



(REFERENCE COPY - Not for submission)

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

File Number: 0000168629 | Submit Date: 2021-11-15 | FRN: 0003746781

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report | Status: Received | Status Date: 11/15/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN		Entity Name			
0003746781		Grace Missionary Baptist Church, Inc.			

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
520 ROBERTS RD	NEWPORT	NC	28570	+1 (252) 223-4600	fbn@fbnradio.com

2. Contact Representative

Name		Organization			
Pastor Clyde Eborn		Grace Missionary Baptist Church			

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
520 Roberts Rd.	Newport	NC	28570	+1 (252) 223-4600	fbn@fbnradio.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
Grace Missionary Baptist Church, Inc.	0003746781

Fac. ID No.	Call Sign	City	State	Service
24709	WOTJ	MOREHEAD CITY	NC	FM
24710	W276AX	PRINCETON, ETC.	NC	FX
24722	WMLJ	SUMMERSVILLE	WV	FM
59418	WFIC	COLLINSVILLE	VA	AM
85072	WYBJ	NEWTON GROVE	NC	FM
85714	W208AO	BELL ARTHUR	NC	FX
87068	W244BF	NIMITZ	WV	FX
87070	W220BW	AYDEN	NC	FX
88144	W204BA	OAKLAND	MD	FX
91388	W216BH	HENDERSON	NC	FX
92130	W204CL	LEXINGTON PARK	MD	FX
92135	W209BH	BERNARDSTOWN	WV	FX
122745	W214CB	EDENTON	NC	FX
122755	W201DI	MONROE	NC	FX
122756	W214BU	ELIZABETH CITY	NC	FX
174547	WRJS	SOPERTON	GA	FM
176574	WWFJ	EAST FAYETTEVILLE	NC	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	State of North Carolina
Date of execution	03/1972
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: These are the articles of incorporation for the state of North Carolina.

Document Information	
Description of contract or instrument	By-Laws

Parties to contract or instrument	Grace Missionary Baptist Church
Date of execution	10/1966
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: The by-Laws of Grace Missionary Baptist Church.

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	0003746781	
Entity Name	Grace Missionary Baptist Church, Inc.	
Address	PO Box	
	Street 1	520 ROBERTS RD
	Street 2	
	City	NEWPORT
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28570
	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	9990117810	
Name	Michael D. Ebron	
Address	PO Box	
	Street 1	124 Grace Baptist St.
	Street 2	
	City	Newport
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28570
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Manager	
By Whom Appointed or Elected	Grace Baptist Church	
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	16.7%
	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	9990117811	
Name	Frank D. Basdeo	
Address	PO Box	
	Street 1	1038 Orange St.
	Street 2	

	City	Newport
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28570
	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	
By Whom Appointed or Elected	Grace Baptist Church	
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	16.7%
	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	9990117813	
Name	James E. Burns	
Address	PO Box	
	Street 1	112 Shepard St.
	Street 2	
	City	Havelock
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28532
	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	

By Whom Appointed or Elected	Grace Baptist Church	
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	16.7%
	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	9990117814	
Name	Clarence C. Ingle	
Address	PO Box	
	Street 1	118 Powell St.
	Street 2	
	City	Newport
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28570
	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	
By Whom Appointed or Elected	Grace Baptist Church	
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	16.7%
	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
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Ownership Information		
FRN	9990117815	
Name	Bruce Walker	
Address	PO Box	
	Street 1	413 Rams Rd.
	Street 2	
	City	Havelock
	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28532
	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	Restaurant Worker	
By Whom Appointed or Elected	Grace Baptist Church	
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	16.7%
	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	9990117807	
Name	Clyde I. Eborn	
Address	PO Box	
	Street 1	149 Howard Rd.
	Street 2	
	City	Newport

	State ("NA" if non-U.S. address)	NC
	Zip/Postal Code	28570
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer	
Principal Profession or Occupation	Pastor	
By Whom Appointed or Elected	Grace Baptist Church	
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	16.7%
	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

(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
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(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
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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.

Grace Missionary Baptist Church is the sole licensee

Section III - Certification

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: Pastor/President Exact Legal Title or Name of Respondent: Pastor Name: Clyde I Eborn Phone: 1252223460 11/15/2021