

## Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

FRN: 0032827651 F	ile Number: 0000123147	Submit Date: 09/30/2	2020 Call Sign: KHST	Facility ID: 34541 City:
LAMAR State: MO				
Service: Full Power FM	Purpose: EEO Report	Status: Received	Status Date: 09/30/2020	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.	KHST(FM) and KWXD(FM) EEO Report for Renewal October 2020
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

## Licensee Information

Applicant	Address	Phone	Email	Applicant Type
MY TOWN MEDIA INC Doing Business As: MY TOWN MEDIA INC	William B. Wachter 250 N. WATER SUITE 300 WICHITA, KS 67202 United States	+1 (316) 267- 3241	bill@mytown-media. com	COR

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Christina Burrow Cooley LLP	Christina Burrow 1299 Pennsylvania Avenue, NW Suite 700 Washington, DC 20004 United States	+1 (202) 776-2687	cburrow@cooley.com	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	28689	KWXD	ASBURY	MO	No
	190419	KSHQ	DEERFIELD	МО	Yes
	34541	KHST	LAMAR	МО	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?					
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					
	Brian Cunningham	Director of Operations					
Certification	trustee, authorized employe behalf of the party filing the R. Section 1.23(a), who is a she has read the document	hat he or she is (a) the party filing the report, or an officer, director, member, partne ee, or other individual or duly elected or appointed official who is authorized to sigr report; or (b) an attorney qualified to practice before the Commission under 47 C. nuthorized to represent the party filing the report, and who further certifies that he o ; that to the best of his or her knowledge, information, and belief there is good grou	n on F. pr				
	to support it; and that it is not certified Date	ot interposed for delay	09/30				
			/2020				
	Certified Title		President				
	Authorized Party Name		William B Wachter				

## Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
2019 EEO Report.pdf	Applicant	EEO Public File Report	2019 EEO Report	Done with Virus Scan and/or Conversion
2020 EEO Report.pdf	Applicant	EEO Public File Report	2020 EEO Report	Done with Virus Scan and/or Conversion
2020 FCC Renewal Narrative.pdf	Applicant	Narrative Statement	EEO Narrative Statement	Done with Virus Scan and/or Conversion