

Broadcast Equal Employment Opportunity **Program Report**

 FRN: 0018223693
 File Number: 0000119351
 Submit Date: 07/30/2020
 Call Sign: WITN-TV
 Facility ID: 594
City: WASHINGTON State: NC Service: Full Service Television Purpose: EEO Report Status: Received Status Date: 07/30/2020 Filing Status: Active

General	Section	Question	Response
Information	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
GRAY TELEVISION LICENSEE, LLC Doing Business As: WITN	4370 Peachtree Road NE Atlanta, GA 30319 United States	+1 (404) 504- 9828	allfcclms@gray. tv	LLC

Contact Representa

Contact Representatives	Contact Name	Address		Phone	Email		Contact Type
	David Burke Senior ice President & CTC Gray Television Licensee, LLC	201 Monro D Montgome 36104 United Sta	ery, AL	+1 (334) 206-1475	david.burke@gray.tv		Technical Representative
	Joseph M. Davis , P.E Consulting Engineer CHESAPEAKE RF CONSULTANTS, LLC	207 Old Dominion +1 (703) Joseph.Davis Road 650-9600 consultants.cd Yorktown, VA 23692 United States			Technical Representative		
	Sam Hariton Widelity, Inc.	4031 Univ Drive Fairfax, V/ United Sta	A 22030	+1 (339) 222-8107	sam.harit com	on@widelity.	Compliance & Project Management
	JOAN STEWART WILEY REIN LLP	1776 K ST NW WASHING DC 20006 United Sta	STON,	+1 (202) 719-7438	JSTEWA LAW	RT@WILEY.	Legal Representative
Common	Facility Identifier	Call Sign	City		State	Time Brokera	ge Agreement
Stations	594	WITN-TV	WASH	INGTON	NC	No	
Program Report Questions	Section	Question				R	esponse

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?		

Responsibility for Implementation Additional **Program Report** A broadcast station must assign a particular official overall responsibility for equal employment opportunity at the station. That Questions official's name and title are: Title Name Ron Henslee General Manager Question Response Certification 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 07/30 /2020 **Certified Title** Assistant Secretary Authorized Party Name Robert Folliard, III .

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
WITN 2019 EEO Public File	Applicant	EEO Public File	2019 EEO Public File	Done with Virus Scan and/or
Report.pdf		Report	Report	Conversion
WITN 2020 EEO Public File	Applicant	EEO Public File	2020 EEO Public File	Done with Virus Scan and/or
Report.pdf		Report	Report	Conversion
WITN-TV Narrative.pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion