

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0028358455** | File Number: **0000153745** | Submit Date: **07/23/2021** | Call Sign: **WQAD-TV** | Facility ID: **73319** |
 City: **MOLINE** | State: **IL**
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **07/23/2021** | 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
TEGNA BROADCAST HOLDINGS, LLC	Denise A. Branson, Sr. Paralegal 8350 BROAD STREET SUITE 2000 TYSONS, VA 22102 United States	+1 (703) 873-6606	DBRANSON@TEGNA.COM	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Michael Beder , Esq . Associate General Counsel TEGNA Inc.	8350 Broad Street, Suite 2000 Tysons, VA 22102 United States	+1 (703) 873-6902	mbeder@TEGNA.com	Legal Representative
William T. Godfrey , Jr . Consulting Engineers Kessler and Gehman Associates, Inc.	William T. Godfrey, Jr. Kessler and Gehman Associates, Inc. 507-D NW 60th Street Gainesville, FL 32607 United States	+1 (352) 332-3157	bill@kesslerandgehman.com	Technical Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
73319	WQAD-TV	MOLINE	IL	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?	No

Additional
Program 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
Jim Kizer	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	07/23 /2021
Certified Title	Secretary
Authorized Party Name	Marc S. Sher , Esq. .

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>WQAD 2020 PF Report (9-19-19 to 7-31-20).pdf</u>	Applicant	EEO Public File Report	2020 Public File Report	Done with Virus Scan and/or Conversion
<u>WQAD 2021 PF Report.pdf</u>	Applicant	EEO Public File Report	2021 Public File Report	Done with Virus Scan and/or Conversion
<u>WQAD Narrative Statement.pdf</u>	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and/or Conversion