



(REFERENCE COPY - Not for submission)

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

File Number: 0000089395 | Submit Date: 2019-11-14 | FRN: 0002590735

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 11/14/2019

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0002590735		KIRKWOOD COMMUNITY COLLEGE			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
6301 Kirkwood Blvd SW	Cedar Rapids	IA	52404	+1 (319) 398-5446	george@kcck.org

2. Contact Representative

Name		Organization			
Barry Persh		Dow Lohnes PLLC			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1200 New Hampshire Avenue NW, # 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	10/01/2019 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	
KIRKWOOD COMMUNITY COLLEGE			0002590735	

Fac. ID No.	Call Sign	City	State	Service
34952	K295AC	IOWA CITY	IA	FX
34954	KCKK-FM	CEDAR RAPIDS	IA	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	0002590735	
Entity Name	KIRKWOOD COMMUNITY COLLEGE	
Address	PO Box	
	Street 1	6301 Kirkwood Blvd SW
	Street 2	
	City	Cedar Rapids
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	52404
	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 (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	Equity	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?			No

Ownership Information			
FRN	9990119539		
Name	John Swanson		
Address	PO Box		
	Street 1	1519 Bilgarie Court NE	
	Street 2		
	City	Cedar Rapids	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	52402	
	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 Museum Director		
By Whom Appointed or Elected	District Voters		
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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

FRN	9990119535		
Name	Tracy Pearson		
Address	PO Box		
	Street 1	572 150th Street	
	Street 2		
	City	Mechanicsville	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	52306	
	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	Certified Public Accountant		
By Whom Appointed or Elected	District Voters		
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	0.0%	
	Equity	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?		No	

Ownership Information			
FRN	9990119541		
Name	Lorraine Williams		
Address	PO Box		
	Street 1	125 Green Meadows Drive	
	Street 2		
	City	Washington	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	52353	
	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	Restaurateur		
By Whom Appointed or Elected	District Voters		
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	0.0%	
	Equity	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?		No	

Ownership Information		
FRN	9990119426	
Name	Carrie Anderson	
Address	PO Box	
	Street 1	6301 Kirkwood Blvd SW
	Street 2	
	City	Cedar Rapids
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	52404
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Other - Kirkwood Board Secretary	
Principal Profession or Occupation	Education Support	
By Whom Appointed or Elected	Kirkwood Board	
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	0.0%	
	Equity	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?			No

Ownership Information			
FRN	9990119536		
Name	Rose Rennekamp		
Address	PO Box		
	Street 1	2312 Deer Run NE	
	Street 2		
	City	North Liberty	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	52317	
	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 marketing executive		
By Whom Appointed or Elected	District Voters		
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	0.0%	
	Equity	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?			No

Ownership Information		
FRN	9990119540	
Name	Joel Thys	
Address	PO Box	

	Street 1	2015 78th Street	
	Street 2		
	City	Blairstown	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	52209	
	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	Owner Auto Dealerships		
By Whom Appointed or Elected	District Voters		
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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information		
FRN	9990119534	
Name	James Mollenhauer	
Address	PO Box	
	Street 1	4115 Winslow Road
	Street 2	
	City	Marion
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	52302
	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 bank executive		
By Whom Appointed or Elected	District Voters		
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)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information		
FRN	9990119429	
Name	Alan Jensen	
Address	PO Box	
	Street 1	705 West Broad Street
	Street 2	
	City	North English
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	52316
	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 School Superintendent	
By Whom Appointed or Elected	District Voters	
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)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990119538	
Name	Keith Stamp	
Address	PO Box	
	Street 1	17782 222 Street
	Street 2	
	City	Monticello
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	52310
	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	Regional Administrator Grant Wood Area Education Agency	
By Whom Appointed or Elected	District Voters	
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)	0.0%
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	0028962330	
Name	Steven Oval	
Address	PO Box	
	Street 1	138 Guildford Ave. SE
	Street 2	

	<div>City</div>	Cedar Rapids
	<div>State ("NA" if non-U.S. address)</div>	IA
	<div>Zip/Postal Code</div>	52403
	<div>Country (if non-U.S. address)</div>	United States
<div>Listing Type</div>	Other Interest Holder	
<div>Positional Interests<div>(check all that apply)</div></div>	Member of Governing Board (or other governing entity)	
<div>Principal Profession or Occupation</div>	Retired legislative consultant.	
<div>By Whom Appointed or Elected</div>	District Voters	
<div>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</div>	<div>Citizenship</div>	US
	<div>Gender</div>	Male
	<div>Ethnicity</div>	Not Hispanic or Latino
	<div>Race</div>	White
<div>Interest Percentages<div>(enter percentage values from 0.0 to 100.0)</div></div>	<div>Voting</div>	0.0%
	<div>Equity</div>	0.0%
	<div>Total assets (Equity Debt Plus)</div>	0.0%
<div>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</div>		No

Ownership Information		
<div>FRN</div>	9990136864	
<div>Name</div>	Laurie Sundberg	
<div>Address</div>	<div>PO Box</div>	
	<div>Street 1</div>	6301 Kirkwood Boulevard SW
	<div>Street 2</div>	
	<div>City</div>	Cedar Rapids
	<div>State ("NA" if non-U.S. address)</div>	IA
	<div>Zip/Postal Code</div>	52404
	<div>Country (if non-U.S. address)</div>	United States
<div>Listing Type</div>	Other Interest Holder	
<div>Positional Interests<div>(check all that apply)</div></div>	Officer	
<div>Principal Profession or Occupation</div>	President Kirkwood Community College	

By Whom Appointed or Elected	Kirkwood Board	
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	0.0%
	Equity	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?		No

(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
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(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
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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.

Kirkwood Community College is a public, state institution of education governed by its Board of Trustees, and 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: President Exact Legal Title or Name of Respondent: Kirkwood Community College Name: Laurie Sundberg Phone: 3193985500 11/14/2019
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