



(REFERENCE COPY - Not for submission)

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

File Number: **0000058822** | Submit Date: **2018-08-09** | FRN: **0006005672**

Purpose: **Noncommercial Broadcast Stations Non-Biennial Ownership Report** | Status: **Received** | Status Date: **08/09/2018** | Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0006005672	UNIVERSITY OF NORTHWESTERN - ST. PAUL

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3003 SNELLING AVENUE NORTH	SAINT PAUL	MN	55113-1598	+1 (651) 631-5000	sajones@unwsp.edu

2. Contact Representative

Name	Organization
Joseph C. Chautin III	HARDY, CAREY, CHAUTIN & BALKIN, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1080 WEST CAUSEWAY APPROACH	Mandeville	LA	70471	+1 (985) 629-0777	jchautin@hardycarey.com

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Entity required to file a Form 323-E because it holds an attributable interest in one or more Licensees or Permittees
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	Transfer of control or assignment of license/permit
"As of" date	08/09/2018 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)
/Permittees(s)
and Station(s)
/Permit(s)**

Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/Permittee Name	FRN
UNW Media Holdings, LLC	0027364801

Fac. ID No.	Call Sign	City	State	Service
39380	KDSN	DENISON	IA	AM
39381	KDSN-FM	DENISON	IA	FM

Section II – Non-Biennial Ownership Information

**1. 47 C.F.R.
Section 73.3613
Documents**

Licensee/Permittee Respondents 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/Permittee 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) or Permittee(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) or Permittee(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	0006005672	
Entity Name	UNIVERSITY OF NORTHWESTERN - ST. PAUL	
Address	PO Box	
	Street 1	3003 SNELLING AVENUE NORTH
	Street 2	
	City	SAINT PAUL
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55113-1598
	Country (if non-U.S. address)	United States

Listing Type	Respondent	
Positional Interests (check all that apply)	Respondent	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information		
FRN	9990119968	
Name	Thor Becken	
Address	PO Box	
	Street 1	14 Forest Trail
	Street 2	
	City	Mahtomedi
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55115
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Businessman	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information		
FRN	9990119964	
Name	Dr. Alan S. Cureton	
Address	PO Box	
	Street 1	2514 Tournament Players Circle S
	Street 2	
	City	Blaine

	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55449
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - President; Trustee of Sole Member	
Principal Profession or Occupation	Educator	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119969	
Name	Mary Edwards	
Address	PO Box	
	Street 1	6170 Ridge Road
	Street 2	
	City	Shoreview
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55331
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Health Care	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information		
FRN	9990119970	
Name	Stan Erickson	
Address	PO Box	
	Street 1	10380 29th Ave N
	Street 2	
	City	Plymouth
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55440
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Businessman	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information		
FRN	9990119971	
Name	Ginger Ewing	
Address	PO Box	
	Street 1	12325 Cobblestone Ct
	Street 2	
	City	Rosemount
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55068
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Businesswoman	

By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119972	
Name	Ronald Halverson	
Address	PO Box	
	Street 1	3494 Tiffany Lane
	Street 2	
	City	Shoreview
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55126
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Retired	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119966	
Name	Dr. William Hamel	
Address	PO Box	
	Street 1	20501 Eastview Ave
	Street 2	
	City	Farmington
	State ("NA" if non-U.S. address)	MN

	Zip/Postal Code	55024
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Pastor	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119974	
Name	Judge Deborah Hedlund	
Address	PO Box	
	Street 1	2650 Sunlight Beach
	Street 2	
	City	Clinton
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	98236
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Adjunct Professor	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119975
------------	------------

Name	Dr. George Kenworthy	
Address	PO Box	
	Street 1	19015 31st Ave N
	Street 2	
	City	Plymouth
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55447
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Pastor	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119977	
Name	Arnold Lindstrand	
Address	PO Box	
	Street 1	3848 Vardon Place
	Street 2	
	City	Portland
	State ("NA" if non-U.S. address)	OR
	Zip/Postal Code	97229
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Retired	
By Whom Appointed or Elected	Board of Trustees	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119978	
Name	Michael Meloch	
Address	PO Box	
	Street 1	756 County Road I
	Street 2	
	City	Shoreview
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55126
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Businessman	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119967	
Name	Dr. Sara Robertson	
Address	PO Box	
	Street 1	2600 S Finley Road #3302
	Street 2	
	City	Lombard
	State ("NA" if non-U.S. address)	IL
	Zip/Postal Code	60148

	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Retired	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119980	
Name	Grover Sayre	
Address	PO Box	
	Street 1	5 Willow Road
	Street 2	
	City	North Oaks
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55127
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Attorney	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119965
Name	Daniel Stoltz

Address	PO Box	
	Street 1	V
	Street 2	
	City	Lino Lakes
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	55038
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Businessman	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information		
FRN	9990119981	
Name	Stewart Van Duzer	
Address	PO Box	
	Street 1	505 Rocking Porch Way
	Street 2	
	City	Woodstock
	State ("NA" if non-U.S. address)	GA
	Zip/Postal Code	30189
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Businessman	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values	Voting	0.0%

from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

Ownership Information

FRN	9990119982	
Name	David Venberg	
Address	PO Box	
	Street 1	12147 South Shady Pine Court
	Street 2	
	City	Parker
	State ("NA" if non-U.S. address)	CO
	Zip/Postal Code	80134
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Trustee of Sole Member	
Principal Profession or Occupation	Businessman	
By Whom Appointed or Elected	Board of Trustees	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Total assets (Equity Debt Plus)	0.0%
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)? 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
--	----

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: President Exact Legal Title or Name of Respondent: UNIVERSITY OF NORTHWESTERN ST PAUL Name: Alan S Cureton Phone: 6516315009 08/09/2018