

(REFERENCE COPY - Not for submission)

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

File Number: **0000170474** Submit Date: **2021-11-22** FRN: **0005672175**

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/22/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0005672175	University of Northern Iowa

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U. S. address)	Zip Code	Phone	Email
324 Communications Arts Center	Cedar Falls	IA	50614	+1 (515) 725-1705	kedmister@iowapublicradio. org

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.

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?			

(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
University of Northern Iowa	0005672175

Fac. ID No.	Call Sign	City	State	Service
69027	KHKE	CEDAR FALLS	IA	FM
69035	KRNI	MASON CITY	IA	AM
69158	KUNI	CEDAR FALLS	IA	FM
69284	KNSM	MASON CITY	IA	FM
83086	KICW	OTTUMWA	IA	FM
83540	KNSB	BETTENDORF	IA	FM
85606	KNSY	DUBUQUE	IA	FM
90336	KICJ	MITCHELLVILLE	IA	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	Management Agreement			
Parties to contract or instrument	Iowa Public Radio, Inc., Iowa State University of Science and Technology, University of Iowa, University of Northern Iowa.			
Date of execution	07/2013			
Date of expiration	06/2023			
Agreement type (check all that apply)	Other Agreement Type: Management Agreement for noncommercial educational radio stations, as extended by three years through June 2023.			

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	0005672175	0005672175			
Entity Name	University of Northern Iowa				
Address	РО Вох				
	Street 1	324 Communications Arts Cer	nter		
	Street 2				
	City	Cedar Falls			
	State ("NA" if non-U.S. address)	IA			
	Zip/Postal Code	50614			
	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 r	nation or Tribal entity			
Interest Percentages	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	9990126701	9990126701			
Name	Nancy Dunkel	Nancy Dunkel			
Address	РО Вох				
	Street 1	11789 Hickory Lane			
	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	Other Interest Holder			

Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Executive Director, Dyersville Area Community Foundation			
By Whom Appointed or Elected	Governor, State of Iowa			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	11.1%		
(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 Yes that do not appear on this report?				

Ownership Information		
FRN	9990126676	
Name	Michael Richards	
Address	PO Box	
	Street 1	5465 Mills Civic Parkway
	Street 2	Suite 400
	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)	Officer, Other - President, Board of Regents, State of IowaMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Former Vice Chair and Managing Partner, Quatro Composites	
By Whom Appointed or Elected	Governor, State of Iowa	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting 11.1%	
(enter percentage values		

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder hav that do not appear on thi	e an attributable interest in one o	r more broadcast stations	Yes

FRN	9990126689	
Name	Sherry Bates	
	Sherry Bates	
Address	PO Box	
	Street 1	1759 E Avenue
	Street 2	
	City	Scranton
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	51462
	Country (if non-U.S. address)	United States
_isting Type	Other Interest Holder	
Positional Interests check all that apply)	Officer, Other - President Pro Tem, Board of Regents, State of IowaMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Social Worker	
By Whom Appointed or Elected	Governor, State of Iowa	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race nformation (Natural	Gender	Female
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
nterest Percentages	Voting	11.1%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	

Ownership Information		
FRN	9990126694	
Name	Nancy Boettger	
Address	PO Box	
	Street 1	926 Ironwood Road

	Street 2		
	City	Harlan	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	51537	
	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	Retired Farmer and Educator		
By Whom Appointed or Elected	Governor, State of Iowa		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	11.1%	
(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	r more broadcast stations Yes	

Ownership Information			
FRN	9990126699	9990126699	
Name	Milt J. Dakovich		
Address	PO Box		
	Street 1	1967 Kitty Hawk Drive	
	Street 2 City Waterloo		
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50701	
	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	President of Aspro, Inc.	
By Whom Appointed or Elected	Governor, State of Iowa	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	11.1%
(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	9990139905	
Name	David Barker	
Address	PO Box	
	Street 1	114 1/2 East College
	Street 2	
	City	Iowa City
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	52240
	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	Partner, Barker Companies	
By Whom Appointed or Elected	Governor, State of Iowa	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	11.1%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%

	Total assets (Equity Debt Plus)	0.0%	
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	9990139907		
Name	Jim Lindenmayer		
Address	РО Вох		
	Street 1	440 East Manning	
	Street 2		
	City	Ottumwa	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	52501	
	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		
By Whom Appointed or Elected	Governor, State of Iowa		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one o	r more broadcast stations Yes	

Ownership Information			
FRN	9990126775	9990126775	
Name	Mark A. Nook	Mark A. Nook	
Address	РО Вох		
	Street 1	Seerley Hall 1	
	Street 2	University of Northern Iowa	
		'	

	City	Cedar Falls	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50614	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - President, Uni	versity of Northern Iowa	
Principal Profession or Occupation	University Administrator	University Administrator	
By Whom Appointed or Elected	Board of Regents, State of Iowa		
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)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information		
FRN	9990146335	
Name	Abby Crow	
Address	PO Box	
	Street 1	709 Redbird Run
	Street 2	
	City Tiffin	
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code 52340	
	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, State of Iowa	
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)	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations Yes

Ownership Information		
FRN	9990146342	
Name	Greta Rouse	
Address	РО Вох	
	Street 1	4061 370th Street
	Street 2	
	City	Emmetsburg
	State ("NA" if non-U.S. address)	IA
	Zip/Postal Code	50536
	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	Former Executive Manager, Great Lakes Communications Corp.	
By Whom Appointed or Elected	Governor, State of Iowa	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural Persons Only)	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)	

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

Yes

Ownership Information			
FRN	9990146367		
Name	Cassie Mathes		
Address	РО Вох		
	Street 1	East Bartlett 126	
	Street 2	University of Northern Iowa	
	City	Cedar Falls	
	State ("NA" if non-U.S. address)	IA	
	Zip/Postal Code	50614	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Director, University Relations		
Principal Profession or Occupation	University Administrator		
By Whom Appointed or Elected	Board of Regents, State of Iowa		
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	0.0%	
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 i	an attributable interest in one or report?	r more broadcast stations	No
	at any interests, including equit his filing are non-attributable.	y, financial, or voting	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.

Respondent is direct licensee of the Stations. 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, University Relations Exact Legal Title or Name of Respondent: University of Northern Iowa Name: Cassie Mathes Phone: 3192733158