

FRN

0020888814

Not Applicable

# Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

**Entity Name** 

 File Number:
 0000067812
 Submit Date:
 2019-02-11
 FRN:
 0028010627

 Purpose:
 Commercial Broadcast Stations Non-Biennial Ownership Report
 Status:
 Received
 Status Date:

 02/11/2019
 Filing Status:
 Active
 Status:
 Status:
 Status Date:

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

#### 1. Respondent

KATHRYN HUBBARD ROMINSKI REVOCABLE TRUST DATED JULY 26, 2007

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
c/o Hubbard Broadcasting, Inc. 3415 University Avenue, West	St. Paul	MN	55114	+1 (651) 642- 4334	djones@hbi. com

#### 2. Contact Representative

Name	Organization
Kenneth E. Satten	Wilkinson Barker Knauer, LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1800 M Street NW Suite 800N	Washington	DC	20036	+1 (202) 783-4141	ksatten@wbklaw.com

3.	App	olica	tion
Fi	ling	Fee	

4. Nature of Respondent

(a) Provide the following information about the Respondent	<b>::</b>
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees
Nature of Respondent	Other Trust

(b) Provide the following information about this report:	
Purpose	Transfer of control or assignment of license/permit

"As of" date

FRN

#### 01/23/2019

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) /Permittees(s) and Station(s) /Permit(s)

Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/Permitte	ee Name		FRN		
WPB FCC License	e Sub, LLC		0028010	627	
Fac. ID No.	Call Sign	City		State	Service
1246	WIRK	INDIANTOWN		FL	FM
1918	WEAT	WEST PALM BEACH		FL	FM
20436	WRMF	PALM BEACH		FL	FM
25756	WMBX	JENSEN BEACH		FL	FM
29490	WFTL	WEST PALM BEACH		FL	AM
61080	WMEN	ROYAL PALM BEACH		FL	AM

## Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents	Licensee/Permittee Respondents 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. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee/Permittee 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, directors, stockholders, non-insulated partners, non-insulated members, 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) or Permittee(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) or Permittee(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

0020888814

Entity Name	KATHRYN HUBBARD ROMI	NSKI REVOCABLE TRUST DAT	ED JULY 26, 2007
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes

Ownership Information			
FRN	0019887967		
Name	KATHRYN H. ROMINSKI		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc	
	Street 2	3415 University Avenue, West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Trustee		
Interest Percentages (enter percentage values	Voting	100.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	Yes

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in	No
the same market as any station for which this report is	
filed, as defined in 47 C.F.R. Section 73.3555?	
If "Yes," provide information describing the interest(s), using	
EITHER the subform OR the spreadsheet option below.	
Respondents with a large number (50 or more) of entries to	
submit should use the spreadsheet option.	
NOTE: Spreadsheets must be submitted in a special XML	
Spreadsheet format with the appropriate structure that is	
specified in the documentation. For instructions on how to	
use the spreadsheet option to complete this question	
(including templates to start with), please Click Here.	
(including templates to start with), please oner here.	
If using the subform, 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	
newspaper entity solely on the basis of the Commission's	
Equity Debt Plus attribution standard, 47 C.F.R. Section	
73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA"	
into the percentage of total assets (Equity Debt Plus) field	
for an interest holder unless that interest holder has an	
attributable interest in the newspaper entity solely on the	
basis of the Commission's Equity Debt Plus attribution	
standard.	
The Respondent must provide an ECC Registration Number	
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.	

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

If " $\underline{Yes}$ ," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution duties wholly unrelated to the Licensee(s	exemption for any officer or director with ;)?	No
	uired fields and submit an Exhibit fully describing	
attributed an interest.	and explaining why that individual should not be	

Section

Question

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: <b>Trustee</b> Exact Legal Title or Name of Respondent: <b>Kathryn Hubbard Rominski Revocable Trust</b> <b>Dated July 26, 2007</b> Name: <b>Kathryn Hubbard Rominski</b> Phone: <b>6516424334</b> 02/11/2019