(REFERENCE COPY - Not for submission)

Licensee Name, Type and Contact Information

Broadcast Equal Employment Opportunity **Program Report**

FRN: 0021331913 File Number: 0000159930 Submit Date: 09/21/2021 Call Sign: KMBQ-FM Facility ID: 35118 City: WASILLA State: AK Status: Received Service: Full Power FM Purpose: EEO Report Status Date: 09/21/2021 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.	Wasilla Employment Unit EEO Program Report
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
OMG FCC LICENSES LLC Doing Business As: Ohana Media Group, LLC	Trila Bumstead PO Box 99827 SEATTLE, WA 98139 United States	+1 (425) 891- 1200	TRILA. BUMSTEAD@OHANAMEDIAGROUP. COM	LLC

Contact Representatives	Contact Name	Address	Phone	Email	Contact Type
	GARRISON CAVELL Contract Engr CAVELL, MERTZ & ASSOCIATES INC.	Gary Cavell 7732 Donegan Drive Manassas, VA 20109 United States	+1 (703) 392- 9090	GCAVELL@CAVELLMERTZ. COM	Technical Representative
	Sara Hinkle Esquire FLETCHER, HEALD & HILDRETH P.L.C	Sara Hinkle 1300 North 17th Street Suite 1100 Arlington, VA 22209 United States	+1 (702) 812- 0415	HINKLE@FHHLAW.COM	Legal Representative

Common	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
Stations	35118	KMBQ-FM	WASILLA	AK	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	Does your station employment unit employ fewer than five	Yes
	full-time employees? Consider as "full-time" employees all	
	those permanently working 30 or more hours a week?	

Certification

Question

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

Response

Certified Date	09/21 /2021
Certified Title	Owner
Authorized Party Name	Trila Bumstead

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
OMG - Palmer - EEO Statement.PDF	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion
Palmer OMG EEO Annual Public File Report - Oct 19-Sept 20.pdf	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
PALMER OMG EEO Oct 20-Sept 21. DOCX	Applicant	EEO Public File Report	Palmer OMG EEO Annual Oct 20-Sept 21	Done with Virus Scan and/or Conversion