



(REFERENCE COPY - Not for submission)

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

File Number: **0000093194** | Submit Date: **2019-12-12** | FRN: **0002586535**Purpose: **Noncommercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **12/12/2019**Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0002586535	Iowa Public Broadcasting Board

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 6450 6450 Corporate Drive	Johnston	IA	50131	+1 (515) 725- 9700	molly@iptv. 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
2233 Wisconsin Ave., NW Suite 226	Washington	DC	20007	+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
Iowa Public Broadcasting Board	0002586535

Fac. ID No.	Call Sign	City	State	Service
5471	KQIN	DAVENPORT	IA	DTV
29085	KHIN	RED OAK	IA	DTV
29086	KYIN	MASON CITY	IA	DTV
29095	KIIN	IOWA CITY	IA	DTV
29096	KSIN-TV	SIOUX CITY	IA	DTV
29100	KTIN	FORT DODGE	IA	DTV
29102	KDIN-TV	DES MOINES	IA	DTV
29108	KBIN-TV	COUNCIL BLUFFS	IA	DTV
29114	KRIN	WATERLOO	IA	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	BOARD BYLAWS
Parties to contract or instrument	ENTITY
Date of execution	08/2006
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: BYLAWS

Document Information	
Description of contract or instrument	PBS USERS AGREEMENT
Parties to contract or instrument	PBS
Date of execution	07/1974
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		
FRN	0002586535	
Entity Name	Iowa Public Broadcasting Board	
Address	PO Box	6450
	Street 1	6450 Corporate Drive
	Street 2	
	City	Johnston
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50131
	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	9990118172	
Name	Jason Giles	
Address	PO Box	

	Street 1	4008 156th Street
	Street 2	
	City	Urbandale
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50323
	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	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	11.1%
	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	9990118169	
Name	Sherry A. Bates	
Address	PO Box	
	Street 1	1759 E. Ave.
	Street 2	
	City	Scranton
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	51462
	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	Regent	
By Whom Appointed or Elected	Board of Regents	
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	11.1%
	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	9990118167	
Name	Kevin Krause	
Address	PO Box	
	Street 1	5626 Glen Oaks Pt.
	Street 2	
	City	West Des Moines
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50266
	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	Professor	
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	11.1%
	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%

	Plus)	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	9990118174	
Name	Bruce G. McKee	
Address	PO Box	
	Street 1	12182 Partridge Ave.
	Street 2	
	City	Mason City
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50401
	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 educator, technology coordinator	
By Whom Appointed or Elected	Iowa Association of Community College Trustees	
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	11.1%
	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	9990118173	
Name	Courtney Maxwell Greene	
Address	PO Box	
	Street 1	214 NE 64th Street
	Street 2	
	City	Pleasant Hill

	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50327
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Vice President Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Communications Director for the Alzheimer's Association Iowa Chapter	
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	American Indian or Alaska Native, Black or African American
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	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	9990118185	
Name	Gary W. Steinke	
Address	PO Box	
	Street 1	9601 Madison Ave.
	Street 2	
	City	Urbandale
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50322
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - President Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	President, Iowa Association of Independent Colleges and Universities	
By Whom Appointed or Elected	Private Colleges and Universities Association	

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	11.1%
	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	9990118170	
Name	Angela M. English	
Address	PO Box	
	Street 1	570 Country Club Ct.
	Street 2	
	City	Dyersville
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	52040
	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	Homemaker	
By Whom Appointed or Elected	State Board of Education	
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	11.1%
	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	9990118171	
Name	Julia Doll	
Address	PO Box	
	Street 1	515 East Locust Street, # 500 N
	Street 2	
	City	Des Moines
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50309
	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	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	11.1%
	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	9990136945	
Name	Kevin Fangman	
Address	PO Box	
	Street 1	7059 Oak Brook Drive
	Street 2	
	City	Urbandale
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50322
	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	Education Administrator	
By Whom Appointed or Elected	AEA Administrators	
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	11.1%
	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?		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.

Iowa Public Broadcasting Board is a governmental entity in the state of Iowa, and is 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: Executive Director and General Manager Exact Legal Title or Name of Respondent: Iowa Public Broadcasting Board Name: Molly M. Phillips Phone: 5157259701 12/12/2019