

(REFERENCE COPY - Not for submission)

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

File Number: 0000225920 | Submit Date: 2023-11-13 | FRN: 0002624427

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/13/2023

Filing Status: Active

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

### 1. Respondent

F	RN	Entity Name
0	002624427	KOB-TV, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3415 University Avenue West	St. Paul	MN	55114- 2099	+1 (651) 642- 4334	KShuldes@hbi.

## 2. Contact Representative

Name	Organization
Charles R. Naftalin	Holland & Knight LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
800 17th Street, N.W. Suite #1100	Washington	DC	20006- 3906	+1 (202) 457- 7040	charles.naftalin@hklaw. com

## 3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	No

#### **Fees**

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAT	3	95	\$285.00
				Total	\$285.00

## 4. Nature of Respondent

# (a) Provide the following information about the Respondent: Relationship to stations/permits Licensee Nature of Respondent Limited liability company

(b) Provide the following information about this report:			
Purpose	Biennial		
"As of" date	10/01/2023		
	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	
KOB-TV, LLC	0002624427	

Fac. ID No.	Call Sign	City	State	Service
35313	КОВ	ALBUQUERQUE	NM	DTV
35321	KOBF	FARMINGTON	NM	DTV
62272	KOBR	ROSWELL	NM	DTV

### **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.

Document Information				
Description of contract or instrument	Amended and Restated By-Laws of Hubbard Broadcasting, Inc.			
Parties to contract or instrument	Hubbard Broadcasting, Inc.			
Date of execution	10/2011			
Date of expiration	No expiration date			

Agreement type	Other
(check all that apply)	Agreement Type: n/a

Document Information			
Description of contract or instrument	Shareholder Buy-Sell Agreement of Hubbard Broadcasting, Inc.		
Parties to contract or instrument	Hubbard Broadcasting, Inc. and Shareholders		
Date of execution	10/2011		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other  Agreement Type: n/a		

Document Information	
Description of contract or instrument	NBC Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	01/2017
Date of expiration	12/2023
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	Amended And Restated Limited Liability Company Agreement of KOB-TV, LLC
Parties to contract or instrument	Member
Date of execution	01/1998
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: n/a

Document Information	
Description of contract or instrument	Certificate of Formation of KOB-TV, LLC
Parties to contract or instrument	Delaware Secretary of State
Date of execution	11/1996
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: n/a

Document Information	
Description of contract or instrument	Heroes & Icons TV Network Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	10/2021
Date of expiration	10/2025

Agreement type	Network Affiliation Agreement
(check all that apply)	

Document Information	
Description of contract or instrument	Defy Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	05/2021
Date of expiration	12/2026
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	Newsy Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	06/2021
Date of expiration	12/2026
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	Catchy Comedy f/k/a Decades Network
Parties to contract or instrument	KOB-TV, LLC
Date of execution	04/2021
Date of expiration	04/2025
Agreement type (check all that apply)	Other Agreement Type: n/a

Document Information	
Description of contract or instrument	Start TV Network Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	07/2023
Date of expiration	06/2028
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	MeTV Network Station Affiliation Agreement
Parties to contract or instrument	KOB-TV, LLC
Date of execution	07/2023
Date of expiration	06/2028
Agreement type (check all that apply)	Network Affiliation Agreement

## 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	0002624427		
Entity Name	KOB-TV, LLC		
Address	РО Вох		
	Street 1	3415 University Avenue	
	Street 2	West	
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	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 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 that do not appear on this	an attributable interest in one c	or more broadcast stations	No

Ownership Information	
FRN	0012312708
Name	STANLEY S. HUBBARD

Address	РО Вох		
	Street 1	c/o Hubbard Broadcasting, Inc	c.
	Street 2	3415 University Avenue, Wes	t
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
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	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 that do not appear on this	an attributable interest in one or	or more broadcast stations	Yes

Ownership Information			
FRN	0008494114		
Name	ROBERT W. HUBBARD		
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	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race	Gender	Male	

Information (Natural Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	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	or more broadcast stations	Yes

Ownership Information				
FRN	0008494148			
Name	Stan E. Hubbard			
Address	PO Box			
	Street 1	c/o Hubbard Broadcasting, Ind	<b>c.</b>	
	Street 2	3415 University Avenue, West		
	City	St. Paul		
	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	55114-2099		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer			
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	Voting	0.0% Jointly Held?		
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 oreport?	r more broadcast stations	Yes	

Ownership Information		
FRN	0019895846	
Name	VIRGINIA A. HUBBARD	
Address	PO Box	

	Street 1	c/o Hubbard Broadcasting, Ir	oc.
	Street 2	3415 University Avenue, Wes	st
	City	St. Paul	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer	Officer	
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%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	<u>'</u>
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	an attributable interest in one creport?	r more broadcast stations	Yes

Ownership Information			
FRN	0019887967	0019887967	
Name	KATHRYN H. ROMINSKI	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	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer	Officer	
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)	Voting	0.0%	Jointly Held? No
	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 creport?	r more broadcast stations	Yes

Ownership Information				
FRN	0019887397			
Name	C. THOMAS NEWBERRY			
Address	PO Box			
	Street 1	c/o Hubbard Broadcasting, In	c.	
	Street 2	3415 University Avenue, West		
	City	St. Paul		
	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	55114-2099	55114-2099	
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
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	Voting	0.0% Jointly Held?		
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	or more broadcast stations	Yes	

Ownership Information			
FRN	0020875472		
Name	Paul L. Yates		
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	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Officer		
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	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 that do not appear on this	an attributable interest in one creport?	r more broadcast stations	Yes

Ownership Information			
FRN	0022845499		
Name	RYAN M. VANDEWIELE		
Address	PO Box		
	Street 1	c/o Hubbard Broadcasting, Inc.	
	Street 2	3415 University Avenue, West	t
	City St. Paul		
	State ("NA" if non-U.S. MN address)  Zip/Postal Code 55114-2099		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
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%	Jointly Held?

(enter percentage values from 0.0 to 100.0)			No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations	Yes

Ownership Information					
FRN	0003915816				
Entity Name	HUBBARD BROADCASTING	, INC.			
Address	PO Box				
	Street 1	c/o Hubbard Broadcasting, Inc.			
	Street 2	3415 University Avenue, We	st		
	City	St. Paul			
	State ("NA" if non-U.S. address)	MN			
	Zip/Postal Code	55114-2099			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	LC/LLC/PLLC Member, Owner	LC/LLC/PLLC Member, Owner, Other - Other Interest Holder			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	nation or Tribal entity			
Interest Percentages (enter percentage values			Jointly Held? No		
from 0.0 to 100.0)	Equity	100.0%			
	Total assets (Equity Debt Plus)	100.0%			
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes		

Ownership Information				
FRN	0029107539	0029107539		
Name	Michelle Donaldson	Michelle Donaldson		
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. MN address)			
	Zip/Postal Code 55114-2099			

	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Citizenship, Gender,	Citizenship US			
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Race White		
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 an attributable interest in one or more broadcast stations that do not appear on this report?			No	
• •	at any interests, including equinis filing are non-attributable.  an explanation.	ity, financial, or voting	Yes	

(c) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?

Yes

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

Family Relationships			
FRN	0019895846	Name	VIRGINIA A HUBBARD
FRN	0008494148	Name	Stan E Hubbard
Relationship	Siblings		

Family Relationships				
FRN	0012312708	Name	STANLEY S HUBBARD	
FRN	0019895846	Name	VIRGINIA A HUBBARD	
Relationship	Parent/Child			

Family Relationships				
FRN	0008494114	Name	ROBERT W HUBBARD	
FRN	0008494148	Name	Stan E Hubbard	
Relationship	Siblings			

Family Relationships			
FRN	0012312708	Name	STANLEY S HUBBARD

FRN	0008494148	Name	Stan E Hubbard
Relationship	Parent/Child		

Family Relationships				
FRN	0012312708	Name	STANLEY S HUBBARD	
FRN	0019887967	Name	KATHRYN H ROMINSKI	
Relationship Parent/Child				

Family Relationships			
FRN	0012312708	Name	STANLEY S HUBBARD
FRN	0008494114	Name	ROBERT W HUBBARD
Relationship	Parent/Child		

Family Relationships			
FRN	0019895846	Name	VIRGINIA A HUBBARD
FRN	0008494114	Name	ROBERT W HUBBARD
Relationship	Siblings		

Family Relationships			
FRN	0019895846	Name	VIRGINIA A HUBBARD
FRN	0019887967	Name	KATHRYN H ROMINSKI
Relationship	Siblings		

Family Relationships			
FRN	0008494114	Name	ROBERT W HUBBARD
FRN	0019887967	Name	KATHRYN H ROMINSKI
Relationship	Siblings		

Family Relationships				
FRN	0019887967	Name	KATHRYN H ROMINSKI	
FRN	0008494148	Name	Stan E Hubbard	
Relationship	Siblings			

(d) 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.	

## Only)

Non-Licensee Respondents should select "N/A" in response to this question.

File Name	Uploaded By	Attachment Type	Description
Hubbard Ownership Structure(55330831.7).pdf	Applicant	Ownership Chart	Hubbard Ownership Structure

### **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: Vice President Exact Legal Title or Name of Respondent: KOB- TV, LLC Name: Ryan Vandewiele Phone: 6516424334  11/13/2023