

# Broadcast Equal Employment Opportunity **Program Report**

FRN: 0028330793	File Number: 0000113660	Submit Date: 05/13/2	2020 Call Sign: WYSO	Facility ID: 2374 City:
YELLOW SPRINGS	State: OH			
Service: Full Power FM	Purpose: EEO Report	Status: Received	Status Date: 05/13/2020	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 Broadcast EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

# Licensee

## Information

Applicant	Address	Phone	Email	Applicant Type
MIAMI VALLEY PUBLIC MEDIA	150 EAST SOUTH COLLEGE STREET YELLOW SPRINGS, OH 45387 United States	+1 (937) 769- 1391	LDennis@wyso. org	NFP

#### **Contact Name** Phone **Contact Type** Address Email Contact Representatives JOHN WELLS KING 4051 Shoal Creek +1 (904) 647-JOHN@JWKINGLAW. Legal LAW OFFICE OF JOHN WELLS COM Lane East 9610 Representative KING, PLLC Jacksonville, FL 32225 United States **Facility Identifier** Call Sign City State **Time Brokerage Agreement** Common **Stations** WYSO YELLOW SPRINGS OH 2374 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 **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:

	Nama	<b>T</b> :4-	
	Name	Title	
	Luke Dennis	General 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		05/13 /2020
	Certified Title		General Manager
	Authorized Party Name		Luke Dennis

#### Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
EEO Narrative Statement.pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion
<u>wyso_eeo_fy19-20190603-</u> 165615384-pdf (1).pdf	Applicant	EEO Public File Report	2019 Annual EEO Report (Antioch College)	Done with Virus Scan and/or Conversion
<u>wyso_eeo_fy20-20200512-</u> 205028970-pdf (1).pdf	Applicant	EEO Public File Report	2020 Annual EEO Report (Miami Valley Public Media)	Done with Virus Scan and/or Conversion