Approved by OMB (Office of Management and Budget) | OMB Control Number 3060-0113

Federal Communications Commission

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Mid-Term Report

FRN: **0018223693** | File Number: **0000022438** | Submit Date: **03/30/2017** | Call Sign: **WKYT-TV** | Facility ID: **24914** | City: **LEXINGTON** | State: **KY**

Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **03/30/2017** | Filing Status: **Active**

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
GRAY TELEVISION LICENSEE, LLC	General Manager 2851 WINCHESTER ROAD LEXINGTON, KY 40509 United States	+1 (859) 299-0411	chris.mossman@wkyt.com	LLC

Contact Representatives

Information not provided.

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
24914	WKYT-TV	LEXINGTON	KY	No

Mid-Term Report Questions

Section	Question	Response
Mid-Term Report	Does your station employment unit employ fewer than five full-time employees?	No

Additional Mid-Term 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
Chris Mossman	Vice President/General Manager

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	03/30/2017
Certified Title	Assistant Secretary
Authorized Party Name	Robert J. Folliard , III .

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
WKYT 2016 Public File Report.pdf	Applicant	All Purpose	2016 Public File Report	Done with Virus Scan and/or Conversion
WKYT 2017 Public File Report.pdf	Applicant	All Purpose	2017 Public File Report	Done with Virus Scan and/or Conversion