

(REFERENCE COPY - Not for submission)

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

File Number: 0000098893 | Submit Date: 2020-01-21 | FRN: 011876604

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/21/2020

Filing Status: Active

#### **Section I - General Information**

### 1. Respondent

FRN	Entity Name	
0011876604	KLPR-FM, University of Nebraska at Kearney	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
Mitchell Center, University of Nebraska at Kearney	Kearney	NE	68849	+1 (308) 865- 8249	clarkf2@unk. edu

# 2. Contact Representative

Name	Organization	
Ford Clark	University of Nebraska at Kearney	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
134 Mitchell Center, University of Nebraska at Kearney	Kearney	NE	68849	+1 (308) 865-8250	clarkf2@unk.edu

# 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?		Yes		

(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
KLPR-FM, University of Nebraska at Kearney	0011876604

Fac. ID No.	Call Sign	City	State	Service
33787	KLPR	KEARNEY	NE	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	0011876604			
Entity Name	KLPR-FM, University of Nebraska at Kearney			
Address	PO Box			
	Street 1	Mitchell Center, University of Nebraska at Kearney		
	Street 2			
	City	Kearney		

	State ("NA" if non-U.S. address)	NE		
	Zip/Postal Code	68849		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	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	Voting	Voting 0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
Total assets (Equity Debt 0.0% Plus)				
	Does interest holder have an attributable interest in one or more broadcast stations  No that do not appear on this report?			

Ownership Information				
FRN	9990139910			
Name	Aya Yousuf			
Address	PO Box			
	Street 1	Student Government Office		
	Street 2	6001 Dodge Street		
	City	Omaha		
	State ("NA" if non-U.S. address)	NE		
	Zip/Postal Code	68182		
	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	Voters at the University of Ne	Voters at the University of Nebraska at Omaha		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values				
from 0.0 to 100.0)				

	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information		
FRN	9990131598	
Name	Paul Kinney	
Address	РО Вох	
	Street 1	15612 115th Road
	Street 2	
	City	Amherst
	State ("NA" if non-U.S. address)	NE
	Zip/Postal Code	68812
	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	None	
By Whom Appointed or Elected	Elected by voters	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	8.3%
(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 No

Ownership Information			
FRN	9990139911		
Name	Nicole Kent	Nicole Kent	
Address	РО Вох	PO Box	
	Street 1 142 Nebraskan Student Union		
		·	

	Street 2		
	City	Kearney	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68849	
	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	Voters at the University of Nebraska at Kearney		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(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	r more broadcast stations	No

Ownership Information			
FRN	9990131614	9990131614	
Name	Jim Pillen	Jim Pillen	
Address	РО Вох		
	Street 1	3214 25th Street	
	Street 2		
	City	Coilumbus	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68601	
	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	Member of Governing Board (or other governing entity)	

Principal Profession or Occupation	Business Person		
By Whom Appointed or Elected	Elected by Voters		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(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 or more broadcast stations  No that do not appear on this report?		

Ownership Information			
FRN	9990139912	9990139912	
Name	Elizabeth O'Connor		
Address	РО Вох		
	Street 1	5145 Franklin Street	
	Street 2		
	City	OMaha	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68104	
	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	Elected by voters		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information			
FRN	9990139915		
Name	Barbara Weitz		
Address	РО Вох		
	Street 1	110 N 92nd St	
	Street 2		
	City	Omaha	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68114	
	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	Elected by voters		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	8.3%	
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?			

Ownership Information		
FRN	9990131632	
Name	Howard L. Hawks	
Address	PO Box	
	Street 1	14302 FNB Parkway
	Street 2	

	City	Omaha	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68154	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Executive		
By Whom Appointed or Elected	Elected by voters	Elected by voters	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(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 or	or more broadcast stations	No

Ownership Information			
FRN	9990139921		
Name	Keith Ozanne		
Address	PO Box		
	Street 1	University of Nebraska Medical Center	
	Street 2	6001 Bennet Hall	
	<b>City</b> Omaha		
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68198	
	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	Voters at the University of Omaha Medical Center	
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	8.3%
	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	9990131648	
Name	Bob Phares	
Address	PO Box	
	Street 1	320 McNeel Lane
	Street 2	
	City	North Platte
	State ("NA" if non-U.S. address)	NE
	Zip/Postal Code 69101	
	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 Person	
By Whom Appointed or Elected	Elected by voters	
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	8.3%
	Equity	0.0%
	Total assets (Equity Debt Plus)	

Does interest holder have an attributable interest in one or more broadcast stations	
that do not annear on this report?	

No

Ownership Information			
FRN	9990131651		
Name	Robert Schafer		
Address	PO Box 838		
	Street 1	609 Elk Street	
	Street 2		
	City	Beatrice	
	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68310	
Country (if non-U.S. United States 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	Elected by voters		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this	an attributable interest in one oreport?	r more broadcast stations No	

Ownership Information		
FRN	9990139927	
Name	Emily Johnson	
Address	PO Box	
	Street 1	601 N 16th St
	Street 2	
	City	Lincoln

	State ("NA" if non-U.S. address)	NE	
	Zip/Postal Code	68508	
	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	Students at the University of Nebraska at Lincoln		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(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	No

Ownership Information		
FRN	9990131657	
Name	Timothy Clare	
Address	РО Вох	
	Street 1	3 Landmark Centre
	Street 2	
	City Lincoln	
	State ("NA" if non-U.S. NE address)  Zip/Postal Code 68508	
	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	Elected by 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	8.3%	
	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
• • •	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

interests, not reported in this filing are non-attributable.

If "No," submit as an exhibit an explanation.

(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.

### 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: General Manager Exact Legal Title or Name of Respondent: General Manager Name: Ford Clark Phone: 3088658250  01/21/2020