

Broadcast Equal Employment Opportunity **Program Report**

Licensee Name, Type and Contact Information

FRN: **0030636393** File Number: **0000188755** Submit Date: 04/01/2022 Call Sign: KACT-FM Facility ID: 74560 City: ANDREWS State: TX Status Date: 04/01/2022 Service: Full Power FM Purpose: EEO Report Status: Received 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.	EEO Filing for 2022
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
Andrews Broadcasting Company Incorporated Doing Business As: KACT	Jessica M Reid 505 NW 10th St. Andrews, TX 79714 United States	+1 (432) 638- 1180	jessica27@suddenlinkmail. com	COR

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives	Gerald K Reid Station Manager Andrews Broadcasting Company Incorporated	Gerald Reid 505 NW 10th St. Andrews, TX 79714 United States	+1 (432) 559- 1738	geraldk. reid@suddenlinkmail.com	Station Manager

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	74560	KACT-FM	ANDREWS	ТХ	No
	74562	KACT	ANDREWS	тх	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	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?	Yes

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 delay04/01
/2022

 Certified Title
 President

 Authorized Party Name
 Jessica

 Reid
 Reid

Attachments

No Attachments.