



(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial  
Ownership Report (FCC Form 323)

File Number: 0000225922 | Submit Date: 2023-11-13 | FRN: 0002629566

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

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0002629566		KSAX-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.com

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	2	95	\$190.00
				Total	\$190.00

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
KSAX-TV, LLC	0002629566

Fac. ID No.	Call Sign	City	State	Service
35584	KSAX	ALEXANDRIA	MN	DTV
35585	KRWF	REDWOOD FALLS	MN	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 (check all that apply)	Other 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 <b>Agreement Type:</b> n/a

Document Information	
Description of contract or instrument	MeTV Network Station Affiliation Binding Term Sheet
Parties to contract or instrument	KSAX-TV, LLC (KRWF-TV), KSTC-TV, LLC
Date of execution	07/2017
Date of expiration	06/2025
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	ABC Affiliation Agreement
Parties to contract or instrument	KSTP-TV, LLC
Date of execution	09/2023
Date of expiration	08/2027
Agreement type (check all that apply)	Network Affiliation Agreement

Document Information	
Description of contract or instrument	Articles of Conversion of KSAX-TV, Inc. into KSAX-TV, LLC
Parties to contract or instrument	KSAX-TV, Inc., KSAX-TV, LLC
Date of execution	12/2022
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> n/a

Document Information	
Description of contract or instrument	Operating Agreement
Parties to contract or instrument	KSAX-TV, LLC
Date of execution	12/2022
Date of expiration	No expiration date
Agreement type (check all that apply)	Other <b>Agreement Type:</b> n/a

Document Information	
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<b>Description of contract or instrument</b>	Articles of Organization
<b>Parties to contract or instrument</b>	KSAX-TV, LLC
<b>Date of execution</b>	12/2022
<b>Date of expiration</b>	No expiration date
<b>Agreement type</b> (check all that apply)	Other <b>Agreement Type:</b> n/a

## 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	0002629566		
Entity Name	KSAX-TV, LLC		
Address	PO Box		
	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 from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	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			
FRN	0003915816		
Entity Name	HUBBARD BROADCASTING, INC.		
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)	Owner		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
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)	100.0%	
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes

Ownership Information			
FRN	0012312708		
Name	STANLEY S. 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, 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	0.0%	Jointly Held? No
	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?			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, 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	0.0%	Jointly Held? No
	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?			Yes

Ownership Information			
FRN	0008494148		
Name	Stan E. 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, 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	0.0%	Jointly Held? No
	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?			Yes

Ownership Information			
FRN	0019895846		
Name	VIRGINIA A. 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, 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	0.0%	Jointly Held? No
	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?			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	55114-2099	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
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	0.0%	Jointly Held? No
	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?			Yes



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		
Positional Interests (check all that apply)	Officer		
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	0.0%	Jointly Held? No
	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?			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	
	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, 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	0.0%	Jointly Held? No
	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?			Yes

Ownership Information			
FRN	0019887397		
Name	C. THOMAS NEWBERRY		
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, 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	0.0%	Jointly Held? No
	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?			Yes

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(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 " <u>Yes</u> ," provide the following information for each such the relationship.	

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

Family Relationships			
FRN	0008494148	Name	Stan E 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	0012312708	Name	STANLEY S HUBBARD
FRN	0019895846	Name	VIRGINIA A HUBBARD
Relationship	Parent/Child		

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	0008494114	Name	ROBERT W HUBBARD
Relationship	Parent/Child		

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

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

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

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

<p><b>(d) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b></p> <p>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.</p>	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.

File Name	Uploaded By	Attachment Type	Description
<a href="#">Hubbard Ownership Structure(55330831.7).pdf</a>	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 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>Vice President</b> Exact Legal Title or Name of Respondent: <b>KSAX-TV, LLC</b> Name: <b>Ryan Vandewiele</b> Phone: <b>6516424334</b>  11/13/2023
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