

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0027243088** | File Number: **0000072711** | Submit Date: **05/14/2019** | Call Sign: **WYPO** | Facility ID: **29564** | City: **OCEAN CITY** | State: **MD**
 Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **05/14/2019** | Filing Status: **Active**

General Information

Section	Question	Response
Application Description	Description of the application (255 characters max.) is visible only to you and is not part of the submitted application. It will be displayed in your Applications workspace.	WYPR-WYPO-WYPF 2019 License Renewal EEO Report
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WYPR LICENSE HOLDING LLC	ATTN: ANTHONY BRANDON 2216 NORTH CHARLES STREET BALTIMORE, MD 21218 United States	+1 (410) 235-1660	tbrandon@wypr.org	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
John S Neely , Esq . MILLER AND NEELY, P.C.	Suite 203 3750 University Blvd., West Kensington, MD 20895 United States	+1 (301) 933-6304	JOHNSNEELY@YAHOO.COM	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
32360	WYPF	FREDERICK	MD	No
65753	WYPR	BALTIMORE	MD	No
29564	WYPO	OCEAN CITY	MD	No

Program Report Questions

Section	Question	Response
Discrimination Complaints	Have any pending or resolved complaints been filed during this license term before any body having competent jurisdiction under federal, state, territorial or local law, alleging unlawful discrimination in the employment practices of the station(s)?	No
Full-time Employees	Does your station employment unit employ fewer than five full-time employees? Consider as "full-time" employees all those permanently working 30 or more hours a week?	No

Additional
Program Report
Questions

Responsibility for Implementation

A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That official's name and title are:

Name	Title
Brian Crompwell	Business Manager

Certification

Question	Response
The undersigned certifies that he or she is (a) the party filing the report, or an officer, director, member, partner, trustee, authorized employee, or other individual or duly elected or appointed official who is authorized to sign on behalf of the party filing the report; or (b) an attorney qualified to practice before the Commission under 47 C.F. R. Section 1.23(a), who is authorized to represent the party filing the report, and who further certifies that he or she has read the document; that to the best of his or her knowledge, information,and belief there is good ground to support it; and that it is not interposed for delay	
Certified Date	05/14 /2019
Certified Title	LLC Manager
Authorized Party Name	Anthony Brandon

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>2018 EEO Public File Report.pdf.docx</u>	Applicant	EEO Public File Report	2018 EEO Public File Report	Done with Virus Scan and /or Conversion
<u>2019 EEO Public File Report.docx</u>	Applicant	EEO Public File Report	2019 EEO Public File Report	Done with Virus Scan and /or Conversion
<u>WYPR WYPO WYPF Renewal EEO narrative.docx.doc</u>	Applicant	Narrative Statement	EEO Narrative	Done with Virus Scan and /or Conversion