VICE PRESIDENT, MANAGEMENT SERVICES

(Official Title)

of THE CURATORS OF THE UNIVERSITY OF MISSOURI

(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 WILLIAM M. COOPER	Date 10/01/2008
Telephone Number of Respondent (Include area code) 5738822707	

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).

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## Exhibits

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