

Broadcast Equal Employment Opportunity Program Report

 FRN:
 0003788924
 File Number:
 0000108181
 Submit Date:
 03/17/2020
 Call Sign:
 WIVY
 Facility ID:
 23344
 City:

 MOREHEAD
 State:
 KY

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 03/17/2020
 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.	Gateway 2020 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
GATEWAY RADIO WORKS, INC.	22 WEST MAIN	+1 (859) 498-	hays@gatewayradio.	COR
Doing Business As: GATEWAY RADIO	STREET	1077	net	
WORKS, INC.	MT STERLING, KY			
	40353			
	United States			

Contact Name Address Phone Email **Contact Type** Contact Representatives Technical CHARLES M **1519 EUCLID AVENUE** +1 (270) CMANDERSON43@YAHOO. ANDERSON BOWLING GREEN, KY 782-0246 COM Representative BROADCAST 42103 CONSULTANT **United States** CHARLES M. ANDERSON JOSEPH C. CHAUTIN, III 1080 WEST CAUSEWAY +1 (985) JCHAUTIN@HARDYCAREY. Legal COM Hardy, Carey, Chautin & APPROACH 629-0777 Representative Balkin, LLP MANDEVILLE, LA 70471 **United States Facility Identifier** Call Sign City **Time Brokerage Agreement** State Common **Stations** 24221 WWKY WINCHESTER KΥ No 56222 WKCA SALT LICK KΥ No WIVY KΥ 23344 MOREHEAD No WMST 46745 MT. STERLING KΥ No KΥ 23345 WKYN MOUNT STERLING No

Section

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?	Yes

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	03/17 /2020
Certified Title	President
Authorized Party Name	Thomas H McMakin

Attachments

No Attachments.