

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: **0000164094** Submit Date: **2021-10-18** FRN: **0020176533**

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 10/25/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name
002017	76533	CHRISTIAN TELEVISION NETWORK OF MISSISSIPPI, INC.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 6922	Clearwater	FL	33758	+1 (727) 535- 5622	soneal@ctntv.

2. Contact Representative

Name		Organization		
	Joseph C. Chautin III	HARDY, CAREY, CHAUTIN & BALKIN, LLP		

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

3. Application Filing Fee

Question	Response	
Is this application being submitted without a filing fee?	No	

Fees

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAT	1	95	\$85.00
				Total	\$85.00

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:				
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
CHRISTIAN TELEVISION NETWORK OF MISSISSIPPI, INC.	0020176533

Fac. ID No.	Call Sign	City	State	Service
83946	WEPH	TUPELO	MS	DTV

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other 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. 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 Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Document Information			
Description of contract or instrument	ARTICLES OF INCORPORATION		
Parties to contract or instrument	STATE OF MISSISSIPPI		
Date of execution	06/2010		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: Entity Formation		

Document Information

Description of contract or instrument	BY LAWS
Parties to contract or instrument	BOARD OF DIRECTORS
Date of execution	06/2010
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity Organization

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) 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	0020176533			
Entity Name	CHRISTIAN TELEVISION NE	CHRISTIAN TELEVISION NETWORK OF MISSISSIPPI, INC.		
Address	PO Box	6922		
	Street 1			
	Street 2			
	City	Clearwater		
	State ("NA" if non-U.S. address)	FL		
	Zip/Postal Code	33758		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Interest holder is no Entity		nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No	
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 that do not appear on this report?		No

Ownership Information			
FRN	0019161231		
Name	Robert D'Andrea	Robert D'Andrea	
Address	PO Box	PO Box 6922	
	Street 1		
	Street 2		
	City	Clearwater	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	Zip/Postal Code 33758	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship	Citizenship US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held?
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 or report?	r more broadcast stations	Yes

Ownership Information		
FRN	0019245729	
Name	Virginia Oliver	
Address	PO Box Street 1 6150 101ST AVE Street 2	
	City PINNELLAS PARK	
	State ("NA" if non-U.S. address)	FL

	Zip/Postal Code	33782	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
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 this	an attributable interest in one c	r more broadcast stations	No

Ownership Information			
FRN	0019245695		
Name	Wayne Wetzel		
Address	PO Box		
	Street 1	6922 142ND AVE N.	
	Street 2		
	City	Largo	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	p/Postal Code 33771	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity Not Hispanic or Latino		
	Race	Race White	
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
from 0.0 to 100.0)	Equity 0.0%		

Total assets (Eq	uity Debt	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes	

Ownership Information			
FRN	0019245711		
Name	Jimmy Smith		
Address	РО Вох		
	Street 1	PO BOX 2430	
	Street 2		
	City	CLEVELAND	
	State ("NA" if non-U.S. address)	TN	
	Zip/Postal Code	37320-2430	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	Citizenship US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
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 that do not appear on this report? Yes			Yes

Ownership Information			
FRN	0027788355	0027788355	
Name	Phil Driscoll		
Address	PO Box Street 1 856 Mason Road Street 2		
	City	Monroe	
	State ("NA" if non-U.S. address)	ОН	

	Zip/Postal Code	45050	
	Zipirostal code 45050		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Director		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values	Voting	20.0%	Jointly Held? No
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 that do not appear on this report?		Yes	
	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?

If "Yes," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.

NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.

If using the subform, 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 newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.

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.

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?

No

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

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.

No

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.

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: President Exact Legal Title or Name of Respondent: CHRISTIAN TELEVISION NETWORK OF MISSISSIPPI, INC. Name: Robert D'Andrea Phone: 7275355622