

#### (REFERENCE COPY - Not for submission)

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

File Number:0000094535Submit Date:2019-12-31FRN:0020296422Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:12/31/2019Filing Status:Active

## **Section I - General Information**

## 1. Respondent

FRN	Entity Name
0020296422	Peconic Public Broadcasting

Street	City (and Country if non U.	State ("NA" if non-U.	Zip		
Address	S. address)	S. address)	Code Phone Email		
PO Box 1410	Southampton	NY	11969- 1410	+1 (631) 591-7000	ernestsanchez2348@gmail. com

#### 2. Contact Representativ

керr	resentative	

Name	Organization	
Ernest T. Sanchez	The Sanchez Law Firm PC	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1155 F Street NW Suite 1050	Washington	DC	20004	+1 (202) 237- 2814	ernestsanchez2348@gmail. com

## 3. Application Filing Fee

Not Applicable

# 4. Control of Respondent

	(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 indirectly under the control of another entity?		No	

b) Provide the following information about this report:		
Purpose	Biennial	
"As of" date	10/01/2019	
	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 Name			FRN		
Peconic Public Broadcasting			0020296422		
Fac. ID No.	Call Sign	City		State	Service
38340	WPPB	SOUTHAMPTON		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	Absolute Charter			
Parties to contract or instrument	Peconic Public Broadcasting and State of New York			
Date of execution	10/2009			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: Corporate Governance Document			

#### **Document Information**

Description of contract or instrument	Bylaws
Parties to contract or instrument	Peconic Public Broadcasting and the State of New York
Date of execution	10/2009
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Corporate governance document

#### **Document Information**

Description of contract or instrument	National Public Radio Program Agreement			
Parties to contract or instrument	Peconic Public Broadcasting and NPR			
Date of execution	10/2019			
Date of expiration	09/2020			
Agreement type (check all that apply)	Network Affiliation Agreement			

#### 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	0020296422				
Entity Name	Peconic Public Broadcasting				
Address	dress PO Box 1410				
	Street 1				
	Street 2				
	City	Southampton			
	State ("NA" if non-U.S. address)	NY			
	Zip/Postal Code	11969-1410			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
<b>Positional Interests</b> (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 De Plus)		0.0%			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?					

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Ownershin	Intormation
Ownership	Information

FRN	9990127237	
Name	Wallace A. Smith	
Address	PO Box	1410
	Street 1	
	Street 2	
	City	Southampton
	State ("NA" if non-U.S.	NY

	address)			
	Zip/Postal Code	11969-1410		
	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 and General Manag	President and General Manager of PPB		
By Whom Appointed or Elected	Appointed by the Board			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	11.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

that do not appear on this report?

Ownership Information			
FRN	9990127238	9990127238	
Name	Rob Florio		
Address	PO Box	1410	
	Street 1		
	Street 2		
	City	Southampton	
	State ("NA" if non-U.S. NY address)		
	Zip/Postal Code 11969-1410		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Real Estate		
By Whom Appointed or Elected	Appointed by the Board		
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 from 0.0 to 100.0)	Voting	11.1%	
	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

Ownership Information			
FRN	9990127239		
Name	Bob Grisnik		
Address	<b>PO Box</b> 1410		
	Street 1		
	Street 2		
	City	Southampton	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11969-1410	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Pharmacist and,owner of Southrifty Drug		
By Whom Appointed or Elected	Appointed by the Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Race White	
Interest Percentages	Voting	11.1%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this r	an attributable interest in one o report?	r more broadcast stations	No

Name	Brian Halweil			
Address	РО Вох	1410		
	Street 1			
	Street 2			
	City	Southampton		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11969-1410		
	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	Portfolio Manager, Almanac Insights			
By Whom Appointed or Elected	Appointed by the Board			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino	Not Hispanic or Latino	
	Race	White		
Interest Percentages (enter percentage values	Voting	11.1%		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

Ownership Information			
FRN	9990127242		
Name	Christine Hansen		
Address	<b>PO Box</b> 1410		
	Street 1		
	Street 2       City     Southampton		
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11969-1410	
	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	Real .Estate		
By Whom Appointed or Elected	Appointed by the Board	Appointed by the Board		
Citizenship, Gender,	Citizenship US			
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	11.1%		
(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 o	r more broadcast stations No		

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

No

FRN	9990127243	9990127243		
Name	Victoria Kahn			
Address	<b>PO Box</b> 1410			
	Street 1			
	Street 2			
	City	Southampton		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11969-1410		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Adjunct professor and real estate professional			
By Whom Appointed or Elected	Appointed by the Board	Appointed by the Board		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	11.1%		
(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		more broadcast stations	No

Ownership Information				
FRN	9990127244	9990127244		
Name	Amy Worth			
Address	<b>PO Box</b> 1410			
	Street 1			
	Street 2			
	City	Southampton		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11969-1410		
	Country (if non-U.S.     United States       address)     United States			
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Artist and gallery owner			
By Whom Appointed or Elected	Appointed by the Board	Appointed by the Board		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	11.1%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

## **Ownership Information**

that do not appear on this report?

9990127245	
John Landes	
РО Вох	1410
Street 1	
Street 2	
	John Landes PO Box Street 1

	City	Southampton	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11969-1410	
	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	Attorney		
By Whom Appointed or Elected	Appointed by the Board		
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 from 0.0 to 100.0)	Voting	11.1%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Information				
FRN	9990128300			
Name	Robert Feinberg			
Address	PO Box	1410		
	Street 1			
	Street 2			
	City	Southampton		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11969-1410		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			

Attorney, Vice-President, General Counsel, and Secretary, WNET

**Principal Profession or** 

Occupation

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 from 0.0 to 100.0)	Voting	11.1%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes
(b) Respondent certifies th	nat any interests, including equi his filing are non-attributable.	ty, financial, or voting	Yes
interests, not reported in t If "No," submit as an exhibit	an explanation.		
If "No," submit as an exhibit	an explanation. an attribution exemption for an	y officer or director with	No
If "No," submit as an exhibit	an attribution exemption for an	y officer or director with	No

## 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.

Peconic Public Broadcasting 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: <b>President and General Manager</b> Exact Legal Title or Name of Respondent: <b>Peconic Public Broadcasting</b> Name: <b>Wallace A. Smith</b> Phone: <b>6315917000</b> 12/31/2019

### Certification