

Broadcast Equal Employment Opportunity Program Report

 FRN:
 0014042816
 File Number:
 0000149000
 Submit Date:
 06/01/2021
 Call Sign:
 KBQI
 Facility ID:
 4706
 City:

 ALBUQUERQUE
 State:
 NM

 Service:
 Full Power FM
 Purpose:
 EEO Report
 Status:
 Received
 Status Date:
 06/01/2021
 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.	June 2021 - Albuquerque, New Mexico SEU
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee

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	Contact Name	Address	Phone	Email	Contact Type
Representatives	Meredith 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
53652	KTEG	SANTA FE	NM	No
65394	KABQ	ALBUQUERQUE	NM	No
68609	KZRR	ALBUQUERQUE	NM	No
39265	KOLZ	CORRALES	NM	No
4704	KPEK	ALBUQUERQUE	NM	No
4706	KBQI	ALBUQUERQUE	NM	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

Additional Program Report Questions		full-time employees? Consider as "full-time" employees all those permanently working 30 or more hours a week? Responsibility for Implementation A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the statement of the sta					
	Name		Title				
	Hope Romero		Mar	ket President			
Certification	Question					Response	
	The undersigned certifies the partner, trustee, authorized to sign on behalf of the part under 47 C.F.R. Section 1.2 certifies that he or she has there is good ground to sup	l employee, or ty 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 knowledge	official who is authorized efore the Commission port, and who further		
	Certified Date					06/01/2021	
	Certified Title					Executive Vice President, General Counsel and Secretary	
	Authorized Party Name					Jordan Fasbender	
Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status		

File Name	Uploaded By	Attachment Type	Description	Upload Status
2020 EEO Public File Report.pdf	Applicant	EEO Public File Report	2020 EEO Public File Report	Done with Virus Scan and/or Conversion
2021 EEO Public File Report.pdf	Applicant	EEO Public File Report	2021 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