



(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Mid-Term Report

FRN: **0003739364** | File Number: **0000069495** | Submit Date: **04/04/2019** | Call Sign: **WKBS-TV** | Facility ID: **13929**  
 City: **ALTOONA** | State: **PA**  
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **04/04/2019** | 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
<b>CORNERSTONE TELEVISION, INC.</b> Doing Business As: CORNERSTONE TELEVISION, INC.	Steve Johnson 1 SIGNAL HILL DRIVE WALL, PA 15148 United States	+1 (412) 824-3930	sjohnson@ctvn.org	NFP

Information not provided.

## Contact Representatives

Common Stations	Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
	13929	WKBS-TV	ALTOONA	PA	No
	13924	WPCB-TV	GREENSBURG	PA	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
Steve Johnson	President

## 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	04/04 /2019
Certified Title	President
Authorized Party Name	Steve Johnson

**Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
<a href="#"><u>EEO Public File Report (4-2017-3-2018).pdf</u></a>	Applicant	All Purpose	2017-2018 EEO Public File Report	Done with Virus Scan and/or Conversion
<a href="#"><u>EEO Public File Report (4-2018-3-2019).pdf</u></a>	Applicant	All Purpose	2018-2019 EEO Public File Report	Done with Virus Scan and/or Conversion