



(REFERENCE COPY - Not for submission)

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

File Number: **0000149948** | Submit Date: **2021-06-10** | FRN: **0004986592**

Purpose: **Noncommercial Broadcast Stations Non-Biennial Ownership Report** | Status: **Received** | Status Date: **06/10/2021** | Filing Status: **Active**

Section I - General Information

1. Respondent

FRN	Entity Name
0004986592	Family Life Ministries, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 506 7634 COunty Route 14	Bath	NY	14810	+1 (607) 776-4151	ricksnavely@fln.org

2. Contact Representative

Name	Organization
Rick Snavelly	Family Life Ministries, Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
7634 Campbell Creek Road	Bath	NY	14810	+1 (607) 776-4151	ricksnavely@fln.org

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	Transfer of control or assignment of license/permit
"As of" date	06/01/2021 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)
/Permittees(s)
and Station(s)
/Permit(s)**

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

Licensee/Permittee Name	FRN
Family Life Ministries, Inc.	0004986592

Fac. ID No.	Call Sign	City	State	Service
9409	WGGO	SALAMANCA	NY	AM
10687	WMTT	HORSEHEADS	NY	AM
10688	WMTT-FM	HORSEHEADS	NY	FM
14713	WENY-FM	BIG FLATS	NY	FM
20682	WCOA-FM	JOHNSTOWN	PA	FM
20846	W280CV	SCRANTON, ETC.	PA	FX
21197	WUDE	PORTVILLE	NY	FM
49449	WPHD	MONTOUR FALLS	NY	FM
52126	WZKZ	ALFRED	NY	FM
91930	WCOB	STATE COLLEGE	PA	FM
141382	W263CZ	OLEAN	NY	FX

Section II – Non-Biennial Ownership Information

**1. 47 C.F.R.
Section 73.3613
Documents**

Licensee/Permittee Respondents 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/Permittee Respondents should select "Not Applicable" in response to this question.

Not Applicable.

**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) or Permittee(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) or Permittee(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	0004986592

Entity Name	Family Life Ministries, Inc.	
Address	PO Box	506
	Street 1	7634 COunty Route 14
	Street 2	
	City	Bath
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14810
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
Positional Interests (check all that apply)	Respondent	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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

Ownership Information		
FRN	9990132067	
Name	Norb Fuest	
Address	PO Box	
	Street 1	2039 Church Road
	Street 2	
	City	Darien Center
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14040
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Business Owner Appletree HR and Safety Consultants	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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
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Ownership Information		
FRN	9990132088	
Name	Mike Stuart	
Address	PO Box	
	Street 1	200 Hopkins Road
	Street 2	
	City	Hornell
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14843
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Retired Business Owner Stuarts Pools	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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	

Ownership Information		
FRN	9990132101	
Name	John Farrell	
Address	PO Box	
	Street 1	101 Red Fox Run
	Street 2	
	City	Vestal
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	13850
	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	Business Owner Exit Realty	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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

Ownership Information

FRN	9990132102	
Name	Clark Johnson	
Address	PO Box	373
	Street 1	
	Street 2	
	City	Eldred
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	16731
	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 and Marketing Territory Manager Kessel and Company	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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

Ownership Information

FRN	9990132105	
Name	Brad Kellett	
Address	PO Box	
	Street 1	3617 County Line Road
	Street 2	

	City	Winfield
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	17889
	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	CPA Larson, Kellett, and Associates	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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

Ownership Information

FRN	9990132108	
Name	Tim Landers	
Address	PO Box	
	Street 1	9323 Transit Road
	Street 2	
	City	Stafford
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14143
	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	Retired Director of Bldgs and Grounds Genesee College	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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

Ownership Information		
FRN	9990136594	
Name	Christine Borghi-Cavallaro	
Address	PO Box	
	Street 1	6543 Rush Lima Road
	Street 2	
	City	Honeoye Falls
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14472
	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	Physician Brighton Family Medicine	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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

Ownership Information		
FRN	9990136595	
Name	Drew Klotzbach	
Address	PO Box	
	Street 1	7420 Alleghany Road
	Street 2	
	City	Basom
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14013
	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	Business Owner Alleghany Farm Service	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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

Ownership Information

FRN	9990143538	
Name	Richard Snaveley, Jr.	
Address	PO Box	
	Street 1	7634 County Rd 14
	Street 2	
	City	Bath
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14810
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	President of Family Life Ministries, Inc.	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	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

Ownership Information

FRN	9990143539	
Name	Diane Dersch	
Address	PO Box	
	Street 1	2813 State Route 96
	Street 2	
	City	Waterloo

	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	13165
	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	Retired teacher	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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

Ownership Information

FRN	9990143540	
Name	TJ Kiczenski	
Address	PO Box	
	Street 1	2362 Stonegate Trail
	Street 2	
	City	Corning
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	14830
	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	Scientist Corning Inc.	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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

Ownership Information		
FRN	9990143541	
Name	John Unruh	
Address	PO Box	
	Street 1	1242 Oak Hill Road
	Street 2	
	City	Ulster
	State ("NA" if non-U.S. address)	PA
	Zip/Postal Code	18850
	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	Business Owner	
By Whom Appointed or Elected	Board of Directors	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	9.0%
	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
(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
(c) 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

Certification

Section	Question	Response
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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 LICENSE --OR 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: Family Life Ministries, Inc. Name: Richard Snavely , Jr.. Phone: 6077764151 06/10/2021