

## Broadcast Equal Employment Opportunity Program Report

FRN: 0014042816	File Number: 0000133794	Submit Date: 01/29/20	Call Sign: KTBT	Facility ID: 33727 City:		
<b>BROKEN ARROW</b>	State: OK					
Service: Full Power F	M Purpose: EEO Report	Status: Received	Status Date: 01/29/2021	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.	Feb. 2021 - Tulsa, OK. SEU EEO Report	
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes	

Licensee
Informatio

Licensee Name, Type and Contact Information

Information

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

Contact Representatives	Contact Name	Address	Phone	Email	Contact Type
	Meredith G. Singer , Esq . Wiley Rein LLP	1776 K Street, N.W. Washington, DC 20006 United States	+1 (202) 719-7507	msinger@wiley.law	Legal Representative

Common
Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
7669	KIZS	COLLINSVILLE	OK	No
33727	КТВТ	BROKEN ARROW	ОК	No
11939	KAKC	TULSA	ОК	No
11957	KMOD-FM	TULSA	ОК	No
68293	KTBZ	TULSA	ОК	No
68294	KTGX	OWASSO	OK	No

Program Report	Section	Question	Response
Questions	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	full-time e	ur station employment employees? Consider rmanently working 30	as "full-time" employe	es all	
Additional Program Report Questions	<b>Responsibility for Implementation</b> A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the s official's name and title are:					
	Name		Title			
	Jon Phillips		Market Pr	resident		
Certification	Question					Response
	The undersigned certifies th partner, trustee, authorized to sign on behalf of the party under 47 C.F.R. Section 1.2 certifies that he or she has r there is good ground to sup	employee, or y filing the rep 23(a), who is a read the docu	other individual or dul port; or (b) an attorney authorized to represent ment; that to the best o	y elected or appointed qualified to practice be t the party filing the rep of his or her knowledg	l official who is authorized efore the Commission port, and who further	
	Certified Date					01/29/2021
	Certified Title					Executive Vice President, General Counsel and Secretary
	Authorized Party Name					Jordan Fasbender
Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status	

2020 EEO Public File

2021 EEO Public File

Narrative Statement.pdf

Report.pdf

Report.pdf

Applicant

Applicant

Applicant

EEO Public File

EEO Public File

Report

Report

Narrative

Statement

2020 EEO Public File

2021 EEO Public File

Narrative Statement

Report

Report

Done with Virus Scan and/or

Done with Virus Scan and/or

Done with Virus Scan and/or

Conversion

Conversion

Conversion