



(REFERENCE COPY - Not for submission)

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

File Number: 0000043425 | Submit Date: 2018-02-23 | FRN: 0003756152

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			
0003756152		Board of 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
Room 328 Onate Hall University of New Mexico	Albuquerque	NM	87131	+1 (505) 277-8009	gmkunm@unm.edu

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
Board of Regents of the University of New Mexico	0003756152

Fac. ID No.	Call Sign	City	State	Service
6083	KUNM	ALBUQUERQUE	NM	FM
93246	KBOM	SOCORRO	NM	FM
93833	KRAR	ESPANOLA	NM	FM
94047	KRRT	ARROYO SECO	NM	FM
122283	KRRE	LAS VEGAS	NM	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	0003756152	
Entity Name	Board of Regents of the University of New Mexico	
Address	PO Box	
	Street 1	Room 328 Onate Hall
	Street 2	University of New Mexico
	City	Albuquerque

	<b>State ("NA" if non-U.S. address)</b>	NM	
	<b>Zip/Postal Code</b>	87131	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Respondent		
<b>Positional Interests</b> (check all that apply)	Respondent		
<b>Tribal Nation or Tribal Entity</b>	Interest holder is not a Tribal nation or Tribal entity		
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%	
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>	0.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		Yes	

Ownership Information		
<b>FRN</b>	9990126560	
<b>Name</b>	Chaouki T. Abdallah	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	12210 Mirandy Ct NE
	<b>Street 2</b>	
	<b>City</b>	Albuquerque
	<b>State ("NA" if non-U.S. address)</b>	NM
	<b>Zip/Postal Code</b>	87112-1274
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Other - Interim President, University of New Mexico	
<b>Principal Profession or Occupation</b>	Interim President, University of New Mexico	
<b>By Whom Appointed or Elected</b>	Board of Regents	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Male
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%

	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		Yes

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)	
Principal Profession or Occupation	Student	
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 (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 broadcast stations that do not appear on this report?		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	
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	14.3%
	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	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, 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	14.3%
	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	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

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 (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 broadcast stations that do not appear on this report?		Yes

Ownership Information		
FRN	9990119798	
Name	Marron Lee	
Address	PO Box	
	Street 1	2411 Elfego Road NW
	Street 2	

	<b>City</b>	Albuquerque
	<b>State ("NA" if non-U.S. address)</b>	NM
	<b>Zip/Postal Code</b>	87107
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Officer, Other - Board Vice PresidentMember of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Attorney	
<b>By Whom Appointed or Elected</b>	Governor	
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US
	<b>Gender</b>	Female
	<b>Ethnicity</b>	Not Hispanic or Latino
	<b>Race</b>	White
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	14.3%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>		Yes

Ownership Information		
<b>FRN</b>	9990119799	
<b>Name</b>	Suzanne Quillen	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	5020 Creosote Run Rd.
	<b>Street 2</b>	
	<b>City</b>	Las Cruces
	<b>State ("NA" if non-U.S. address)</b>	NM
	<b>Zip/Postal Code</b>	88011
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Registered Nurse, Hospital Administration	



By Whom Appointed or Elected	Governor	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	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 broadcast stations that do not appear on this report?		Yes

Ownership Information		
FRN	9990119800	
Name	Alex O. Romero	
Address	PO Box	
	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 (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	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 broadcast stations that do not appear on this report?	Yes
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<b>(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.</b> If "No," submit as an exhibit an explanation.	Yes
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<b>(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b>  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.	No
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### 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 public institution of education governed by its board members. 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 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: <b>University Controller</b> Exact Legal Title or Name of Respondent: <b>Board of Regents of the University of New Mexico</b> Name: <b>Elizabeth Metzger</b> Phone: <b>5052775111</b>  02/23/2018