

Broadcast Equal Employment Opportunity **Program Report**

Licensee Name, Type and Contact Information

FRN: 0001774611 File Number: 0000108272 Submit Date: 03/18/2020 Call Sign: WGRV Facility ID: 54602 City: GREENEVILLE State: TN Service: Full Power AM Purpose: EEO Report Status: Received Status Date: 03/18/2020 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.	WGRV WSMG and WIKQ 2020 EEO Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Program Report

Questions

Applicant	Address	Phone	Email	Applicant Type
RADIO GREENEVILLE, INC. Doing Business As: RADIO GREENEVILLE, INC.	P.O. BOX 278 GREENEVILLE, TN 37744 United States	+1 (423) 638- 4147	wgrv@greeneville. com	COR

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	JOSEPH C. CHAUTIN, III Hardy, Carey, Chautin & Balkin, LLP	1080 WEST CAUSEWAY APPROACH MANDEVILLE, LA 70471 United States	+1 (985) 629-0777	JCHAUTIN@HARDYCAREY. COM	Legal Representative

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	54602	WGRV	GREENEVILLE	TN	No
	7834	WSMG	GREENEVILLE	TN	Νο
	15518	WIKQ	TUSCULUM	TN	No

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?	No

Additional Program Report Questions	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	Name Title			
	Ron P. Metcalfe	EEO Program Administrator			
	Question		Response		
Certification	trustee, authorized employee, or behalf of the party filing the repo R. Section 1.23(a), who is autho	e or she is (a) the party filing the report, or an officer, director, member, partner, r other individual or duly elected or appointed official who is authorized to sign on ort; or (b) an attorney qualified to practice before the Commission under 47 C.F. prized to represent the party filing the report, and who further certifies that he or t to the best of his or her knowledge, information, and belief there is good ground terposed for delay			
	Certified Date		03/18 /2020		
	Certified Title				
	Authorized Party Name		Ron P. Metcalfe		
			1		
Attachments		Uploaded Attachment			

File Name	Uploaded By	Attachment Type	Description	Upload Status
2018-2019 EEO PUBLIC FILE REPORT.	Applicant	EEO Public	2018-19 EEO Public	Done with Virus Scan and
pdf		File Report	File Report	/or Conversion
2019-2020 EEO PUBLIC FILE REPORT.	Applicant	EEO Public	2019-20 EEO Public	Done with Virus Scan and
pdf		File Report	File Report	/or Conversion
WGRV-WIKQ-WSMG EEO Report (narrative statement).pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and /or Conversion