

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

File Number: 0000044368Submit Date: 2018-02-27FRN: 0006648877Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 02/27/2018Filing Status: ActiveStatus: ActiveStatus Date: 02/27/2018

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 4765 State Rt. 52	Jeffersonville	NY	12748	+1 (845) 482- 4141	wjff@wjffradio. org

2. Contact Representative

Name	Organization
John Crigler, Esq.	Garvey Schubert Barer

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) 965- 7880	JCRIGLER@GSBLAW. COM

3. Application Filing Fee

Not Applicable

4.	Control of	
Re	espondent	

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

Purpose	Biennial
"As of" date	10/01/2017
	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.

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Nam	e	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	State of New York			
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	05/2014
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.

FRN	0006648877			
Entity Name	Radio Catskill, Inc.	Radio Catskill, Inc.		
Address	PO Box	546		
	Street 1	4765 State Rt. 52		
	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 Plus)	0.0%		

FRN	9990130184			
Name	Tim Bruno	Tim Bruno		
Address	PO Box			
	Street 1	74 Radio Tower Road		
	Street 2			
	City	Callicoon		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	12723		
	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	Communications			

Occupation				
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	8.3%		
(enter percentage values 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	9990130192	
Name	Martin Higgins	
Address	PO Box	
	Street 1	491 Irishtown Road
	Street 2	
	City	Narrowsburg
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12764
	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	Public Relations	
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	8.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%

Ownership Information			
FRN	9990130196		
Name	Kit Hulit		
Address	PO Box		
	Street 1	46 Gold Dan Road	
	Street 2		
	City	Swan Lake	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12783	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - SecretaryMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Education		
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	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an that do not appear on this re	n attributable interest in one or port?	r more broadcast stations	No

FRN	9990130200	
Name	Kathy Geary	
Address	PO Box	
	Street 1	35 Gabel Road
	Street 2	
	City	Callicoon
	State ("NA" if non-U.S. address)	NY

	Zip/Postal Code	12723	
	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	Marketing		
By Whom Appointed or Elected	Volunteer		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values 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			No

Ownership Information			
FRN	9990130204		
Name	Ken Hilton	Ken Hilton	
Address	PO Box		
	Street 1	284 Hust Road	
	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, Other - TreasurerMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Education		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race	Gender	Male	

Information (Natural Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	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	9990130208		
Name	Jim Lomax		
Address	PO Box	188	
	Street 1		
	Street 2		
	City	Bethel	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12720	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Co-Vice-PresidentMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Medicine		
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	8.3%	
(enter percentage values 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?			

FRN	9990130212

Name	Leila McCullough		
Address	PO Box	271	
	Street 1		
	Street 2		
	City	Callicoon	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12723	
	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	Architecture		
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	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

Ownership Information			
FRN	9990130214		
Name	Kevin McDaniel	Kevin McDaniel	
Address	PO Box	376	
	Street 1		
	Street 2		
	City	Hurleyville	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12747	
	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	House Painter	
By Whom Appointed or Elected	Volunteer	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	8.3%
(enter percentage values 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		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

Ownership Information			
FRN	9990130217		
Name	Angela Page		
Address	PO Box		
	Street 1	763 Briscoe Road	
	Street 2		
	City	Swan Lake	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12783	
	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	Librarian		
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 (enter percentage values	Voting 8.3%		

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	No

Ownership Information			
FRN	9990130223		
Name	Thane Peterson		
Address	PO Box		
	Street 1	106 Dutchman Hill	
	Street 2		
	City	Waymart	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	18472	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Co-Vice-PresidentMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	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	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this r	in attributable interest in one o eport?	r more broadcast stations	No

FRN	9990130228		
Name	Patricia Pomeroy		
Address	PO Box		
	Street 1	100 Punch Bowl Road	
	Street 2		

	City	Roscoe	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12776	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - PresidentMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Administrator		
By Whom Appointed or Elected	Board		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values 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 report?	r more broadcast stations	No

Ownership	Information
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FRN	9990130234		
Name	Martin Springhetti		
Address	PO Box		
	Street 1	545 Galilee Road	
	Street 2		
	City	Damascus	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	18415	
	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	Contractor and Artist		
By Whom Appointed or	Board		

Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	8.3%	8.3%	
(enter percentage values 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 report?	r more broadcast stations	No	
	hat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes	
interests, not reported in t If "No," submit as an exhibit (c) Is Respondent seeking	his filing are non-attributable. an explanation. an attribution exemption for an		Yes	
interests, not reported in t If "No," submit as an exhibit	his filing are non-attributable. an explanation. an attribution exemption for an			

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 does not have a parent entity.

Section III - 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: General Manager and Development Director Exact Legal Title or Name of Respondent: Radio Catskill, Inc. Name: Dan Rigney Phone: 8454824141

Certification

	02/27/2018
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