

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000174887Submit Date:2021-11-30FRN:0003795390Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:11/30/2021Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name
0003795390	Hobson City Broadcasting Co.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 8822	Anniston	AL	36202	+1 (256) 236- 6484	hog1120@aol. com

2. Contact Representative

Name	Organization	
MARK TIMOTHY HOGAN, MR.	WHOG PARTNER	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1612 MCCALL DR	ANNISTON	AL	36207	+1 (256) 391-1278	HOG1120@AOL.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	General partnership			

(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.

Licensee/Permittee Name	FRN				
Hobson City Broadcasting	0003795390				
Fac. ID No.	Call Sign	City	State	Service	
27434	WHOG	HOBSON CITY	AL	AM	

Section II – Biennial Ownership Information

and Other	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.				
Interests	generating a series of subforms, itself. If the Respondent is not a non-insulated members, and an standards set forth in 47 C.F.R.	Answer each question on each natural person, also list each of y other persons or entities with a Section 73.3555. (A "direct" inte	enter detailed information about ownership interests by subform. The first subform listing should be for the Respondent the officers, directors, stockholders, non-insulated partners, a direct attributable interest in the Respondent pursuant to the rest is one that is not held through any intervening companies erest in the Respondent separately.		
	· · ·		nk for an interest holder unless that interest holder has an Commission's Equity Debt Plus attribution standard, 47 C.F.R.		
	In the case of vertical or indirect attributable interest in the Licens		those interests in the Respondent that also represent an ing submitted.		
		holding companies or other forms of indirect ownership must file file a separate report for, any interest holder that does not have being submitted.			
	Please see the Instructions for f	urther detail concerning interests	ncerning interests that must be reported in response to this question.		
		dent must provide an FCC Registration Number for each interest holder reported in response to this question. the Instructions for detailed information and guidance concerning this requirement.			
	Ownership Information				
	FRN	0003795390			
	Entity Name	Hobson City Broadcasting Co.			
	Address	PO Box	8822		
		Street 1			
		Street 2			
		City	Anniston		
		State ("NA" if non-U.S. address)	AL		
		Zip/Postal Code	36202		
		Country (if non-U.S. address)	United States		
	Listing Type	Respondent			

Positional Interests (check all that apply)	Respondent Interest holder is not a Tribal nation or Tribal entity		
Tribal Nation or Tribal Entity			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
rom 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 report?	r more broadcast stations	No

Ownership Information

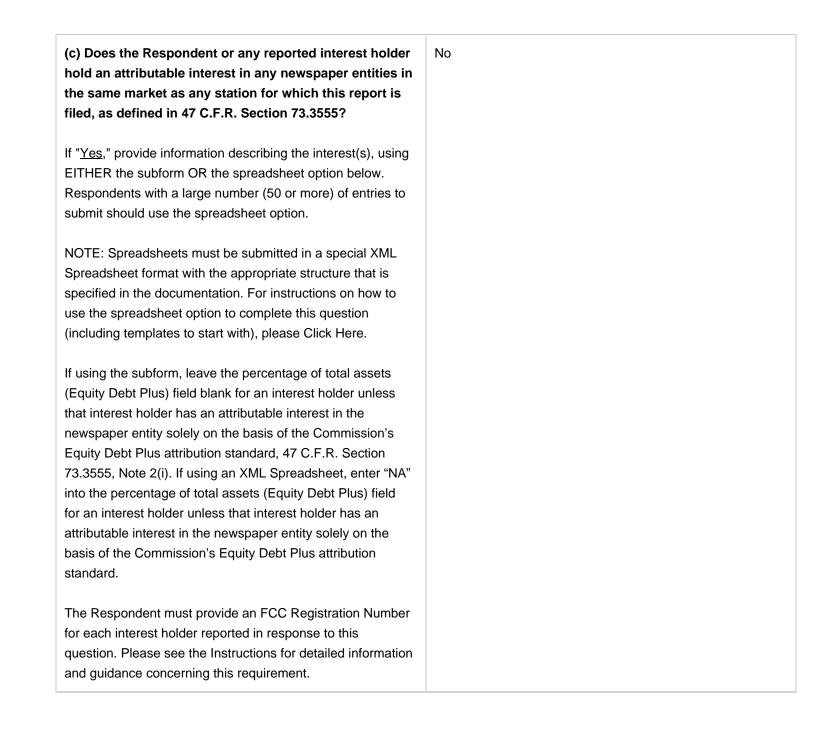
FRN	9990027139	9990027139		
Name				
Address	PO Box			
	Street 1	1612 McCall Dr.		
	Street 2			
	City	Anniston		
	State ("NA" if non-U.S. address)	AL		
	Zip/Postal Code	36207		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	General Partner			
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	50.0%	Jointly Held? Yes	
from 0.0 to 100.0)	Equity	50.0%		
	Total assets (Equity Debt Plus)	50.0%		
	es interest holder have an attributable interest in one or more broadcast stations No at do not appear on this report?			

Ownership Information

FRN	9990027154
Name	

Address	PO Box			
	Street 1	25405 HAYES MILL RD		
	Street 2			
	City	ELKMONT		
	State ("NA" if non-U.S. address)	AL		
	Zip/Postal Code	35620		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	General Partner	eral Partner		
Citizenship, Gender, Ethnicity, and Race	Citizenship	US		
Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? Yes	
from 0.0 to 100.0)	Equity	50.0%		
	Total assets (Equity Debt Plus)	50.0%		
Does interest holder have an attributable interest in one or that do not appear on this report?		r more broadcast stations	No	
(b) Peopendent cortifica that	any interests including equit	w financial or voting	Vas	

(b) Respondent certifies that any interests, including equity, financial, or voting	Yes
interests, not reported in this filing are non-attributable.	
If "No," submit as an exhibit an explanation.	



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

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

amily Relationships			
FRN	9990027154	Name	
FRN	9990027139	Name	
Relationship	Parent/Child		

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
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.	

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 Exact Legal Title or Name of Respondent: HOBSON CITY BROADCASTING CO. Name: MARK T. HOGAN , MR Phone: 2563911278 11/30/2021