



(REFERENCE COPY - Not for submission)

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

File Number: 0000166161 | Submit Date: 2021-11-04 | FRN: 0009958521

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 11/04/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0009958521		Media Ministries, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
130 Art Alley Suite C	Monroe	LA	71201	+1 (318) 387-1230	sheryl@887thecross.com

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	10/01/2021 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)
and Station(s)

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

Licensee/Permittee Name	FRN
Media Ministries, Inc.	0009958521

Fac. ID No.	Call Sign	City	State	Service
22172	KBMQ	MONROE	LA	FM
68796	KBYO-FM	FARMERVILLE	LA	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	FIRST AMENDMENT TO BYLAWS
Parties to contract or instrument	BOARD OF DIRECTORS
Date of execution	10/1999
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity Organization

Document Information	
Description of contract or instrument	ARTICLES OF INCORPORATION
Parties to contract or instrument	STATE OF LOUISIANA
Date of execution	12/1985
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity Formation

Document Information	
Description of contract or instrument	SECOND AMENDMENT TO BYLAWS
Parties to contract or instrument	BOARD OF DIRECTORS
Date of execution	06/2001
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity Organization

Document Information	
Description of contract or instrument	AMENDMENT TO ARTICLES OF INCORPORATION
Parties to contract or instrument	STATE OF LOUISIANA
Date of execution	11/1998

Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Entity Organization

Document Information	
Description of contract or instrument	BYLAWS
Parties to contract or instrument	BOARD OF DIRECTORS
Date of execution	09/1999
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	0009958521	
Entity Name	Media Ministries, Inc.	
Address	PO Box	
	Street 1	130 Art Alley
	Street 2	Suite C
	City	Monroe
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	71201
	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 (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	Equity	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?			No

Ownership Information			
FRN	0027261718		
Name	Kim Golden		
Address	PO Box		
	Street 1	1131 Finks Hideaway Road	
	Street 2		
	City	Monroe	
	State ("NA" if non-U.S. address)	LA	
	Zip/Postal Code	71203	
	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	Engineer		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information			
FRN	0009362179		
Name	Bryan D. Cordill		

Address	PO Box	
	Street 1	4204 Chauvin Lane
	Street 2	
	City	Monroe
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	71201
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Property 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	16.6%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	0027259126	
Name	William A. Adcock	
Address	PO Box	
	Street 1	115 Hodge Watson Road
	Street 2	
	City	Calhoun
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	71225
	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	Hospital Administrator		
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	16.6%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information		
FRN	0027259159	
Name	Don Gene Banks, Jr.	
Address	PO Box	
	Street 1	103 Comanche Circle
	Street 2	
	City	West Monroe
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	71291
	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	Financial Advisor	
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	Voting	16.6%

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 that do not appear on this report?		No

Ownership Information		
FRN	0020027454	
Name	Kevin Woods	
Address	PO Box	
	Street 1	1098 Morgan Hare Road
	Street 2	
	City	Monroe
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	71203
	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	Principal, Insurance Industry	
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	16.6%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No

Ownership Information		
FRN	0027259175	
Name	Quentin Holmes	
Address	PO Box	
	Street 1	81 Quail Ridge Drive

	Street 2	
	City	Monroe
	State ("NA" if non-U.S. address)	LA
	Zip/Postal Code	71203
	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	University Professor	
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	Black or African American
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	16.6%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No
(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 " <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.		No

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 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: Media Ministries, Inc. Name: Brian Cordill Phone: 3183871230 11/04/2021