

(REFERENCE COPY - Not for submission)

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

File Number: **0000043265** Submit Date: **2018-02-23** FRN: **0010642148**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 02/23/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0010642148	Regents of the University of New Mexico

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
1130 UNIVERSITY BLVD. NE	ALBUQUERQUE	NM	87102	+1 (505) 277-2121	fjoachim@newmexicopbs. org

2. Contact Representative

Name	Organization
Barry S. Persh	Gray Miller Persh LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1200 New Hampshire Ave., NW Suite 410	Washington	DC	20036	+1 (202) 776- 2458	bpersh@graymillerpersh. com

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	10/01/2017	
	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
Regents of the University of New Mexico	0010642148

Fac. ID No.	Call Sign	City	State	Service
84215	KNMD-TV	SANTA FE	NM	DTV

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	PBS STATION USERS AGREEMENT	
Parties to contract or instrument	PUBLIC BROADCASTING SVC.	
Date of execution	05/2008	
Date of expiration	No expiration date	
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.

Ownership Information	Ownership Information		
FRN	0010642148		
Entity Name	Regents of the University of No	ew Mexico	
Address	PO Box		
	Street 1	1130 UNIVERSITY BLVD. NE	
	Street 2		

	City	ALBUQUERQUE	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code	87102	
	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 an attributable interest in one or more broadcast stations Yes that do not appear on this report?			

Ownership Information			
FRN	9990119793		
Name	Garrett Adcock		
Address PO Box			
	Street 1	4916 Romo Ave. NE	
	Street 2		
	City	Albuquerque	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code	87108	
	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)		or other governing entity)	
Principal Profession or Occupation	Student		
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 a	an attributable interest in one oreport?	r more broadcast stations	Yes

Ownership Information				
FRN	9990119794			
Name	Thomas Clifford			
Address	PO Box			
	Street 1	32 Camino Estrellas		
	Street 2			
	City	Santa Fe		
	State ("NA" if non-U.S. address)	NM		
	Zip/Postal Code	87508		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - Board Secretary and TreasurerMember of Governing Board (or other governing entity)			
Principal Profession or Occupation	Economic Consulting			
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 a that do not appear on this r	n attributable interest in one o	r more broadcast stations	Yes	

Ownership Information		
FRN	9990119795	
Name	Robert M. Doughty, III.	
Address	PO Box	

	Street 1	9108 Thornton Ave. NE
	Street 2	
	City	Albuquerque
	State ("NA" if non-U.S. address)	NM
	Zip/Postal Code	87109
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Board PresidentMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Attorney	
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 that do not appear on this	an attributable interest in one or report?	r more broadcast stations Yes

Ownership Information			
FRN	9990119797		
Name	Bradley C. Hosmer		
Address	PO Box 1128		
	Street 1		
	Street 2		
	City	Cedar Crest	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code	87008	
	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, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	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 that do not appear on this	an attributable interest in one o	r more broadcast stations Yes	

Ownership Information			
FRN	9990119798		
Name	Marron Lee		
Address	PO Box		
	Street 1	2411 Elfego Road NW	
	Street 2		
	City	Albuquerque	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code	87107	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Board Vice PresidentMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney	Attorney	
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 a that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	Yes

Ownership Information			
FRN	9990119799		
Name	Suzanne Quillen		
Address	РО Вох		
	Street 1	5020 Creosote Run Rd.	
	Street 2		
	City	Las Cruces	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code	88011	
	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	Registered Nurse, Hospital Administration		
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 a	an attributable interest in one or	r more broadcast stations Yes	

Ownership Information			
FRN	9990119800	9990119800	
Name	Alex O. Romero	Alex O. Romero	
Address	РО Вох		
	Street 1	620 Paseo Del Bosque NW	
	Street 2		

	City	Albuquerque		
	State ("NA" if non-U.S. address)	NM		
	Zip/Postal Code	87114		
	Country (if non-U.S. address)	United States		
Listing Type	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	Retired			
By Whom Appointed or Elected	Governor	Governor		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	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 that do not appear on this	an attributable interest in one or	or more broadcast stations	Yes	

Ownership Information			
FRN	9990126560		
Name	Chaouki T. Abdallah		
Address	PO Box		
	Street 1	12210 Mirandy Ct NE	
	Street 2		
	City	Albuquerque	
	State ("NA" if non-U.S. address)	NM	
	Zip/Postal Code	87112-1274	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Interim President, University of New Mexico		
Principal Profession or Occupation	Interim President, University of New Mexico		

By Whom Appointed or Elected	Board of Regents	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not 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 that do not appear on this	an attributable interest in one o	r more broadcast stations Yes

Ownership Information				
FRN	9990126562	9990126562		
Name	David W. Harris			
Address	PO Box			
	Street 1	1 University of New Mexico		
	Street 2			
	City	Albuquerque		
	State ("NA" if non-U.S. address)	NM		
	Zip/Postal Code	87131		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - Executive Vice President of Administration, University of New Mexico			
Principal Profession or Occupation	Executive Vice President of Administration, University of New Mexico			
By Whom Appointed or Elected	University President			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	us		
	Gender	Male		
	Ethnicity	Not 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 more broadcast stations that do not appear on this report?	Yes
(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit 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.

The Regents of the University of New Mexico is a public, state institution of higher education. There is no 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: Executive Vice President for Admin., COO and CFO Exact Legal Title or Name of Respondent: Regents of the University of New Mexico Name: David Harris Phone: 5052777520