



(REFERENCE COPY - Not for submission)

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

File Number: **0000229353** | Submit Date: **2023-11-30** | FRN: **0023600190**  
Purpose: **Commercial Broadcast Stations Biennial Ownership Report** | Status: **Received** | Status Date: **11/30/2023**  
Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0023605132	Alpha 3E Holding Corporation

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1211 SW 5th Avenue Suite 750	Portland	OR	97204	+1 (503) 217-6200	john.grossi@alphamediausa.com

2. Contact Representative

Name	Organization
Kathleen A. Kirby	Wiley Rein LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2050 M Street, NW	Washington	DC	20036	+1 (202) 719-3360	kkirby@wiley.law

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	For-profit corporation

(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
Alpha 3E Licensee LLC	0023600190

Fac. ID No.	Call Sign	City	State	Service
640	KIBZ	CRETE	NE	FM
9654	KLGR-FM	REDWOOD FALLS	MN	FM
9663	KKQQ	VOLGA	SD	FM
9677	KJJQ	VOLGA	SD	AM
9680	KLGR	REDWOOD FALLS	MN	AM
12670	KATE	ALBERT LEA	MN	AM
12706	KCPI	ALBERT LEA	MN	FM
15261	KBRK-FM	BROOKINGS	SD	FM
15263	KBRK	BROOKINGS	SD	AM
20400	KYSM-FM	MANKATO	MN	FM
20432	KSDR	WATERTOWN	SD	AM
20433	KSDR-FM	WATERTOWN	SD	FM
21193	KEEZ-FM	MANKATO	MN	FM
26627	KLIR	COLUMBUS	NE	FM
26628	KJSK	COLUMBUS	NE	AM
28148	KTTT	COLUMBUS	NE	AM
28149	KKOT	COLUMBUS	NE	FM
28657	KTLB	TWIN LAKES	IA	FM
30114	KGLO	MASON CITY	IA	AM
30115	KIAI	MASON CITY	IA	FM
31873	KRBI-FM	ST. PETER	MN	FM
34436	KFOR	LINCOLN	NE	AM
35891	KWMT	FORT DODGE	IA	AM
35892	KKEZ	FORT DODGE	IA	FM
39259	KQAD	LUVERNE	MN	AM
39260	KLQL	LUVERNE	MN	FM
39578	KJAM-FM	MADISON	SD	FM
39580	KJAM	MADISON	SD	AM
47094	KLSS-FM	MASON CITY	IA	FM
47095	KRIB	MASON CITY	IA	AM
49798	KYTC	NORTHWOOD	IA	FM
50660	KAUS-FM	AUSTIN	MN	FM

50677	KAUS	AUSTIN	MN	AM
50733	KZEN	CENTRAL CITY	NE	FM
53141	KTGL	BEATRICE	NE	FM
53143	KZKX	SEWARD	NE	FM
54641	KIAQ	CLARION	IA	FM
54708	KLMS	LINCOLN	NE	AM
57287	KFRX	LINCOLN	NE	FM
60856	KWAT	WATERTOWN	SD	AM
60859	KZLB	FORT DODGE	IA	FM
60861	KIXX	WATERTOWN	SD	FM
60862	KVFD	FORT DODGE	IA	AM
60865	KDLO-FM	WATERTOWN	SD	FM
63598	KKSD	MILBANK	SD	FM
87411	KDBX	CLEAR LAKE	SD	FM
162477	KXFT	MANSON	IA	FM
164294	KMKO-FM	LAKE CRYSTAL	MN	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.

FRN	0023605132		
Entity Name	Alpha 3E Holding Corporation		
Address	PO Box		
	Street 1	1211 SW 5th Avenue	
	Street 2	Suite 750	
	City	Portland	
	State ("NA" if non-U.S. address)	OR	
	Zip/Postal Code	97204	
	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%	
	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

Ownership Information			
FRN	0024929333		
Entity Name	Alpha 3E Corporation		
Address	PO Box		
	Street 1	1211 SW 5th Avenue	
	Street 2	Suite 750	
	City	Portland	
	State ("NA" if non-U.S. address)	OR	
	Zip/Postal Code	97204	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder		
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)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0027262393		
Name	John J. Grossi		
Address	PO Box		
	Street 1	1211 SW 5th Avenue	
	Street 2	Suite 750	
	City	Portland	
	State ("NA" if non-U.S. address)	OR	
	Zip/Postal Code	97204	
	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)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes

Ownership Information		
FRN	0019316454	
Name	Donald R. Proffitt	
Address	PO Box	
	Street 1	1211 SW 5th Avenue
	Street 2	Suite 750

	<b>City</b>	Portland	
	<b>State ("NA" if non-U.S. address)</b>	OR	
	<b>Zip/Postal Code</b>	97204	
	<b>Country (if non-U.S. address)</b>	United States	
<b>Listing Type</b>	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director		
<b>Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)</b>	<b>Citizenship</b>	US	
	<b>Gender</b>	Male	
	<b>Ethnicity</b>	Not Hispanic or Latino	
	<b>Race</b>	White	
<b>Interest Percentages</b> (enter percentage values from 0.0 to 100.0)	<b>Voting</b>	0.0%	<b>Jointly Held?</b> No
	<b>Equity</b>	0.0%	
	<b>Total assets (Equity Debt Plus)</b>		
<b>Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?</b>			Yes

<b>(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable.</b> If "No," submit as an exhibit an explanation.	Yes
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<b>(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?</b>  If " <u>Yes</u> ," provide the following information for each such the relationship.	No
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<b>(d) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?</b>  If " <u>Yes</u> ," 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.	No
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Certification	Section	Question	Response
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<b>Authorized Party to Sign</b>	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>Chief Financial Officer</b> Exact Legal Title or Name of Respondent: <b>Alpha 3E Holding Corporation</b> Name: <b>John Grossi</b> Phone: <b>5035176200</b>  11/30/2023