

(REFERENCE COPY - Not for submission)

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

File Number: 0000162391 | Submit Date: 2021-10-01 | FRN: 0001541689

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 10/01/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0001541689	Redwood Empire Public Television Inc	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 13	Eureka	CA	95502	+1 (707) 445- 0813	dgordon@keet- tv.org

2. Contact Representative

Name	Organization
David Gordon	Redwood Empire Public Television, Inc., KEET

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
PO Box 13	Eureka	CA	95502- 0013	+1 (707) 445- 0813	dgordon@keet-tv.

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 10/01/2021 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.

5. Licensee(s) and Station(s)

Licensee/Permittee Name	FRN
Redwood Empire Public Television Inc	0001541689

Fac. ID No.	Call Sign	City	State	Service
33800	K12OV-D	SHELTER COVE	CA	LPT
55435	KEET	EUREKA	CA	DTV
130556	K44JF-D	CRESCENT CITY	CA	LPD

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	PBS Membership Certification	
Parties to contract or instrument	Public Broadcasting Service and Redwood Empire Public Television, Inc., KEET	
Date of execution	02/2006	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Network Affiliation Agreement	

Document Information		
Description of contract or instrument	Bylaws for the regulation of Redwood Empire Public Television, Inc., and it's board of directors.	
Parties to contract or instrument	Redwood Empire Public Television, Inc., and the members of its board of directors.	
Date of execution	10/2021	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Bylaws	

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	0001541689			
Entity Name	Redwood Empire Public Telev	ision Inc		
Address	PO Box	13		
	Street 1			
	Street 2			
	City	Eureka		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	95502		
	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 r	ation 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	9990121187	9990121187	
Name	John VanderMolen	John VanderMolen	
Address	РО Вох		
	Street 1	4415 Cedar Street	
	Street 2		
	City	Eureka	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95503	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	

Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Contractor		
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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?		

Ownership Information		
FRN	9990121189	
Name	Chris Young	
Address	PO Box	
	Street 1	1890 Cottonwood
	Street 2	
	City	McKinleyville
	State ("NA" if non-U.S. address)	CA
	Zip/Postal Code	95519
	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	Executive Director TriCounties Independent Living	
By Whom Appointed or Elected	Membership	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting 14.3%	
(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 the	ve an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990138287		
Name	Nancy Kay		
Address	PO Box		
	Street 1	4835 Dickson Drive	
	Street 2		
	City	Eureka	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95503	
	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	Accountant		
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	9990138288		
Name	Mary Bullwinkel	Mary Bullwinkel	
Address	РО Вох	РО Вох	
	Street 1	4022 Baird Court	

	Street 2		
	City	Fortuna	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95540	
	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)		у)
Principal Profession or Occupation	Public Relations		
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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	9990138289	
Name	Michelle Sievertson	
Address	PO Box	
	Street 1	1438 7th Street
	Street 2	
	City Eureka State ("NA" if non-U.S. CA address)	
	Zip/Postal Code 95501	
	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	Retired	
By Whom Appointed or Elected	Membership	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	14.3%
(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	9990143848		
Name	Troy Vizenor		
Address	PO Box		
	Street 1	1334 Diamond Dr.	
	Street 2		
	City	Arcata	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95521	
	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	Controller	Controller	
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)		
Does interest holder have ar that do not appear on this re	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information			
FRN	9990143849		
Name	Gary Ogle		
Address	РО Вох		
	Street 1	134 D St.	
	Street 2	Suite 202	
	City	Eureka	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	95501	
	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	Insurance Broker		
By Whom Appointed or Elected	Membership		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

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

(c) Is Respondent seeking an attribution exemption for any officer or director duties wholly unrelated to the Licensee(s)?	with No
If "Yes," complete the information in the required fields and submit an Exhibit fully of	describing
that individual's duties and responsibilities, and explaining why that individual shoul	ld 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 has no 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: Executive Director Exact Legal Title or Name of Respondent: Redwood Empire Public Television, Inc. Name: David Gordon Phone: 7074450813