

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

File Number:0000222762Submit Date:2023-10-12FRN:0009111600Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:10/12/2023Filing Status:Active

Section I - General Information

1. Respondent

FRN	Entity Name
0009111600	Maranatha Bible Institute, Inc.

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 66	Elkton	MD	21922- 0246	+1 (410) 392- 3225	mbchurchoffice@gmail. 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 (984) 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	10/01/2023	
	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		
Maranatha Bible Institute, Inc	Maranatha Bible Institute, Inc.			0009111600	
Fac. ID No.	ac. ID No. Call Sign City				
39897	WOEL-FM	ELKTON	MD	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 Maryland	
Date of execution	01/1976	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Entity Formation	

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	wnership Information			
FRN	0009111600			
Entity Name	Maranatha Bible Institute, Inc.			
Address	PO Box	66		
	Street 1			
	Street 2			
	City	Elkton		

	State ("NA" if non-U.S. address)	MD		
	Zip/Postal Code	21922-0246		
	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	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?				

FRN	9990120230		
Name	TIMOTHY H. DOW		
Address	PO Box		
	Street 1	31 JONES CHAPEL RD	
	Street 2		
	City	ELKTON	
	State ("NA" if non-U.S. address)	MD	
	Zip/Postal Code	21921	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governir	ng Board (or other governing entity)	
Principal Profession or Occupation	HEADMASTER FOR MARA	NATHA BAPT CH ACAD	
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	
nterest Percentages	Voting	16.6%	

	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	9990120231		
Name	DR. ROBERT HITCHENS		
Address	PO Box		
	Street 1	PO Box 66	
	Street 2		
	City	ELKTON	
	State ("NA" if non-U.S. address)	MD	
	Zip/Postal Code	21922	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - Dean		
Principal Profession or Occupation	Retired		
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	16.6%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No

Ownership Information FRN 9990120232 Name RAY LINZY, JR. Address PO Box Street 1 2477 THEODORE RD

	Street 2		
	City	NORTH EAST	
	State ("NA" if non-U.S. address)	MD	
	Zip/Postal Code	21901	
	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	STATION MANAGER		
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	Voting	16.6%	
(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

Owners	hin	Information	
Owners	nıp.	information	

FRN	9990120233	
Name	MARK FREESE	
Address	PO Box	
	Street 1	845 WHEATLEY ROAD
	Street 2	
	City	NORTH EAST
	State ("NA" if non-U.S. address)	MD
	Zip/Postal Code	21901
	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	PLUMBING CONTRACTOR		
By Whom Appointed or Elected	Board of Directors		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	16.6%	
(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 o	r more broadcast stations	No

Ownership Information

that do not appear on this report?

Ownership Information		
FRN	9990120234	
Name	JERRY STALNAKER	
Address	PO Box	
	Street 1	51 PAPER MILL RD
	Street 2	
	City	ELKTON
	State ("NA" if non-U.S. address)	MD
	Zip/Postal Code	21921
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board	I (or other governing entity)
Principal Profession or Occupation	Retired	
By Whom Appointed or Elected	Board of Directors	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	16.6%
(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			No

that do not appear on this report?

FRN	0000400005			
	9990120235	9990120235		
Name	ALLEN DICKERSON, JR.			
Address	PO Box			
	Street 1	3181 OLD ELK NECK ROAD	1	
	Street 2			
	City	ELKTON		
	State ("NA" if non-U.S. address)	MD		
	Zip/Postal Code	21921		
	Country (if non-U.S. address)	United States		
_isting Type	Other Interest Holder	Other Interest Holder		
Positional Interests check all that apply)	Member of Governing Board ((or other governing entity)		
Principal Profession or Occupation	OFFICE MANAGER			
By Whom Appointed or Elected	Board of Directors	Board of Directors		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race nformation (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
nterest Percentages	Voting	16.6%		
enter percentage values rom 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a hat do not appear on this r	an attributable interest in one o	r more broadcast stations	No	

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)?

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.

No

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: Director Exact Legal Title or Name of Respondent: Maranatha Bible Institute, Inc. Name: Ray Linzy , Jr. Phone: 4103923225 10/12/2023