



(REFERENCE COPY - Not for submission)

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

File Number: 0000097327 | Submit Date: 2020-01-14 | FRN: 0003916293

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 01/14/2020

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0003916293		NORTHERN MINNESOTA PUBLIC TELEVISION INC			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
108 Grant Ave NE	Bemidji	MN	56601	+1 (218) 751-3407	admin@lptv.org

2. Contact Representative

Name		Organization			
William Michael Sanford		Northern Minnesota Public Television, Inc.			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
108 Grant Ave NE	Bemidji	MN	56601	+1 (218) 333-3015	bsanford@lptv.org

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
NORTHERN MINNESOTA PUBLIC TELEVISION INC	0003916293

Fac. ID No.	Call Sign	City	State	Service
49578	Kawe	Bemidji	MN	DTV
49579	KAWB	BRAINERD	MN	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	NMPTV Articles of Incorporation
Parties to contract or instrument	Northern Minnesota Public Television, Inc.
Date of execution	06/1976
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> Articles of Incorporation

Document Information	
Description of contract or instrument	NMPTV Bylaws
Parties to contract or instrument	Northern Minnesota Public Television, Inc.
Date of execution	12/2012
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> NMPTV Bylaws

Document Information	
Description of contract or instrument	NMPTV, Inc. PBS Membership Certification for FY20
Parties to contract or instrument	PBS Northern Minnesota Public television, Inc.
Date of execution	07/2019
Date of expiration	07/2020
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	0003916293	
Entity Name	NORTHERN MINNESOTA PUBLIC TELEVISION INC	
Address	PO Box	
	Street 1	108 Grant Ave NE
	Street 2	
	City	Bemidji
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56601
	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	9990122017	
Name	Gary Block	
Address	PO Box	
	Street 1	112 SE 4th St
	Street 2	
	City	Little Falls
	State ("NA" if non-U.S. address)	MN

	address)	
	Zip/Postal Code	56345
	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	Tourism Business Owner	
By Whom Appointed or Elected	Elected by Board	
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	7.1%
	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

Ownership Information		
FRN	9990122143	
Name	Joseph Breiter	
Address	PO Box	
	Street 1	3634 Summer Ct
	Street 2	
	City	Brainerd
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56401
	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	Marketing Management Professional	
By Whom Appointed or Elected	Elected by Board	
Citizenship, Gender,	Citizenship	US

Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%
	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

Ownership Information		
FRN	9990122146	
Name	Ray Gildow	
Address	PO Box	
	Street 1	12880 267th Ave
	Street 2	
	City	Staples
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56479
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired Educator	
By Whom Appointed or Elected	Elected by Board	
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	7.1%
	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

Ownership Information	
FRN	9990122148

Name	James Hanko		
Address	PO Box		
	Street 1	3405 Riverside Drive NE	
	Street 2		
	City	Bemidji	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	56601	
	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 Hospital Administrator		
By Whom Appointed or Elected	Elected by Board		
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	7.1%	
	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	

Ownership Information			
FRN	9990122149		
Name	Susan Holden		
Address	PO Box		
	Street 1	901 Marquette Ave, Suite 500	
	Street 2		
	City	Minneapolis	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55402	
	Country (if non-U.S. address)	United States	
Listing Type	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>	Attorney		
<b>By Whom Appointed or Elected</b>	Elected by Board		
<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>	7.1%	
	<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>		No	

Ownership Information		
<b>FRN</b>	9990122151	
<b>Name</b>	Paul Hunt	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	2322 Dancing Wind Rd SW
	<b>Street 2</b>	
	<b>City</b>	Pine River
	<b>State ("NA" if non-U.S. address)</b>	MN
	<b>Zip/Postal Code</b>	56474
	<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>	R and D CEO	
<b>By Whom Appointed or Elected</b>	Elected by Board	
<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	<b>Voting</b>	7.1%

from 0.0 to 100.0)	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?		No

Ownership Information		
FRN	9990122153	
Name	Milt Lee	
Address	PO Box	
	Street 1	PO Box 711
	Street 2	
	City	Cass Lake
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56633
	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 Film Maker	
By Whom Appointed or Elected	Elected by Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.1%
	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

Ownership Information		
FRN	9990122156	
Name	Michael Smith	
Address	PO Box	
	Street 1	1525 5th St NE
	Street 2	



	City	Bemidji	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	56601	
	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 Manager		
By Whom Appointed or Elected	Elected by Board		
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	7.1%	
	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	

Ownership Information		
FRN	9990122157	
Name	Ann Marie Ward	
Address	PO Box	
	Street 1	525 Spruce Grove Lane NW
	Street 2	
	City	Bemidji
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56601
	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	Educator	
By Whom Appointed or	Elected by Board	

Elected		
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	7.1%
	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

Ownership Information		
FRN	9990122160	
Name	Ryan Welle	
Address	PO Box	
	Street 1	2800 Birchmont Drive NE
	Street 2	
	City	Bemidji
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56601
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Banking	
By Whom Appointed or Elected	Elected by Board	
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	7.1%
	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

Ownership Information		
FRN	9990122161	
Name	Bryan Westerman	
Address	PO Box	
	Street 1	8900 N Grace Lake Rd SE
	Street 2	
	City	Bemidji
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56601
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Finance	
By Whom Appointed or Elected	Elected by Board	
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	7.1%
	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

Ownership Information		
FRN	9990122163	
Name	Kim Williams	
Address	PO Box	
	Street 1	3345 River Park Court
	Street 2	
	City	Bemidji
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56601

	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired Educator	
By Whom Appointed or Elected	Elected by 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	7.1%
	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

Ownership Information		
FRN	9990122165	
Name	Debra Zipf	
Address	PO Box	
	Street 1	27128 370th Ave
	Street 2	
	City	Hillman
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56338
	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 IT Professional	
By Whom Appointed or Elected	Elected by 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	7.1%
	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

Ownership Information		
FRN	9990124864	
Name	William Michael Sanford	
Address	PO Box	
	Street 1	4497 Carver Rd NE
	Street 2	
	City	Bemidji
	State ("NA" if non-U.S. address)	MN
	Zip/Postal Code	56601
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	NMPTV CEO	
By Whom Appointed or Elected	Board of Directors	
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?		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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<p><b>(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b></p> <p>If "<u>Yes</u>," 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.</p>	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.**

Northern Minnesota Public Television, Inc. is the licensee who controls and operates the stations KAWE & KAWB, which are the stations covered in this report filing. 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>CEO</b> Exact Legal Title or Name of Respondent: <b>Northern Minnesota Public Television, Inc.</b> Name: <b>William Michael Sanford</b> Phone: <b>2183333015</b>  01/14/2020