

(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 Snavely	Family Life Ministries, Inc.

			Zip		
Street Address	City (and Country if non U.S. address)	State	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				
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
Famil	ly 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	ership Information	
FRN	0004986592	

Entity Name	Family Life Ministries, Inc.		
ddress	РО Вох	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	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one or	or more broadcast stations	Yes

Ownership Information	rmation		
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 HF	Business Owner Appletree HR and Safety Consultants	
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt 0.0% Plus)		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

Yes

Ownership Information				
FRN	9990132088	9990132088		
Name	Mike Stuart	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)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Principal Profession or Occupation	Retired Business Owner Stua	rts Pools		
By Whom Appointed or Elected	Board of Directors			
Interest Percentages	Voting	9.0%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations  Yes that do not appear on this report?				

Ownership Information			
FRN	9990132101		
Name	John Farrell		
Address	РО Вох	PO Box	
	Street 1	101 Red Fox Run	
	Street 2	Street 2	
	City	City Vestal	
	State ("NA" if non-U.S. address)		
	Zip/Postal Code	13850	
	Country (if non-U.S. address)		
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	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt 0.0% Plus)		
Does interest holder have an attributable interest in one or more broadcast stations  Yes that do not appear on this report?			

Ownership Information				
FRN	9990132102			
Name	Clark Johnson			
Address	PO Box 373			
	Street 1			
	Street 2			
	City	Eldred		
	State ("NA" if non-U.S. address)			
	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	Voting	9.0%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this r	n attributable interest in one o	r more broadcast stations	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	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	Yes

Ownership Information				
FRN	9990132108			
Name	Tim Landers	Tim Landers		
Address	РО Вох			
	Street 1	9323 Transit Road		
	Street 2			
	City	Stafford		
	State ("NA" if non-U.S. NY address)			
	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	Retired Director of Bldgs and Grounds Genesee College		
By Whom Appointed or Elected	Board of Directors	Board of Directors		
Interest Percentages	Voting	9.0%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations 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. NY address)			
	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	Board of Directors		
Interest Percentages	Voting	9.0%		
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this i	an attributable interest in one oreport?	r more broadcast stations Yes		

Ownership Information			
FRN	9990136595		
Name	Drew Klotzbach		
Address	PO Box		
	Street 1	7420 Alleghany Road	
	Street 2		
	<b>City</b> Basom		
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	14013	
	Country (if non-U.S. United States address)		
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	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)  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 Snavely, Jr.		
Address	PO Box	ox	
	Street 1	7634 County Rd 14	
	Street 2		
	City	Bath	
	State ("NA" if non-U.S. NY address)  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 Ministr	ries, Inc.	
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	Yes

Ownership Information			
FRN	9990143539	9990143539	
Name	Diane Dersch	Diane Dersch	
Address	РО Вох	PO Box	
	Street 1	2813 State Route 96	
	Street 2		
	City	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	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired teacher		
By Whom Appointed or Elected	Board of Directors		
Interest Percentages	Voting	9.0%	
(enter percentage values from 0.0 to 100.0)	Total assets (Equity Debt Plus) 0.0%		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	Yes

Ownership Information				
FRN	9990143540			
Name	TJ Kiczenski			
Address	РО Вох	Вох		
	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  Yes that do not appear on this report?				

Ownership Information				
FRN	9990143541			
Name	John Unruh			
Address	PO Box	РО Вох		
	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 a that do not appear on this r	n attributable interest in one o	r more broadcast stations	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)?	No
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.	

Certification 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: <b>President</b> Exact Legal Title or Name of Respondent: <b>Family Life Ministries, Inc.</b> Name: <b>Richard Snavely , Jr</b> Phone: <b>6077764151</b>