

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

 File Number:
 0000227130
 Submit Date:
 2023-11-20
 FRN:
 0020513677

 Purpose:
 Commercial Broadcast Stations Biennial Ownership Report
 Status:
 Received
 Status Date:
 11/20/2023

 Filing Status:
 Active
 Status:
 Status
 Status Date:
 11/20/2023

Section I - General Information

1. Respondent

 FRN
 Entity Name

 0020513677
 Gabriel Media

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 7490	St. Cloud	MN	56301	+1 (320) 251- 1780	deb@gabrielmedia. info

2. Contact Representative

Name	Organization
Gregg P. Skall, Esq.	Telecommunications Law Professionals PLLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1025 Connecticut Ave, NW Suite 1011	Washington	DC	20036	+1 (202) 789-3121	gskall@tlp.law

3. Application	Question	Response
Filing Fee	Is this application being submitted without a filing fee?	Yes
	If this application is being submitted without a filing fee, Indicate reason for fee exemption.	Fee-Exempt Report

4. Nature of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
Nature of Respondent	Not-for-profit corporation

(b) Provide the following information about this report:

U	
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
Gabriel Media	0020513677

Fac. ID No.	Call Sign	City	State	Service
62129	ККЈМ	ST. JOSEPH	MN	FM
129640	кѕкк	VERNDALE	MN	AM
136921	KYES	ROCKVILLE	MN	AM
202647	K267CU	VERNDALE	MN	FX
202860	K228FV	ST. JOSEPH	MN	FX

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	Articles of Incorporation	
Parties to contract or instrument	State of Minnesota	
Date of execution	10/2010	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation	

Document Information		
Description of contract or instrument	Bylaws	
Parties to contract or instrument	Members	
Date of execution	10/2010	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Bylaws	

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	0020513677			
Entity Name	Gabriel Media			
Address	PO Box	7490		
	Street 1			
	Street 2			
	City	St. Cloud		
	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	56301		
	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 an attributable interest in one or more broadcast stations No that do not appear on this report?			No	

FRN	0020535399	
Name	Marvin Enneking	
Address	PO Box	
	Street 1	214 3rd Ave North
	Street 2	
	City	St. Cloud
	State ("NA" if non-U.S. address)	MN

United States US Male Not Hispanic or Latino	
Male	
Male	
Male	
Not Hispanic or Latino	
White	
12.5%	Jointly Held? No
0.0%	
0.0%	

EDN	0020028769			
FRN	0029028768			
Name	Laura Koski			
Address	PO Box			
	Street 1	2809 Highway 10 SE		
	Street 2			
	City	St. Cloud		
	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	56304		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Director	Director		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male	Male	
Persons Only)	Ethnicity	Not Hispanic or Latin	0	
	Race	White		
Interest Percentages (enter percentage values	Voting	12.5%	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	No

FRN	0020528659		
Name	Pastor Carol Jean Smith		
Address	PO Box	PO Box	
	Street 1	511 9th Ave. North	
	Street 2		
	City	St. Cloud	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	56301	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	12.5%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	·
	Total assets (Equity Debt Plus)	ebt 0.0%	

FRN	0020528709	
Name	Howie Schomer	
Address	PO Box	
	Street 1	19594 295th Ave.
	Street 2	
	City	Pierz
	State ("NA" if non-U.S. address)	MN

	Zip/Postal Code	56364	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	12.5%	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 o	or more broadcast stations	No

Ownership Information			
FRN	0029028651		
Name	Deborah Huschle		
Address	PO Box	7490	
	Street 1		
	Street 2		
	City	St. Cloud	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	56301	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - General Manager/Exe	ecutive Director	
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%	

	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an	attributable interest in one or	more broadcast stations	No

Ownership Information			
FRN	0031596224		
Name	Mollie Werschay		
Address	PO Box		
	Street 1	21692 Talon Dr.	
	Street 2		
	City	St. August	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	55320-4563	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Member		
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	00.0%	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 report?	or more broadcast stations	No

FRN	0031597347	
Name	Scott Warzecha	
Address	PO Box	
	Street 1	1601 215th St.
	Street 2	
	City	Clearwater
	State ("NA" if non-U.S. address)	MN

	Zip/Postal Code	55320	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	12.5%	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 o	or more broadcast stations	No

Ownership Information			
FRN	0034490995		
Name	Patrick Neary, Rev.		
Address	РО Вох		
	Street 1	214 3rd Ave S	
	Street 2		
	City	St Cloud, MN	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	56301	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Member		
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	00.0%	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	No

FRN	0034490946		
Name	Scott Pogatchnik, Rev.		
Address	PO Box		
	Street 1	214 3rd Ave S	
	Street 2		
	City	St Cloud	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	56301	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Member		
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	00.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

FRN	0034490953	
Name	Aaron Nett, Rev.	
Address	PO Box	
	Street 1	68 Main St
	Street 2	
	City	Pierz
	State ("NA" if non-U.S. address)	MN

	Zip/Postal Code	56364	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - 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	Voting	00.0%	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 report?	r more broadcast stations	No

Ownership Information				
FRN	0034491019	0034491019		
Name	Joseph Towalski			
Address	PO Box			
	Street 1	214 3rd Ave S		
	Street 2			
	City	St Cloud		
	State ("NA" if non-U.S. address)	MN		
	Zip/Postal Code	56301		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - Member			
Citizenship, Gender,	Citizenship	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	00.0%	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	No

FRN	0034490987		
	0034490907	0034490987	
Name	Melinda Gau		
Address	PO Box		
	Street 1	2191 Mill Pond Drive	
	Street 2		
	City	St Cloud	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	56303	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	12.5%	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 o	r more broadcast stations	No

FRN	0034491001	
Name	Doug Vagle, Past.	
Address	PO Box	
	Street 1	4272 Pine Point Rd
	Street 2	
	City	Sartell
	State ("NA" if non-U.S. address)	MN

	Zip/Postal Code	56377	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	Voting	12.5%	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 o	or more broadcast stations	No

Ownership Information			
FRN	0034491043		
Name	Dennis Gregory		
Address	PO Box		
	Street 1	1926 W Division St	
	Street 2		
	City	St Cloud	
	State ("NA" if non-U.S. address)	MN	
	Zip/Postal Code	56301	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
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	12.5%	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 (b) Respondent certifies that any interests, including equity, financial, or voting Yes
hat do not appear on this report?
(b) Respondent certifies that any interests, including equity, financial, or voting Yes
nterests, not reported in this filing are non-attributable. f "No," submit as an exhibit an explanation.
(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? f "Yes," provide the following information for each such the relationship.

that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.

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.

Licensee is not a multi-level entity

Section III - Certification

Certification	Ce	rtifi	cati	on
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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: General Manager/Executive Director Exact Legal Title or Name of Respondent: Gabriel Media Name: Deborah Huschle Phone: 3202511780 11/20/2023