

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0004349585** File Number: **0000109019** Submit Date: **03/24/2020** Call Sign: **WQXE** Facility ID: **26017** City

ELIZABETHTOWN State: KY

Service: Full Power FM Purpose: EEO Report Status: Received Status Date: 03/24/2020 Filing Status: Active

### General Information

Section	Question	Response
Application Description	Description of the application (255 characters max.) is visible only to you and is not part of the submitted application. It will be displayed in your Applications workspace.	WQXE(FM) & WULF(FM) 2020 Broadcast EEO Program Report
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
SKYTOWER COMMUNICATIONS-E'TOWN, INC. Doing Business As: SKYTOWER COMMUNICATIONS-E'TOWN, INC.	233 West Dixie Avenue Elizabethtown, KY 42701 United States	+1 (270) 737- 8000	bill@wqxe. com	COR

#### Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Mark N. Lipp , Esq . FCC Counsel Fletcher, Heald & Hildreth, P.L.C.	1300 North 17th Street 11th Floor Arlington , VA 22209 United States	+1 (703) 812-0445	lipp@fhhlaw.com	Legal Representative

### Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
26017	WQXE	ELIZABETHTOWN	KY	No
25799	WULF	HARDINSBURG	KY	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

#### **Responsibility for Implementation**

## Program Report Questions

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
Bill Evans	Owner/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	03/24/2020
Certified Title	Owner /GeneralManager
Authorized Party Name	Bill Evans

#### **Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
WQXE-WULF 2020 EEO Outreach Exh.pdf	Applicant	Narrative Statement	EEO Outreach Exhibit	Done with Virus Scan and /or Conversion
WQXE-WULF 2020 EEO Public File Report.pdf	Applicant	EEO Public File Report	2020 EEO Public File Report	Done with Virus Scan and /or Conversion
WQXE-WULF REVISED 2019 EEO Public File Rpt.pdf	Applicant	EEO Public File Report	2019 EEO Public File Report	Done with Virus Scan and /or Conversion