



(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0007171432** | File Number: **0000115008** | Submit Date: **05/29/2020** | Call Sign: **WYTZ** | Facility ID: **17734** | City: **BRIDGMAN** | State: **MI**

Service: **Full Power FM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **05/29/2020** | 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.	WSJM EEO for License Renewal
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
WSJM INC Doing Business As: WSJM INC	P O BOX 107 ST. JOSEPH, MI 49085 United States	+1 (269) 925-1111	GOlson@midwestfamilyswmi.com	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
David D Oxenford WILKINSON BARKER KNAUER, LLP	1800 M Street, NW Suite 800N Washington , DC 20036 United States	+1 (202) 783-4141	DOXENFORD@WBKLAW.COM	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
14012	WCXT	HARTFORD	MI	No
57954	WCSY-FM	SOUTH HAVEN	MI	No
72175	WQLQ	BENTON HARBOR	MI	No
74005	WIRX	ST. JOSEPH	MI	No
74004	WSJM	ST. JOSEPH	MI	No
74006	WSJM-FM	BENTON HARBOR	MI	No
17734	WYTZ	BRIDGMAN	MI	No

Program Report Questions

Section	Question	Response
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<b>Discrimination Complaints</b>	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
<b>Full-time Employees</b>	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:

Name	Title
Judy Groenke	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	05/29 /2020
Certified Title	Chairman /Director
Authorized Party Name	Gayle Olson

**Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
<a href="#">WSJM 2019-eeo-report-20190531-122542225-pdf.pdf</a>	Applicant	EEO Public File Report	2019 EEO Report	Done with Virus Scan and/or Conversion
<a href="#">WSJM 2020-eeo-report.pdf</a>	Applicant	EEO Public File Report	2020 EEO Report	Done with Virus Scan and/or Conversion
<a href="#">WSJM EEO Narrative Statement for Renewals.docx</a>	Applicant	Narrative Statement	WSJM Narrative Statement	Done with Virus Scan and/or Conversion