

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0010694776** File Number: **0000102029** Submit Date: **01/30/2020** Call Sign: **WUSM-FM** Facility ID: **69214** 

City: **HATTIESBURG** State: **MS** 

Service: Full Power FM Purpose: EEO Report Status: Received Status Date: 01/30/2020 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 EEO Program 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
UNIVERSITY OF SOUTHERN MISSISSIPPI Doing Business As: UNIVERSITY OF SOUTHERN MISSISSIPPI	Wilbur Martin 118 COLLEGE DR. #5121 HATTIESBURG, MS 39406 United States	+1 (601) 266- 5696	wilbur. martin@usm.edu	GOE

### **Contact Representatives**

Contact Name	Address	Phone	Email	Contact Type
Sean McGuinness lawyer Butler Snow LLC	1801 California Street, , , CO 80202 Suite 5100 Denver, CO 80202 United States	+1 (770) 330-2389	Sean. McGuinness@butlersnow. com	Legal Representative
RYAN WILHOUR CONSULTING ENGINEER KESSLER AND GEHMAN ASSOCIATES, INC.	507 NW 60TH STREET SUITE C GAINESVILLE, FL 32607 United States	+1 (352) 332-3157	RWILHOUR@BELLSOUTH. NET	Technical Representative

### **Common Stations**

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
69214	WUSM-FM	HATTIESBURG	MS	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	Yes
	those permanently working 30 or more hours a week?	

#### 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	01/30 /2020
Certified Title	General Manager
Authorized Party Name	Wilbur Martin

#### **Attachments**

No Attachments.