

(REFERENCE COPY - Not for submission)

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

File Number: **0000223522** Submit Date: **2023-10-20** FRN: **0005015151** 

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 10/20/2023

Filing Status: Active

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

#### 1. Respondent

FRN	Entity Name
0005015151	Christian Ministries, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
140 Main Street	Essex Junction	VT	05452- 8310	+1 (802) 878- 8885	sean@thelightradio.

## 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

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	10/01/2023	
	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
Christian Ministries, Inc.	0005015151

Fac. ID No.	Call Sign	City	State	Service
11084	WGLY-FM	BOLTON	VT	FM
11085	WCMD-FM	BARRE	VT	FM
11095	WFTF	RUTLAND	VT	FM
53612	WFAD	MIDDLEBURY	VT	AM
76054	WCKJ	ST. JOHNSBURY	VT	FM
82833	WGLV	WOODSTOCK	VT	FM
88180	WCMK	PUTNEY	VT	FM
172444	WGLG	SWANTON	VT	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 Incorpoation	
Parties to contract or instrument	State of Vermont	
Date of execution	01/1983	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Governing Document	

Document Information		
Description of contract or instrument	Constitution and By-Laws	
Parties to contract or instrument	Board of Directors	
Date of execution	01/1983	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Governing Document	

## 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	0005015151			
Entity Name	Christian Ministries, Inc.			
Address	PO Box			
	Street 1	140 Main Street		
	Street 2			
	City	Essex Junction		
	State ("NA" if non-U.S. address)	VT		
	Zip/Postal Code	05452-8310		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent	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 an attributable interest in one or more broadcast stations  Yes that do not appear on this report?				

Ownership Information	wnership Information		
FRN	9990144358		
Name	Virginia Drye		
Address	РО Вох	3	
	Street 1		
	Street 2		
	City	Plainfield	
	State ("NA" if non-U.S.	NH	

	address)		
	Zip/Postal Code	03781	
	Country (if non-U.S. address)	United States	
Listing Type	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	Student	Student	
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(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	an attributable interest in one creport?	r more broadcast stations Yes	

Ownership Information		
FRN	9990151118	
Name	Bonnie Manion	
Address	PO Box	
	Street 1	10 Kent Street
	Street 2	
	City Montpelier	
	State ("NA" if non-U.S. VT address)	
	Zip/Postal Code 05602	
	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	Homemaker	
By Whom Appointed or Elected	Board of Directors	
Citizenship, Gender,	Citizenship US	

Ethnicity, and Race	Gender	Female
Information (Natural Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	20.0%
	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 creport?	or more broadcast stations Yes

FRN	9990144355		
Name	Edward Cooney		
Address	PO Box		
	Street 1	16 South Main Street	
	Street 2		
	City	Jericho	
	State ("NA" if non-U.S. address)	VT	
	Zip/Postal Code	05465	
	Country (if non-U.S. address)	United States	
_isting 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 of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race nformation (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
nterest Percentages	Voting	20.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

(	Ownership Information	
	FRN	9990137318

Name	Kris Merchant		
Address	PO Box		
	Street 1	16 Londonderry Lane	
	Street 2		
	City	Essex Junction	
	State ("NA" if non-U.S. address)	VT	
	Zip/Postal Code	05452	
	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	Sales Manager		
By Whom Appointed or Elected	Board of Directors		
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%	
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 o	r more broadcast stations	Yes

Ownership Information		
FRN	9990118952	
Name	Brett Gale	
Address	PO Box 642	
	Street 1	
	Street 2	
	City	Lyndon Center
	State ("NA" if non-U.S. address)	VT
	Zip/Postal Code	05850
	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	Insurance Agent		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	20.0%	
(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	an attributable interest in one o	r more broadcast stations	Yes
• • •	at 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.

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: <b>President</b> Exact Legal Title or Name of Respondent: <b>Christian Ministries, Inc.</b> Name: <b>Brett Gale</b> Phone: <b>8028788885</b>
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