

(REFERENCE COPY - Not for submission)

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

File Number: 0000170854 | Submit Date: 2021-11-23 | FRN: 0001624527

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/23/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0001624527	The University of Montana

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
Broadcast Media Center 32 Campus Drive	Missoula	MT	59812	+1 (406) 243- 4154	ray. ekness@umontana. edu

2. Contact Representative

Name	Organization
Margaret L. Miller	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- 2914	mmiller@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	10/01/2021
	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
The University of Montana	0001624527

Fac. ID No.	Call Sign	City	State	Service
66611	KUFM-TV	MISSOULA	MT	DTV
66627	KUKL	KALISPELL	MT	FM
66628	KUHM	HELENA	MT	FM
66629	KUFN	HAMILTON	MT	FM
66630	KAPC	BUTTE	MT	FM
69239	KUFM	MISSOULA	MT	FM
78334	KBGA	MISSOULA	MT	FM
173197	КРЈН	POLSON	MT	FM
173730	KUFL	LIBBY	MT	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.

Document Information			
Description of contract or instrument	PBS Membership Agreement		
Parties to contract or instrument	PUBLIC BROADCASTING SERVICE		
Date of execution	07/2021		
Date of expiration	06/2022		
Agreement type (check all that apply)	Other Agreement Type: PBS Membership 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	0001624527	0001624527		
Entity Name	The University of Montana			
Address	РО Вох	PO Box		
	Street 1	Broadcast Media Center		
	Street 2	32 Campus Drive		
	City	Missoula		
	State ("NA" if non-U.S. address)	MT		
	Zip/Postal Code	59812		
	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	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages	Voting	Voting 0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

Ownership Information			
FRN	9990117859		
Name	Robert A. Nystuen		
Address	PO Box 705		
	Street 1		
	Street 2		
	City	Lakeside	
	State ("NA" if non-U.S.	MT	

	address)		
	Zip/Postal Code	59922	
	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,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations Yes	

Ownership Information		
FRN	9990117864	
Name	Casey Lozar	
Address	PO Box	
	Street 1	21 Mueller Ct.
	Street 2	
	City Helena State ("NA" if non-U.S. MT address) Zip/Postal Code 59601	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Chair, Board of Regents, Montana University SystemMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Economic Development	
By Whom Appointed or Elected	Governor	
Citizenship, Gender,	Citizenship	US

Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	American Indian or Alaska Native, 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 that do not appear on this report?		or more broadcast stations Yes

Ownership Information			
FRN	9990137571		
Name	Joyce Dombrouski		
Address	PO Box		
	Street 1	5795 Lariat Loop	
	Street 2		
	City	Missoula	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59808	
	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	Hospital Administrator		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations Yes	

		Ownership Information		
9990137574				
9990137374				
	9990137574	9990137574		

Name	Brianne Rogers		
Address	PO Box		
	Street 1	355 Concord Drive	
	Street 2		
	City	Bozeman	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59715	
	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	Business Consultant		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information		
FRN	9990145624	
Name	Loren Bough	
Address	PO Box 160909	
	Street 1	
	Street 2	
	City	Big Sky
	State ("NA" if non-U.S. address)	MT
	Zip/Postal Code	59716
	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	Financial Services	
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	Voting	14.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations Yes

Ownership Information			
FRN	9990145625		
Name	Todd Buchanan		
Address	РО Вох		
	Street 1	14 North 24th Street	
	Street 2		
	City	Billings	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59101	
	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	Financial Services		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values			

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

Ownership Information			
FRN	9990145626		
Name	Amy Sexton		
Address	PO Box		
	Street 1	393 Moccasin Trail	
	Street 2		
	City	Billings	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59105	
	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,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one or report?	r more broadcast stations	Yes

Ownership Information			
FRN	9990145851		
Name	Seth Bodnar		
Address	РО Вох		
	Street 1	Office of the President	
	Street 2	University Hall, University of Montana	

	City	Missoula		
	State ("NA" if non-U.S. address)	MT		
	Zip/Postal Code	59801		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - President, University of Montana			
Principal Profession or Occupation	University Administration			
By Whom Appointed or Elected	Montana University System Board of Regents			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No	

Ownership Information			
FRN	9990145852		
Name	Jennifer Petty		
Address	PO Box		
	Street 1	32 Campus Drive	
	Street 2		
	City	Missoula	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code	59812	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Vice President Marketing and Communications, University of Montana		
Principal Profession or Occupation	University Administration		
By Whom Appointed or	University		

Elected		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	0.0%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information				
FRN	9990145857			
Name	Elsie Arntzen			
Address	РО Вох	203201		
	Street 1	560 N. Park Ave.		
	Street 2			
	City	Helena		
	State ("NA" if non-U.S. address)	MT		
	Zip/Postal Code	59620		
	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	Superintendent of Public Instruction			
By Whom Appointed or Elected	Ex-Officio			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes	

Ownership Information				
FRN	9990145860			
Name	Clayton Christian	Clayton Christian		
Address	PO Box	203201		
	Street 1	560 N. Park Ave.		
	Street 2			
	City	Helena		
	State ("NA" if non-U.S. address)	MT		
	Zip/Postal Code	59620		
	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	Commissioner of Higher Education			
By Whom Appointed or Elected	Ex Officio	Ex Officio		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations Yes		

Ownership Information			
FRN	9990145861		
Name	Greg Gianforte		
Address	PO Box 203201		
	Street 1	560 N. Park Ave.	
	Street 2		
	City	Helena	
	State ("NA" if non-U.S. address)	MT	
	Zip/Postal Code 59620		

	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)				
Principal Profession or Occupation	Governor of Montana				
By Whom Appointed or Elected	Ex Officio				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	White			
Interest Percentages	Voting	0.0%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
	Total assets (Equity Debt Plus)				
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations Yes			

Ownership Information				
FRN	9990145862			
Name	Reed Humphrey			
Address	РО Вох			
	Street 1	32 Campus Hall		
	Street 2			
	City	Missoula		
	State ("NA" if non-U.S. address)	MT		
	Zip/Postal Code	59812		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Acting Provost			
Principal Profession or Occupation	University Administration	University Administration		
By Whom Appointed or Elected	University			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	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

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
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.	

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 University of Montana is part of the Montana University System and reports the Board of Regents of the System as its governing board. 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 LICENSEOR 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: Director, UM Broadcast Media Center Exact Legal Title or Name of Respondent: The University of Montana Name: Raymond Ekness Phone: 4062434154 11/23/2021