

(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number: 0000226411 Submit Date: 2023-11-16 FRN: 0006648877

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/16/2023

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0006648877	Radio Catskill, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 546	Jeffersonville	NY	12748	+1 (845) 482- 4141	tim@wjffradio.

2. Contact Representative

Name	Organization
Brad Deutsch	Foster Garvey P.C.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1000 Potomac St. NW Suite 200	Washington	DC	20007- 3501	+1 (202) 298- 1793	brad.deutsch@foster. com

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	permits Licensee	
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No

(b) Provide the following information about this report: Purpose Biennial 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
Radio Catskill, Inc.	0006648877

Fac. ID No.	Call Sign	City	State	Service	
54516	WJFF	JEFFERSONVILLE	NY	FM	

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 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. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	Articles of Incorporation	
Parties to contract or instrument	Radio Catskill, Inc.	
Date of execution	09/1987	
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	Radio Catskill By-laws, as Amended	
Parties to contract or instrument	Radio Catskill	
Date of execution	06/2020	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Radio Catskill By-laws, as Amended	

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, members of the governing board (or other governing entity), stockholders, 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	0006648877	0006648877	
Entity Name	Radio Catskill, Inc.		
Address	РО Вох	546	
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	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	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
Total assets (Equity Debt 0.0% Plus)			
	Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		

Ownership Information		
FRN	9990141042	
Name	Duncan Cooper	
Address	РО Вох	546
	Street 1	
	Street 2	
	City	Jeffersonville
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12748
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Editor	

By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	7.1%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No

Ownership Information		
FRN	9990141044	
Name	Clay Smith	
Address	PO Box 546	
	Street 1	
	Street 2	
	City	Jeffersonville
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12748
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Non-Profit Consultant	
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship, Gender, Citizenship US	
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	7.1%
(enter percentage values from 0.0 to 100.0)	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?	

No

Ownership Information			
FRN	9990141045		
Name	Sara Stuart	Sara Stuart	
Address	PO Box 546		
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Non-Profit Manager		
By Whom Appointed or Elected	Board	Board	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
	Does interest holder have an attributable interest in one or more broadcast stations No hat do not appear on this report?		

Ownership Information			
FRN	9990147566	9990147566	
Name	Jeffrey Barnes	Jeffrey Barnes	
Address	PO Box 546		
	Street 1		
	Street 2		
	City	Jeffersonville	

	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board	(or other governing entity)	
Principal Profession or Occupation	Sales	Sales	
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.1%	
(enter percentage values from 0.0 to 100.0)	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?		

Ownership Information			
FRN	9990147567		
Name	Amy Brightfield		
Address	PO Box 546		
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Writer and Editor		
By Whom Appointed or Elected	Board		

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	7.1%
	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?		or more broadcast stations No

Ownership Information			
FRN	9990147568		
Name	Barbara Toner Demarest		
Address	PO Box	546	
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
	Does interest holder have an attributable interest in one or more broadcast stations No hat do not appear on this report?		

Ownership Information			
FRN	9990147570		
Name	Dale Blagrove	Dale Blagrove	
Address	РО Вох	546	
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Real Estate Salesperson		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	7.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information		
FRN	9990147571	
Name	Kirsten Foster	
Address	PO Box 546	
	Street 1	
	Street 2	
	City	Jeffersonville
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12748
	State ("NA" if non-U.S. address)	NY

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Hospitality	Hospitality	
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?		

Ownership Information		
FRN	9990153796	
Name	Donald Almquist	
Address	PO Box 546	
	Street 1	
	Street 2	
	City	Jeffersonville
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12748
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Provide prop vehicles for TV, film, photo	
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)		

	Ethnicity	Not Hispanic or Latino	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Race	White	
	Voting	7.1%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No

Ownership Information			
FRN	9990153798	9990153798	
Name	Leif Johansen	Leif Johansen	
Address	PO Box 546		
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	University Admissions Officer		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	Citizenship US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Race White	
Interest Percentages	Voting	7.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information	
FRN	9990153799

Name	Peter Madden		
Address	PO Box	546	
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Investigative Journalist		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender Male		
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages	Voting	7.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	9990153801		
Name	Heather Quaintance		
Address	PO Box 546		
	Street 1	Street 1	
	Street 2		
	City Jeffersonville		
	State ("NA" if non-U.S. NY address)		
	Zip/Postal Code 12748		
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		

Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Real Estate Professional	
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	7.1%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No

Ownership Information			
FRN	9990153803		
Name	Kristina Smith		
Address	PO Box 546		
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Business Owner		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting 7.1%		
(enter percentage values			

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
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	9990153807		
Name	Katie Childs		
Address	РО Вох	546	
	Street 1		
	Street 2		
	City	Jeffersonville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12748	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	President of a Skincare Company		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt		
	Plus)		

(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.		

(c) 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.	

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 without a parent entity.

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: President of the Board of Trustees Exact Legal Title or Name of Respondent: Radio Catskill Name: Kristen Foster Phone: 8454824141 11/16/2023