

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0019223239** | File Number: **0000142826** | Submit Date: **04/01/2021** | Call Sign: **KWOW** | Facility ID: **6449** | City: **CLIFTON** | State: **TX**
 Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **04/01/2021** | 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.	Waco 2021 Form 396
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
WACO ENTERTAINMENT GROUP, LLC	6401 COBBS DRIVE WACO, TX 76710 United States	+1 (310) 927-6280	WWMCCUTCHEN@gmail.com	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Brad Deutsch Foster GARVEY	1000 Potomac Street NW Suite 200 Washington, DC 20007 United States	+1 (202) 298-1793	brad.deutsch@foster.com	Legal Representative
FRANK White TECHNICAL CONSULTANT Frank White Technology	541 Old Gaston Road Gaston, NC 27832 United States	+1 (252) 678-5121	pacowhite@hotmail.com	Technical Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
170995	KIXT	HEWITT	TX	No
6449	KWOW	CLIFTON	TX	No
198733	KLTO	MOODY	TX	No
57377	KWPW	ROBINSON	TX	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
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**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
Cynthia Lopez	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	04/01/2021
Certified Title	Managing Member
Authorized Party Name	William Walter MCCUTCHEN

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>EEO PUBLIC FILE REPORT 2020-2021 wm (1).doc</u>	Applicant	EEO Public File Report	EEO Report for 2020-2021	Done with Virus Scan and /or Conversion
<u>EEO REPORT 2019-2020 PROPHECY MEDIA GROUP (1).pdf</u>	Applicant	EEO Public File Report	EEO Public File Report 2019-2020	Done with Virus Scan and /or Conversion
<u>Exhibit 3 NARRATIVE for EEO V3.docx</u>	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and /or Conversion