

Broadcast Equal Employment Opportunity Program Report

FRN: 0014042816File Number: 0000115448Submit Date: 06/01/2020Call Sign: WSRW-FMFacility ID: 73605City: GRAND RAPIDSState: MIService: Full Power FMPurpose: EEO ReportStatus: ReceivedStatus Date: 06/01/2020Filing 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 2020 - Grand Rapids- Muskegon, MI. SEU
	Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Licensee	Name.	Type an	d Contact	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	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
73604	WOOD	GRAND RAPIDS	MI	No
24640	WMRR	MUSKEGON HEIGHTS	MI	No
25086	WOOD-FM	MUSKEGON	MI	No
25087	WKBZ	MUSKEGON	MI	No
51727	WBFX	GRAND RAPIDS	MI	No
70635	WMUS	MUSKEGON	MI	No
73605	WSRW-FM	GRAND RAPIDS	MI	No
24644	WSNX-FM	MUSKEGON	MI	No
51729	WTKG	GRAND RAPIDS	MI	No
27471	WMAX-FM	HOLLAND	MI	No
73606	WBCT	GRAND RAPIDS	MI	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)?			
	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	Responsibility for Implem A broadcast station must assign official's name and title are:	nentation	opportunity at the station. That		
	Name Title				
	Tim Feagan	Market President			
Certification	Question		Response		
	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				
	Certified Title				
	Authorized Party Name				

Attachments

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