

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

File Number:0000097332Submit Date:2020-01-14FRN:0014839302Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:01/14/2020Filing Status:Active

# **Section I - General Information**

### 1. Respondent

FRN	Entity Name
0014839302	Horizon Christian Fellowship

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
356 Broad Street	Fitchburg	МА	01420	+1 (978) 665- 9111	debbie@renewfm. org

#### 2. Contact Representative

Name	Organization		
Deborah Jean Smith	Horizon Christian Fellowship RENEW FM		

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
356 Broad Street	Fitchburg	MA	01420	+1 (978) 665-9111	debbie@renewfm.org

# Not Applicable

#### 3. Application Filing Fee

# 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 No indirectly under the control of another entity?						
(b) Provide the following information about this report:						
Purpose Biennial						
As of" date 10/01/2019						

Licensee/Permittee Nam	ne	FRN			
Horizon Christian Fellow	ship		00148	39302	
Fac. ID No. Call Sign City				State	Service
8418	WFGL	FITCHBURG		МА	AM
122204	WJWT	GARDNER		МА	FM
122297	WTYN	LUNENBURG		MA	FM
122299	WRYP	WELLFLEET		MA	FM
138873	W291DA	FITCHBURG		МА	FX
138875	W244CF	PLYMOUTH		МА	FX
152268	W279BQ	BOSTON		МА	FX
156579	W271CG	QUINCY		MA	FX
175310	WYZX	EAST FALMOUTH		MA	FM
175362	WYDI	DERRY		NH	FM
175441	WJNF	DALTON		МА	FM
176844	WWRN	ROCKPORT		МА	FM
176949	WXEV	BRADFORD		RI	FM
177374	WJXP	FITCHBURG		МА	FM

# Section II – Biennial Ownership Information

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 Section 73.3613 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

1. 47 C.F.R.

Documents

(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 ha 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	0014839302	0014839302			
Entity Name	Horizon Christian Fellowship				
Address	PO Box				
	Street 1	356 Broad Street			
	Street 2				
	City	Fitchburg			
	State ("NA" if non-U.S. address)	MA			
	Zip/Postal Code	01420			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
<b>Positional Interests</b> (check all that apply)	Respondent				
Tribal Nation or Tribal Entity	Interest holder is not a Tribal I	nation or Tribal entity			
Interest Percentages	Voting	0.0%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?					

### FRN 9990126216 George Small Name Address **PO Box** Street 1 12 Beech Street Street 2 City Fitchburg State ("NA" if non-U.S. MA address) 01420 Zip/Postal Code Country (if non-U.S. **United States** address) Listing Type Other Interest Holder Member of Governing Board (or other governing entity) **Positional Interests** (check all that apply) **Principal Profession or** Pastor Occupation

**Ownership Information** 

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	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	20.0%		
	Total assets (Equity Debt Plus)	20.0%		
Does interest holder have an attributable interest in one or more broadcast stations No				

Ownership Information				
FRN	9990126226			
Name	Jimmie Monroe			
Address	PO Box			
	Street 1	14 Gardner Lane		
	Street 2			
	City	Ayer		
	State ("NA" if non-U.S. address)	MA		
	Zip/Postal Code	01432		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (	or other governing entity)		
Principal Profession or Occupation	Businessman			
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	Black or African American		
Interest Percentages	Voting	20.0%		
(enter percentage values from 0.0 to 100.0)	Equity	20.0%		
	Total assets (Equity Debt Plus)	20.0%		

that do not appear on this report?

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

No

Ownership Information						
FRN	9990126229					
Name	Donald McGrath					
Address	PO Box					
	Street 1	6 Wood Avenue				
	Street 2					
	City	Granby				
	State ("NA" if non-U.S. address)	MA				
	Zip/Postal Code	01033				
	Country (if non-U.S. address)	United States				
Listing Type	Other Interest Holder					
Positional Interests (check all that apply)	Member of Governing Board (o	or other governing entity)				
Principal Profession or Occupation	Printer					
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	20.0%				
(enter percentage values from 0.0 to 100.0)	Equity	20.0%				
	Total assets (Equity Debt Plus)	20.0%				
oes interest holder have an attributable interest in one or more broadcast stations No nat do not appear on this report?						

#### **Ownership Information**

FRN	9990126233		
Name	Paul Richard		
Address	PO Box		
	Street 1	76 Willis Road	
	Street 2		
	City	Gardner	

	State ("NA" if non-U.S. address)	MA				
	Zip/Postal Code	01440				
	Country (if non-U.S. address)	United States				
Listing Type	Other Interest Holder					
<b>Positional Interests</b> (check all that apply)	Member of Governing Board	Member of Governing Board (or other governing entity)				
Principal Profession or Occupation	Vice-President Sales					
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	20.0%				
(enter percentage values from 0.0 to 100.0)	Equity	20.0%				
	Total assets (Equity Debt Plus)	20.0%				
	Does interest holder have an attributable interest in one or more broadcast stations No hat do not appear on this report?					

FRN	9990126238		
Name	Robert Greska		
Address	PO Box		
	Street 1	33 Crestfield Lane	
	Street 2		
	City	Leominster	
	State ("NA" if non-U.S. address)	МА	
	Zip/Postal Code	01453	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Technical Course Developer		
By Whom Appointed or Elected	Board		

Ethnicity, and Race	Citizenship	US	
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	20.0%	
	Equity	20.0%	
	Total assets (Equity Debt Plus)	20.0%	
Does interest holder have	No		
that do not appear on this	report ?		
(b) Respondent certifies th	nat any interests, including equin	ty, financial, or voting	Yes
interests, not reported in t If "No," submit as an exhibit (c) Is Respondent seeking	nat any interests, including equin his filing are non-attributable. an explanation. an attribution exemption for an		Yes
<ul> <li>(b) Respondent certifies the interests, not reported in the interest of the interest</li></ul>	nat any interests, including equin his filing are non-attributable. an explanation. an attribution exemption for an	y officer or director with	

## 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 vertical ownership structure. Parent entity is Horizon Christian Fellowship.

# **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>Legal Helper</b> Exact Legal Title or Name of Respondent: <b>Deborah J. Smith</b> Name: <b>Deborah Jean Smith</b> Phone: <b>9786659111</b> 01/14/2020