

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0023930803** File Number: **0000118450** Submit Date: **07/24/2020** Call Sign: **WGWG** Facility ID: **21536** City:

CHARLESTON State: SC

Service: Full Service Television Purpose: EEO Report Status: Received Status Date: 07/24/2020 Filing Status:

**Active** 

## General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

#### Licensee Information

#### **Licensee Name, Type and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
HSH CHARLESTON (WCIV) LICENSEE, LLC	ARMSTRONG WILLIAMS 201 MASSACHUSETTS AVENUE NE SUITE C-1 WASHINGTON, DC 20002 United States	+1 (202) 546- 5400	arightside@aol. com	LLC

## **Contact Representatives**

Contact Name	Address	Phone	Email	Contact Type
Colby M May , Esq FCC Counsel COLBY M. MAY, ESQ., P. C.	7010 Little River Turnpike Suite 440 Annandale, VA 22003 United States	+1 (202) 544- 5171	cmmay@maylawoffices. com	Legal Representative

### **Common Stations**

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
21536	WGWG	CHARLESTON	SC	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)?	Yes
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

#### 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	07/24/2020
Certified Title	Managing Member
Authorized Party Name	ARMSTRONG WILLIAMS

#### **Attachments**

File Name	Uploaded By	Attachment Type	Description Upload Status
FCC FORM 396 - Exhibit WGWG, Charleston, SC HSH (07-24-2020).docx	Applicant	Discrimination Complaints	Done with Virus Scan and/or Conversion