

(REFERENCE COPY - Not for submission)

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

File Number: 0000166784 | Submit Date: 2021-11-08 | FRN: 0027301449

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/08/2021

Filing Status: Active

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

### 1. Respondent

FRN	Entity Name	
0027301449	Eagle Rock Hospitality, LLC	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 50106	Idaho Falls	ID	83405	+1 (801) 633-2788	richard@richbroadcasting.

### 2. Contact Representative

Name	Organization
David G. O'Neil, Esq.	Rini O'Neil, PC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2101 L Street, NW Suite 300	Washington	DC	20037	+1 (202) 955-3931	doneil@rinioneil.com

### 3. Application Filing Fee

Not Applicable

## 4. Nature of Respondent

(a) Provide the following information about the Respondent:			
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	Limited liability company		

(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.			

#### and Station(s)

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

Licensee/Permittee Name	FRN
Rich Broadcasting Idaho LS, LLC	0020553269

Fac. ID No.	Call Sign	City	State	Service
8413	KLLP	BLACKFOOT	ID	FM
22194	KID	IDAHO FALLS	ID	AM
22195	KWFI-FM	ABERDEEN	ID	FM
30246	KPKY	POCATELLO	ID	FM
35885	KWIK	POCATELLO	ID	AM
87656	KIDG	POCATELLO	ID	FM
87925	KWFO-FM	DRIGGS	ID	FM
164126	KZKY	UCON	ID	FM

Licensee/Permittee Name	FRN
RJ Broadcasting LS, LLC	0021611850

Fac. ID No.	Call Sign	City	State	Service
12664	KRXK	REXBURG	ID	AM
12665	KIDJ	SUGAR CITY	ID	FM
73616	KGTM	SHELLEY	ID	FM

#### Section II – Biennial Ownership Information

#### 1. 47 C.F.R. Section 73.3613 and Other 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. 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 Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, 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) 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	0027301449			
Entity Name	Eagle Rock Hospitality, LLC	Eagle Rock Hospitality, LLC		
Address	<b>PO Box</b> 50106			
	Street 1			
	Street 2			
	City	Idaho Falls		
	State ("NA" if non-U.S. address)	ID		
	Zip/Postal Code	83405		
	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 (enter percentage values	Voting	0.0%	Jointly Held? No	
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this re	n attributable interest in one o eport?	r more broadcast stations	No	

Ownership Information				
FRN	9990133622			
Name	Jeffrey C. Walbom			
Address	PO Box			
	Street 1	P.O. Box 50106		
	Street 2			
	City	Idaho Falls		
	State ("NA" if non-U.S. address)	ID		
	Zip/Postal Code	83401		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			

Positional Interests (check all that apply)	LC/LLC/PLLC Member		
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	100.0%	Jointly Held? No
	Equity	100.0%	
	Total assets (Equity Debt Plus)	0.0%	
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

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in 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.

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 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.

No

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

No

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: Member Exact Legal Title or Name of Respondent: Eagle Rock Hospitality, LLC Name: Jeffrey C. Walbom Phone: 8016332788