

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0003768835
 File Number:
 0000114361
 Submit Date:
 05/26/2020
 Call Sign:
 DWWGK
 Facility ID:
 70659
 City:

 CLEVELAND
 State:
 OH

 Service:
 Full Power AM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 Date:
 05/26/2020
 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.	WWGK and WKNR EEO Program Report	
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes	

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
GOOD KARMA BROADCASTING, LLC Doing Business As: GOOD KARMA BROADCASTING, LLC	720 E. Capitol Drive Milwaukee, WI 53212 United States	+1 (414) 209-3100	CKARMAZIN@GOODKARMABRANDS. COM	LLC

Contact Representatives	Contact Name	Address	Phone	Email	Contact Type
	Nancy A. Ory Attorney Lerman Senter PLLC	2001 L Street, NW, Suite 400 Washington, DC 20036 United States	+1 (202) 416- 6791	nory@lermansenter. com	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	28509	WKNR	CLEVELAND	ОН	No
	70659	WWGK	CLEVELAND	ОН	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

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						
	Sam Pines	Vice President and Market 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							
	Certified Title						President	
	Authorized Party Name							
Attachments	Uploaded By	Attachment Type	Description	Upload Statu	IS			
	EEO Narrative Statement.pdf		Applicant	Narrative Statement	EEO Narrative Statement	Done with Vi and/or Conve		
	Good Karma Cleveland EEO Public FileApplicantEEO Public2018-2019 EEODone with VReport 2018-2019.pdfFile ReportFile ReportPublic File Reportand/or Conv							

Applicant

EEO Public

File Report

2019-2020 EEO

Public File Report

Done with Virus Scan

and/or Conversion

Good Karma Cleveland EEO Public File

Report 2019-2020.pdf.pdf