

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0022473359** | File Number: **0000100540** | Submit Date: **01/27/2020** | Call Sign: **KFSW** | Facility ID: **87114** | City: **FT. SMITH** | State: **AR**
 Service: **Full Power AM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **01/27/2020** | 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.	2020 Renewal EEO Report for KFSW
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
G2 MEDIA GROUP LLC Doing Business As: G2 MEDIA GROUP LLC	P.O BOX 428 SALLISAW, OK 74955 United States	+1 (918) 775-1008	phhcare@yahoo.com	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
ALLAN G. Moskowitz , Esq. . Attorney Allan G. Moskowitz, Esq.	ALLAN G. G. Moskowitz PO Box 20878 NORTH POTOMAC, MD 20878 United States	+1 (301) 908-4165	AMOSKOWITZ@AMOSKOWITZLAW.COM	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
87114	KFSW	FT. SMITH	AR	No
189538	KXXM	MULDROW	OK	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

Responsibility for Implementation

Program Report Questions

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
Darren Girdner	Member

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	01/27 /2020
Certified Title	Member
Authorized Party Name	Darren Girdner

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
KFSW 2018-2019 EEO Outreach.pdf	Applicant	Narrative Statement	KFSW 2018-2019 EEO Outreach	Done with Virus Scan and/or Conversion
KFSW 2018-2019 EEO Report.pdf	Applicant	EEO Public File Report	2018-2019 EEO Report	Done with Virus Scan and/or Conversion
KFSW 2019-20 EEO Outreach.pdf	Applicant	Narrative Statement	KFSW 2019-2020 EEO Outreach	Done with Virus Scan and/or Conversion
KFSW 2019-20 EEO Report.pdf	Applicant	EEO Public File Report	KFSW 2019-2020 EEO Report	Done with Virus Scan and/or Conversion