

Broadcast Equal Employment Opportunity Program Report

FRN: 0003754983 Fi	ile Number: 0000143963	Submit Date: 04/23/	2021 Call Sign: KEOJ	Facility ID: 35975 City:
CANEY State: KS				
Service: Full Power FM	Purpose: EEO Report	Status: Received	Status Date: 04/23/2021	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.	New KEOJ KTSO KYAL KITO-FM KGND EEO Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
KXOJ, INC. Doing Business As: KXOJ, INC.	2448 E. 81ST STREET SUITE 5500 TULSA, OK 74137 United States	+1 (918) 492- 2660	david.stephens@smgnational. com	COR

Contact Representatives	Contact Name	Address	Phone	Email	Contact Type
	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
17035	KGND	VINITA	OK	No
17034	KITO-FM	VINITA	OK	No
35975	KEOJ	CANEY	KS	No
35976	KTSO	SAPULPA	OK	No
35974	KYAL	SAPULPA	OK	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	full-time employee	employment unit em es? Consider as "full- / working 30 or more	time" employees all	No		
Additional Program Report Questions	Responsibility for Implementation 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 Title						
	Gena Mitchell , MBA . Executive Assistant						
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						
						04/23 /2021	
	Certified Title					President	
	Authorized Party Name					David P Stephens	
Attachments		Uploaded					
Attachiments	File Name	Ву	Attachment Type	Description	Upload Status		
	2019-20 EEO PF Report.pdf	Applicant	EEO Public File Report	2019-20 EEO PF Report	Done with Virus Scan and/or Conversion		
	2020-21 EEO PF Report.pdf	Applicant	EEO Public File Report	2020-21 EEO PF Report	Done with Virus Scan and/or Conversion		
	EEO Program Report (narrativ statement).pdf	e Applicant	Narrative Statement	Narrative Statement	Done with Virus Sca Conversion	an and/or	