

FRN

0008217135

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

File Number:0000164418Submit Date:2021-10-21FRN:0008217135Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:10/25/2021Filing Status:Active

Section I - General Information

LIFE RADIO MINISTRIES, INC.

1. Respondent

Entity Name

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
100 S Hill St Suite 100	Griffin	GA	30223	+1 (770) 229- 2020	ddoran@newliferadio. com

2. Contact Representative

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

Street	City (and Country if non U.S.		Zip		
Address	address)	State	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	10/01/2021
	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.

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

Licensee/Permittee Name FRN					
LIFE RADIO MINISTRIES, INC.				3217135	
Fac. ID No.	Call Sign	City		State	Service
46714	WMVV	GRIFFIN		GA	FM
86333	WMVW	PEACHTREE CITY		GA	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 Incorporation	
Parties to contract or instrument	Licensee	
Date of execution	09/1993	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Entity Formation	

Document Information		
Description of contract or instrument	Bylaws	
Parties to contract or instrument	Licensee	
Date of execution	04/2011	
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, 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	0008217135			
Entity Name	LIFE RADIO MINISTRIES, IN	LIFE RADIO MINISTRIES, INC.		
Address	PO Box			
	Street 1	100 S Hill St		
	Street 2	Suite 100		
	City	Griffin		
	State ("NA" if non-U.S. address)	GA		
	Zip/Postal Code	30223		
	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 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 No that do not appear on this report?				

Ownership Information

FRN	9990117622			
Name	Joseph C. Emert			
Address	PO Box			
	Street 1	11 Providence New London Turnpike		
	Street 2			
	City	North Stonington		
	State ("NA" if non-U.S. address)	СТ		
	Zip/Postal Code	06359		
	Country (if non-U.S.United Statesaddress)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Other - PresidentMember of Governing Board (or other governing entity)			

Principal Profession or Occupation	Broadcast Executive - Chairman		
By Whom Appointed or Elected	Founder		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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			Yes

Ownership Information

that do not appear on this report?

Ownership Information			
FRN	9990117623		
Name	Jenny H. Emert		
Address	PO Box		
	Street 1	11 Providence New London Turnpike	
	Street 2		
	City	North Stonington	
	State ("NA" if non-U.S. address)	СТ	
	Zip/Postal Code	06359	
	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	Founder		
By Whom Appointed or Elected	Founder		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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	No

that do not appear on this report?

FRN	9990117624		
Name	Douglas J. Doran		
Address	PO Box		
	Street 1	697 HWY 36 E	
	Street 2		
	City	Barnesville	
	State ("NA" if non-U.S. address)	GA	
	Zip/Postal Code	30204	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - PresidentMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	President		
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 (enter percentage values from 0.0 to 100.0)	Voting	14.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

Ownership Information			
FRN	9990117626		
Name	Stephen G. Emert		
Address	PO Box		
	Street 1	4911 Bill Cheek Rd	
	Street 2		

	City	Auburn	
	State ("NA" if non-U.S. address)	GA	
	Zip/Postal Code	30011	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Other - DirectorMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(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 report?	or more broadcast stations	No

Ownership Information		
FRN	9990142843	
Name	Michael B. Shelley	
Address	PO Box	
	Street 1	193 Magnolia Trace
	Street 2	
	CityMilnerState ("NA" if non-U.S. address)GAZip/Postal Code30257	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Vice-PresidentMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	General Manager	

By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No			

Ownership Information		
FRN	9990142844	
Name	Ashley Monroe	
Address	РО Вох	
	Street 1	215 Rocky Branch Rd
	Street 2	
	City	Barnesville
	State ("NA" if non-U.S. address)	GA
	Zip/Postal Code	30204
	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 Information (Natural	Gender	Female
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	14.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%

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	9990144334		
Name	Howard Johnson		
Address	PO Box		
	Street 1	8291 Tupelo Trail	
	Street 2		
	City	Jonesboro	
	State ("NA" if non-U.S. address)	GA	
	Zip/Postal Code	30236	
	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	Logistics Specialist		
By Whom Appointed or Elected	Board of Directors	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	14.3%	
(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 No that do not appear on this report?			No
(b) Respondent certifies that any interests, including equity, financial, or voting Yes interests, not reported in this filing are non-attributable.			Yes

If "No," submit as an exhibit an explanation.

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

No

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.

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: Life Radio Ministries, Inc. Name: Doug Doran Phone: 7702292020 10/21/2021