

FRN

0006620066

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

 File Number:
 0000072838
 Submit Date:
 2019-05-16
 FRN:
 0006620066

 Purpose:
 Commercial Broadcast Stations Non-Biennial Ownership Report
 Status:
 Received
 Status Date:

 05/16/2019
 Filing Status:
 Active
 Status:
 Status:
 Status:

# **Section I - General Information**

Sonshine Family Television Corp.

#### 1. Respondent

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
813 N. Fenwick Street	Allentown	PA	18109	+1 (610) 433- 4400	dan@wbph. org

#### 2. Contact Representative

Name	Organization
Joseph C. Chautin III	Hardy, Carey, Chautin & Balkin, LLP

Street	City (and Country if non U.S.		Zip		
Address	address)	State	Code	Phone	Email
1080 WEST CAUSEWAY APPROACH	Mandeville	LA	70471	+1 (985) 629- 0777	jchautin@hardycarey. com

# 3. Application Filing Fee

Not Applicable

# 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:

and resubmitting	nnial ownership report or validating a prior biennial ownership report, this . 1 of the year in which this report is

/Permittees(s) and Station(s) /Permit(s) Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/Permittee Name	FRN			
Sonshine Family Television Corp. 0006620066				
Fac. ID No.	Call Sign	City	State	Service
55350	WLYH	RED LION	PA	DTV

### Section II – Non-Biennial Ownership Information

#### 1. 47 C.F.R. Section 73.3613 and Other Documents

Licensee/Permittee Respondents 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/Permittee Respondents should select "Not Applicable" in response to this question.

#### **Document Information**

Description of contract or instrument	Amended and Restated Bylaws	
Parties to contract or instrument	Directors	
Date of execution	08/2017	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Governing Document	

#### **Document Information**

Description of contract or instrument	Bylaws	
Parties to contract or instrument	N/A	
Date of execution	06/1985	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Governing Document	

Document Information				
Description of contract or instrument	Articles of Incorporation			
Parties to contract or instrument	N/A			
Date of execution	06/1985			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Governing Document			

#### **Document Information**

Description of contract or instrument	Articles of Amendment	
Parties to contract or instrument	N/A	
Date of execution	06/2000	

Date of expiration	No expiration date	
Agreement type	Other	
(check all that apply)	Agreement Type: Governing Document	

#### 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) or Permittee(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) or Permittee(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	0006620066				
Entity Name	Sonshine Family Television Corp.				
Address	PO Box				
	Street 1	813 N. Fenwick Street			
	Street 2				
	City	Allentown	Allentown		
	State ("NA" if non-U.S. address)	PA			
	Zip/Postal Code	18109			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
<b>Positional Interests</b> (check all that apply)	Respondent				
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%			
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?					

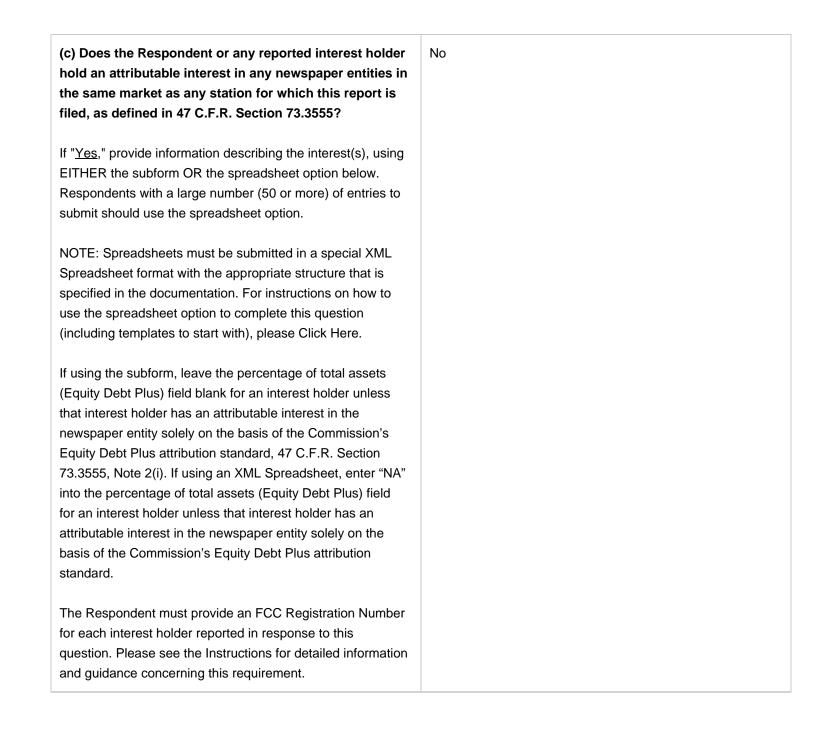
**Ownership Information** 

FRN	0007310220
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Name	Daniel P. Huber		
Address	PO Box		
	Street 1	6790 Hanover Street	
	Street 2		
	City	Bethlehem	
	State ("NA" if non-U.S. address)	PA	
	Zip/Postal Code	18017	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values	Voting	33.3%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes

Ownership Information			
FRN	0019465459		
Name	Margaret M. Huber		
Address	PO Box		
	Street 1	6790 Hanover Street	
	Street 2		
	City	Bethlehem	
	State ("NA" if non-U.S.PAaddress)		
	Zip/Postal Code18017		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values	Voting	33.3%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes

FRN	0019465467			
Name	Patricia F. Huber			
Address	PO Box			
	Street 1	1407A Briarwood Drive		
	Street 2			
	City	Bethlehem		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	18020		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	33.3%	Jointly Held? No	
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?				
(b) Respondent certifies that any interests, including equity, financial, or votingYesinterests, not reported in this filing are non-attributable.If "No," submit as an exhibit an explanation.			Yes	



(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.

Family Relationships			
FRN	0019465467	Name	Patricia F Huber
FRN	0007310220	Name	Daniel P Huber
Relationship	Parent/Child		

# Family Relationships

#### Family Relationships

FRN	0007310220	Name	Daniel P Huber
FRN	0019465459	Name	Margaret M Huber
Relationship	Spouses		

(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.

### 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: <b>President</b> Exact Legal Title or Name of Respondent: <b>Sonshine Family Television Corp.</b> Name: <b>Margaret M Huber</b> Phone: <b>6104334400</b> 05/16/2019