

Broadcast Equal Employment Opportunity Program Report

 FRN:
 0014042816
 File Number:
 0000122876
 Submit Date:
 09/29/2020
 Call Sign:
 WMT
 Facility ID:
 73593
 City:

 CEDAR RAPIDS
 State:
 IA

 Service:
 Full Power AM
 Purpose:
 EEO Report
 Status:
 Received
 Status:
 Date:
 09/29/2020
 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.	Oct. 2020 - Cedar Rapids, IA. SEU
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CITICASTERS LICENSES, INC.	7136 S. YALE AVENUE SUITE 501 TULSA, OK 74136 United States	+1 (918) 664- 4581	FCCCONTACT@IHEARTMEDIA. COM	COR

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Elizabeth E. Goldin , Esq . Wiley Rein LLP	1776 K Street, N.W. Washington, DC 20006 United States	+1 (202) 719-3199	egoldin@wiley.law	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
73593	WMT	CEDAR RAPIDS	IA	No
54164	КМЈМ	CEDAR RAPIDS	IA	No
29075	KXIC	IOWA CITY	IA	No
73594	KKSY-FM	CEDAR RAPIDS	IA	No
29076	KKRQ	IOWA CITY	IA	No
162475	KOSY-FM	ANAMOSA	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?					
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					
	Joel McCrea	Market President					
Certification	trustee, authorized employ behalf of the party filing the R. Section 1.23(a), who is	hat he or she is (a) the party filing the report, or an officer, director, member, p ee, or other individual or duly elected or appointed official who is authorized to e report; or (b) an attorney qualified to practice before the Commission under 4 authorized to represent the party filing the report, and who further certifies tha t; that to the best of his or her knowledge, information, and belief there is good not interposed for delay	o sign on 17 C.F. t he or				
	Certified Date		09/29 /2020				
	Certified Title		General Counsel				
	Authorized Party Name		Paul McNicol				

Attachments

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