

Broadcast Equal Employment Opportunity Program Report

Licensee Name, Type and Contact Information

 FRN:
 0024229064
 File Number:
 0000140171
 Submit Date:
 03/18/2021
 Call Sign:
 KCTI-FM
 Facility ID:
 91220
 City:

 GONZALES
 State:
 TX

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 03/18/2021
 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.	2021 EEO Report for KTSN & KCTI	
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No	

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
SUN RADIO FOUNDATION Doing Business As: SUN RADIO FOUNDATION	501 W. Main Street Fredricksburg, TX 78624 United States	+1 (830) 992- 2086	info@sunradio. com	NFP

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	John C. Trent , Esq . Counsel Putbrese Hunsaker & Trent, PC	John C. Trent, Esq. 200 South Church Street Woodstock, VA 22664 United States	+1 (540) 459- 7646	fccman3@shentel. net	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	91220	KCTI-FM	GONZALES	ТХ	No
	174329	KTSN-FM	BLOWOUT	ТХ	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

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	03/18 /2021
Certified Title	President
Authorized Party Name	Kyle Hill

Attachments

No Attachments.