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

File Number: **0000100739** | Submit Date: **2020-01-27** | FRN: **0008261745**

Purpose: **Noncommercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **01/27/2020**

Filing Status: **Active**

## Section I - General Information

### 1. Respondent

FRN	Entity Name
0008261745	Sunrise Communications Inc

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3534 SOUTH 48TH STREET SUITE 6	LINCOLN	NE	68506	+1 (402) 474-5086	PROGRAMMING@KZUM.ORG

### 2. Contact Representative

Name	Organization
Melodie Virtue	Foster Garvey P.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac Street, NW Suite 200	Washington	DC	20007	+1 (202) 965-7880	melodie.virtue@foster.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
Sunrise Communications Inc	0008261745

Fac. ID No.	Call Sign	City	State	Service
63955	KZUM	LINCOLN	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.

Document Information	
Description of contract or instrument	Restated Articles of Incorporation
Parties to contract or instrument	State of Nebraska
Date of execution	06/2013
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> Restated Articles of Incorporation

Document Information	
Description of contract or instrument	Restated Bylaws
Parties to contract or instrument	Sunrise Communications, Inc.
Date of execution	09/2012
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> Restated Bylaws

**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		
<b>FRN</b>	0008261745	
<b>Entity Name</b>	Sunrise Communications Inc	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	3534 SOUTH 48TH STREET
	<b>Street 2</b>	SUITE 6
	<b>City</b>	LINCOLN
	<b>State ("NA" if non-U.S. address)</b>	NE
	<b>Zip/Postal Code</b>	68506
	<b>Country (if non-U.S. address)</b>	United States
<b>Listing Type</b>	Respondent	
<b>Positional Interests</b> (check all that apply)	Respondent	
<b>Tribal Nation or Tribal Entity</b>	Interest holder is not a Tribal nation or Tribal entity	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	0.0%
<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>	0027268887	
<b>Name</b>	Kyle R. Gibson	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	1320 Q Street
	<b>Street 2</b>	
	<b>City</b>	Lincoln
	<b>State ("NA" if non-U.S. address)</b>	NE
	<b>Zip/Postal Code</b>	68508
	<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>	Professor and Administrator	
<b>By Whom Appointed or Elected</b>	Board of Directors	
<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 from 0.0 to 100.0)	<b>Voting</b>	12.5%
	<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>	0027268853	
<b>Name</b>	Deborrah Higuchi	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	2450 Adams Street
	<b>Street 2</b>	
	<b>City</b>	Ashland
	<b>State ("NA" if non-U.S. address)</b>	NE
	<b>Zip/Postal Code</b>	68003
	<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)	Officer, Other - Vice ChairMember of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Research Scientist	
<b>By Whom Appointed or Elected</b>	Board of Directors	
<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>	Asian
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	12.5%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	

	<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>	0027268804	
<b>Name</b>	Matthew G. Lehnert	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	2918 O'Malley Circle
	<b>Street 2</b>	
	<b>City</b>	Lincoln
	<b>State ("NA" if non-U.S. address)</b>	NE
	<b>Zip/Postal Code</b>	68516
	<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>	Realtor	
<b>By Whom Appointed or Elected</b>	Board of Directors	
<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 from 0.0 to 100.0)	<b>Voting</b>	12.5%
	<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>	0027272103	
<b>Name</b>	Jeremiah Moore	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	4100 South 43rd Street
	<b>Street 2</b>	

	<b>City</b>	Lincoln
	<b>State ("NA" if non-U.S. address)</b>	NE
	<b>Zip/Postal Code</b>	68506
	<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>	Music Venue Owner	
<b>By Whom Appointed or Elected</b>	Board of Directors	
<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 from 0.0 to 100.0)	<b>Voting</b>	12.5%
	<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>	0027268861	
<b>Name</b>	Kacey C. Nelkin Pedersen	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	5120 Union Hill Road
	<b>Street 2</b>	
	<b>City</b>	Lincoln
	<b>State ("NA" if non-U.S. address)</b>	NE
	<b>Zip/Postal Code</b>	68516
	<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)	Officer, Other - SecretaryMember of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Grants Coordinator	

<b>By Whom Appointed or Elected</b>	Board of Directors	
<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>	12.5%
	<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>	0027271923	
<b>Name</b>	Rena E. Ninneman	
<b>Address</b>	<b>PO Box</b>	
	<b>Street 1</b>	3125 C Street
	<b>Street 2</b>	
	<b>City</b>	Lincoln
	<b>State ("NA" if non-U.S. address)</b>	NE
	<b>Zip/Postal Code</b>	68510
	<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)	Officer, Other - ChairMember of Governing Board (or other governing entity)	
<b>Principal Profession or Occupation</b>	Program Coordinator	
<b>By Whom Appointed or Elected</b>	Board of Directors	
<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>	12.5%
	<b>Equity</b>	0.0%
	<b>Total assets (Equity Debt Plus)</b>	

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?	No
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Ownership Information		
FRN	9990140516	
Name	Kelsey Liddy	
Address	PO Box	
	Street 1	700 South 52st Street
	Street 2	
	City	Lincoln
	State ("NA" if non-U.S. address)	NE
	Zip/Postal Code	68510
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - TreasurerMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Director of Finance	
By Whom Appointed or Elected	Board of Directors	
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	12.5%
	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	9990140517	
Name	Matthew Bokovoy	
Address	PO Box	
	Street 1	720 C Street
	Street 2	
	City	Lincoln



	<b>State ("NA" if non-U.S. address)</b>	NE
	<b>Zip/Postal Code</b>	68502
	<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>	Senior Acquisitions Editor	
<b>By Whom Appointed or Elected</b>	Board of Directors	
<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 from 0.0 to 100.0)	<b>Voting</b>	12.5%
	<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

<b>(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.</b> If "No," submit as an exhibit an explanation.	Yes
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<b>(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b>  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.**

Licensee has no parent entity.

### Section III - Certification

#### Certification

Section	Question	Response
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<b>Authorized Party to Sign</b>	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).	
<b>Certification</b>	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>Board Chair</b> Exact Legal Title or Name of Respondent: <b>Sunrise Communications, Inc.</b> Name: <b>Matthew G. Lehnert</b> Phone: <b>4024745086</b>  01/27/2020