

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0020030730** | File Number: **0000123756** | Submit Date: **10/01/2020** | Call Sign: **KWKY** | Facility ID: **49099** | City: **DES MOINES** | State: **IA**
 Service: **Full Power AM** | Purpose: **EEO Report** | Status: **Received** | Status Date: **10/01/2020** | 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.	KWKY(AM)/KIHS(FM) 2020 Renewal EEO Report
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
Putbrese Communications, Ltd. Doing Business As: Iowa Catholic Radio	Brian J. Sweeney 2900 Westown Parkway, Suite 220 West Des Moines, IA 50266-1300 United States	+1 (515) 223-1150	contact@IowaCatholicRadio.com	Company

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Dennis J. Kelly Attorney Law Office of Dennis J. Kelly	Post Office Box 41177 Washington, DC 20018-0577 United States	+1 (202) 293-2300	dkellyfcclaw1@comcast.net	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
92489	KIHS	ADEL	IA	No
49099	KWKY	DES MOINES	IA	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?	Yes

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	10/01 /2020
Certified Title	President
Authorized Party Name	Joseph E. Teeling

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>KWKY--2020 EEO Narrative Statement .pdf</u>	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and /or Conversion
<u>KWKY KIHS 2018-2019 EEO Report. pdf</u>	Applicant	EEO Public File Report	2018-2019 EEO Public File Report	Done with Virus Scan and /or Conversion
<u>KWKY & KIHS -- EEO 2019 TO 2020 REPORT.pdf</u>	Applicant	EEO Public File Report	2019-2020 EEO Public File Report	Done with Virus Scan and /or Conversion
<u>KWKY KIHS--Explanation to 2020 EEO Report 090520.pdf</u>	Applicant	All Purpose	Explanation of Report	Done with Virus Scan and /or Conversion