

(REFERENCE COPY - Not for submission)

Amendment to a Non-Commercial Broadcast Stations Biennial Ownership Report

File Number: 0000047369 | Submit Date: 2020-10-13 | FRN: 0012638961

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Amendment Status: Received Status Date:

10/13/2020 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name	
0012638961	Calvary Educational Broadcasting Network, INC.	

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
2773 BARRON RD.	POPLAR BLUFF	МО	63901- 9203	+1 (573) 276- 7315	KOKSRA80@GMAIL. COM

2. Contact Representative

Name	Organization
CHARLES R. NAFTALIN	HOLLAND & KNIGHT LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
800 17TH STREET, N. W. SUITE #1100	WASHINGTON	DC	20006- 3906	+1 (202) 457- 7040	CHARLES. NAFTALIN@HKLAW.COM

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:				
Relationship to stations/permits				
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	10/01/2017			
	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.			

Reason for Amendment	To provide information under Section 73.3613 of the FCCs
	rules.

5. Licensee(s) and Station(s)

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

Licensee/Permittee Name	FRN
Calvary Educational Broadcasting Network, Inc	0012638961

Fac. ID No.	Call Sign	City	State	Service
8439	KOKS	POPLAR BLUFF	MO	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 FOR A GENERAL NOT FOR PROFIT CORPORATION WITH STATE OF MISSOURI, OFFICE OF SECRETARY OF STATE			
Parties to contract or instrument	STATE OF MISSOURI, DONALD STEWART, NINA STEWART AND JIM BAGGETT			
Date of execution	03/1987			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: OTHER			

Document Information				
Description of contract or instrument	CERTIFICATE OF INCORPORATION WITH STATE OF MISSOURI, OFFICE OF SECRETARY OF STATE			
Parties to contract or instrument	STATE OF MISSOURI			
Date of execution	03/1987			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other Agreement Type: OTHER			

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	Ownership Information				
FRN	0012638961	0012638961			
Entity Name	Calvary Educational Broadcas	Calvary Educational Broadcasting Network, INC.			
Address	PO Box				
	Street 1	2773 BARRON RD.			
	Street 2				
	City	POPLAR BLUFF			
	State ("NA" if non-U.S. address)	МО			
	Zip/Postal Code	63901-9203			
	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	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 an attributable interest in one or more broadcast stations No that do not appear on this report?					

Ownership Information			
FRN	9990133244		
Name	NINA STEWART		
Address	PO Box		
	Street 1	C/O CALVARY EDUCATIONAL BROADCASTING NETWORK, INC.	
	Street 2		
	City	POPLAR BLUFF	
	State ("NA" if non-U.S. address)	MO	

	Zip/Postal Code	63901-9203		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Other - DIRECTOR			
Principal Profession or Occupation	BROADCASTER			
By Whom Appointed or Elected	BOARD			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Female		
	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	33.0%		
(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	or more broadcast stations	No	

Ownership Information			
0027303221			
GERALD R. WOOLVERTON			
BROADCASTING			
Other Interest Holder			
Officer, Other - DIRECTOR			
OWNER			
BOARD			
Officer, Other - DIRECTOR OWNER			

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	33.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No	

RN	9990133265		
lame	BEN STEWART		
Address	РО Вох		
	Street 1	C/O CALVARY EDUCATIONAL BROADCASTING NETWORK, INC.	
	Street 2	2773 BARRON RD.	
	City	POPLAR BLUFF	
	State ("NA" if non-U.S. address)	МО	
	Zip/Postal Code	63901-9203	
	Country (if non-U.S. address)	United States	
isting Type	Other Interest Holder		
Positional Interests check all that apply)	Other - DIRECTOR		
Principal Profession or Occupation	BROADCASTER		
By Whom Appointed or Elected	BOARD		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race nformation (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
nterest Percentages	Voting	33.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

(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
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(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.

File Name	Uploaded By	Attachment Type	Description
Ownership Information Provided for	Applicant	Ownership	Ownership Information Provided for
Informational Purposes.pdf		Chart	Informational Purposes

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: PRESIDENT AND DIRECTOR Exact Legal Title or Name of Respondent: CALVARY EDUCATIONAL BROADCASTING NETWORK, INC. Name: GERALD R WOOLVERTON Phone: 5732767315