

(REFERENCE COPY - Not for submission)

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

File Number: **0000169202** Submit Date: **2021-11-17** FRN: **0005037643** 

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 11/17/2021

Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN	Entity Name	
0005037643	Nassau Community College	

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
One Education Drive	Garden City	NY	11530	+1 (516) 572- 7438	WHPC@NCC. EDU

## 2. Contact Representative

Nam	ne	Organization
Barı	ry S. Persh	Gray Miller Persh LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2233 Wisconsin Ave., NW Suite 226	Washington	DC	20007	+1 (202) 776- 2458	bpersh@graymillerpersh. 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 boindirectly under the control of ano	ard (or other governing entity) directly or ther 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)

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

Licensee/Permittee Name	FRN
Nassau Community College	0005037643

Fac. ID No.	Call Sign	City	State	Service
47429	WHPC	GARDEN CITY	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.

Not Applicable.

### 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	0005037643	0005037643		
Entity Name	Nassau Community College	Nassau Community College		
Address	PO Box			
	Street 1	One Education Drive		
	Street 2			
	City	Garden City		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11530		
	Country (if non-U.S. United States address)			
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 that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information				
FRN	9990119492	9990119492		
Name	Wanda Jackson			
Address	PO Box			
	Street 1	3452 Carey Lane		
	Street 2			
	City	Baldwin		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11510		
	Country (if non-U.S. United States address)			
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	Human Resources Manager			
By Whom Appointed or Elected	Governor			
Citizenship, Gender,	Citizenship	us		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages	Voting	10.0%		
(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?				

FRN	9990119496	9990119496		
Name	John DeGrace	John DeGrace		
Address	PO Box			
	Street 1	102 N. Cambridge St.		
	Street 2			
	City	Malverne		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11565		
	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	County Legislature	County Legislature		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	10.0%		
(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	9990119498		
Name	Jorge L. Gardyn	Jorge L. Gardyn	
Address	PO Box		
	Street 1	395 Stewart Ave.	
	Street 2		
	City	Garden City	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11530	
	Country (if non-U.S. address)	United States	

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Board ChairMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Physician		
By Whom Appointed or Elected	County Legislature, County Executive		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	10.0%	
(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	9990119500		
Name	Linda H. Green		
Address	PO Box		
	Street 1	365 East Overlook	
	Street 2		
	City	Port Washington	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11050	
	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	College teacher		
By Whom Appointed or Elected	County Executive		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	10.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations	No

Ownership Information				
FRN	9990119502			
Name	Edward W. Powers			
Address	РО Вох			
	Street 1	123 South 12th Street		
	Street 2			
	City	New Hyde Park		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11040		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Board SecretaryMember of Governing Board (or other governing entity)			
Principal Profession or Occupation	Director of Emergency Management Town of Hempstead			
By Whom Appointed or Elected	County Executive			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	10.0%		
(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	r more broadcast stations	No	

Ownership Information		
FRN	9990119503	
Name	Donna M. Tuman, Ed.D.	
Address	PO Box	

	Street 1	95 Todd Drive N.	
	Street 2		
	City	Glen Head	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11545	
	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	College Professor LIU Post		
By Whom Appointed or Elected	Nassau County Supervisor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	10.0%	
(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 or report?	r more broadcast stations No	

Ownership Information			
FRN	9990119505		
Name	Kathy Weiss		
Address	PO Box		
	Street 1	39 Fieldstone Lane	
	Street 2		
	City	Oyster Bay	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11771	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Board Vice ChairMember of Governing Board (or other governing entity)		

Principal Profession or Occupation	Adjunct professor		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	10.0%	
(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	9990138688			
Name	John R. Durso			
Address	PO Box			
	Street 1	214 Marle Place		
	Street 2			
	City	Bellmore		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	11710		
	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	Union Official	Union Official		
By Whom Appointed or Elected	Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	10.0%		
(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	n attributable interest in one o eport?	r more broadcast stations	No

Ownership Information			
FRN	9990138689		
Name	George Siberon		
Address	РО Вох		
	Street 1	581 Madison Avenue	
	Street 2		
	City	Baldwin	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11510	
	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	Executive Director, not for profit organization		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	10.0%	
(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	n attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990138692	
Name	Jermaine F. Williams	
Address	РО Вох	
	Street 1	363 Rice Circle
	Street 2	

	City	Garden City	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11530	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - President, CEO Nassau Community College		
Principal Profession or Occupation	President, CEO Nassau Community College		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	American Indian or Alaska Native, Black or African American, White	
Interest Percentages	Voting	0.0%	
(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 of report?	r more broadcast stations	No

Ownership Information		
FRN	9990144410	
Name	Carl Henry Denaud	
Address	PO Box	
	Street 1	840 14th Street
	Street 2	
	City	West Babylon
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	11704
	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	Student	

By Whom Appointed or Elected	Elected by Student Government Association		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	нт	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	10.0%	
	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	
` ' '	nat any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(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.

Nassau Community College is a public institution of education in the state of New York and is governed by its Board of Trustees. There is 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: <b>General Counsel</b> Exact Legal Title or Name of Respondent: <b>Nassau Community College</b> Name: <b>Donna Haugen</b> Phone: <b>5165727809</b> 11/17/2021
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