

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

File Number:0000164629Submit Date:2021-10-25FRN:0006374599Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:10/25/2021Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name
0006374599	Light of Life Ministries, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
160 Riverside Drive	Augusta	ME	04330	+1 (207) 622- 9467	ray@lightoflife. info

2. Contact Representative

Name	Organization	
Joel Epley	Light of Life Ministries Inc.	

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
160 Riverside Drive	Augusta	ME	04330	+1 (207) 622-1340	joel@lightoflife.info

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?	

(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.

and Station(s)

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

Licensee/Permittee Name	FRN
Light of Life Ministries, Inc.	0006374599

Fac. ID No.	Call Sign	City	State	Service
37467	WWWA	WINSLOW	ME	FM
37469	WMDR	AUGUSTA	ME	АМ
92341	WMDR-FM	OAKLAND	ME	FM
123284	WMEY	BOWDOIN	ME	FM
145328	W234DQ	AUGUSTA	ME	FX
145339	W234CG	BRUNSWICK	ME	FX
145419	W217CJ	PORTLAND	ME	FX
145527	W264BQ	BANGOR	ME	FX
174218	WRPB	BENEDICTA	ME	FM
174228	WWLN	LINCOLN	ME	FM
174242	WRNM	ELLSWORTH	ME	FM
200907	W265DP	AUGUSTA	ME	FX

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	Light of Life Ministries Inc. Bylaws	
Parties to contract or instrument	Light of Life Ministries Inc.	
Date of execution	03/2014	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Light of Life Ministries Inc. Bylaws with Amendment	

Document Information

Description of contract or instrument	Articles of Incorporation
Parties to contract or instrument	Light of Life Ministries, Inc.
Date of execution	08/1986
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Articles of Incorporation with amendment

(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	0006374599	0006374599		
Entity Name	Light of Life Ministries, Inc.	Light of Life Ministries, Inc.		
Address	PO Box			
	Street 1	160 Riverside Drive		
	Street 2			
	City	Augusta		
	State ("NA" if non-U.S. address)	ME		
	Zip/Postal Code	04330		
	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	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 Plus)	0.0%		
Does interest holder have that do not appear on this	e an attributable interest in one or more broadcast stations No s report?			

Ownership Information

Ownership Information

FRN	9990141146	
Name	Raymond Bouchard	
Address	PO Box	

	Street 1	45 PURGATORY DRIVE		
	Street 2			
	City	Litchfield		
	State ("NA" if non-U.S. address)	ME		
	Zip/Postal Code	04350		
	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	Retired			
By Whom Appointed or Elected	Board			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	American Indian or Alaska Native, White		
Interest Percentages	Voting	25.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			

Ownership Information

that do not appear on this report?

Ownership information			
FRN	9990141173		
Name	Susanne Bouchard		
Address	PO Box		
	Street 1	45 PURGATORY DRIVE	
	Street 2CityLitchfieldState ("NA" if non-U.S. address)MEZip/Postal Code04350Country (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	Chief Executive Officer		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	25.0%	
(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			No

Ownership Information

that do not appear on this report?

Ownership Information			
FRN	0005314877		
Name	JOEL A. EPLEY		
Address	PO Box		
	Street 1	160 Riverside Drive	
	Street 2		
	City	Augusta	
	State ("NA" if non-U.S. address)	ME	
	Zip/Postal Code	04330	
	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	Engineer		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	25.0%	
(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	attributable interest in one or port?	more broadcast stations	No

Ownership Information				
FRN	9990144571			
Name	Christina Epley			
Address	PO Box			
	Street 1	160 Riverside Drive		
	Street 2			
	City	Augusta		
	State ("NA" if non-U.S. address)	ME		
	Zip/Postal Code	04330		
	Country (if non-U.S. address)	United States		
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	Executive Assistant			
By Whom Appointed or Elected	Board			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Race White		
Interest Percentages	Voting	25.0%		
(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	an attributable interest in one o report?	r more broadcast stations	No	

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

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

If "<u>Yes</u>," 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
Light of Life Ministries Inc. Articles of Incorporation.pdf	Applicant	Ownership Chart	Light of Life Ministries Inc. Articles of Incorporation
Light of Life Ministries, Inc. Bylaws.pdf	Applicant	Ownership Chart	Light of Life Ministries, Inc. Bylaws

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: Manager of Engineering and IT Exact Legal Title or Name of Respondent: Joel A Epley Name: Joel A Epley Phone: 2076221340 10/23/2021