Broadcast Equal Employment Opportunity Program Report

 FRN:
 0014042816
 File Number:
 0000091817
 Submit Date:
 11/27/2019
 Call Sign:
 WYKZ
 Facility ID:
 67680
 City:

 BEAUFORT
 State:
 Scrvice:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 Date:
 11/27/2019
 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.	is 2019 - Savannah, GA. SEU EEO Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CAPSTAR TX, LLC	7136 S. YALE AVENUE SUITE 501 TULSA, OK 74136 United States	+1 (918) 664- 4581	FCCCONTACT@IHEARTMEDIA. COM	LLC

Contact Representatives	Contact Name	Address	F	Phone	Em	ail	Contact Type
	Elizabeth E. Goldin , Esq . Wiley Rein LLP	1776 K Street Washington, I United States	DC 20006	+1 (202) 719-31	199 ego	oldin@wileyrein.com	Legal Representative
Common	Facility Identifier	Call Sign	City		State	Time Brokerage Ag	greement
Stations	67680	WYKZ	BEAUFOR	RT	SC	No	
	50403	WAEV	SAVANNA	λH	GA	No	
	50406	WSOK	SAVANNA	λН	GA	No	
	31094	WLVH	HARDEEV	/ILLE	SC	No	
	8589	WTKS	SAVANNA	λН	GA	No	
	8594	WQBT	SAVANNA	١H	GA	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?					
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					
	Linda Byrd	Region President					
Certification	trustee, authorized employe behalf of the party filing the R. Section 1.23(a), who is a	hat he or she is (a) the party filing the report, or an officer, director, member, particle, or other individual or duly elected or appointed official who is authorized to sate report; or (b) an attorney qualified to practice before the Commission under 47 authorized to represent the party filing the report, and who further certifies that here, that to the best of his or her knowledge, information, and belief there is good g	ign on C.F. ne or				
	Certified Date						
	Certified Title		General Counsel				
	Authorized Party Name		Paul McNicol				

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2018 EEO Public File	Applicant	EEO Public File	2018 EEO Public File	Done with Virus Scan and/or
Report.pdf		Report	Report	Conversion
2019 EEO Public File	Applicant	EEO Public File	2019 EEO Public File	Done with Virus Scan and/or
Report.pdf		Report	Report	Conversion
Narrative Statement.pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion