

Broadcast Equal Employment Opportunity **Program Report**

Licensee Name, Type and Contact Information

FRN: 0003739349 Fi	ile Number: 0000111120	Submit Date: 04/01/2	2020 Call Sign: WLFX	Facility ID: 4809 City:
BEREA State: KY				
Service: Full Power FM	Purpose: EEO Report	Status: Received	Status Date: 04/01/2020	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.	2020 WKXO WLFX WEKY WIRV WCYO license renew - EEO	
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No	

Licensee Information

Applicant	Address	Phone	Email	Applicant Type
WALLINGFORD COMMUNICATIONS, LLC	120 BIG HILL AVE. RICHMOND, KY 40475 United States	+1 (000) 000- 0000	kelly@wcyo. com	LLC

Contact Name Address Phone Email Contact Type Representatives John Neely Suite 203 +1 (301) 933-JOHNSNEELY@YAHOO. Legal 3750 University Blvd., 6304 COM Esq Representative MILLER AND NEELY, West P.C. Kensington, MD 20895 **United States**

Common **Stations**

Contact

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
4811	WEKY	RICHMOND	KY	No
4810	WKXO	BEREA	KY	No
34247	WCYO	IRVINE	KY	No
4809	WLFX	BEREA	KY	No
34248	WIRV	IRVINE	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	full-time e	employees? Consid	nt unit employ fewer than five er as "full-time" employees all 0 or more hours a week?	No			
Additional	Responsibility for Impl		r official overall rea	oonsihility for aqual amployman	t opportunity at the	station That		
Program Report Questions	official's name and title are:	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	Name Title						
	KELLY WALLINGFORD	KELLY WALLINGFORD PRESIDENT			NT			
Certification	Question					Response		
	partner, trustee, authorized authorized to sign on beha Commission under 47 C.F. who further certifies that he	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	Certified Date						
	Certified Title	Certified Title						
	Authorized Party Name	Authorized Party Name				Kelly Wallingford		
Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status			
	WLFX 2019 EEO statement.pdf.docx	Applicant	EEO Public File Report	2019 EEO Public File Report statement	Done with Virus Conversion	Scan and/or		

2020 EEO Public file Report

EEO Narrative

Done with Virus Scan and/or

Done with Virus Scan and/or

Conversion

Conversion

WLFX 2020 EEOPFR.pdf

WLFX EEO narrative.docx

Applicant

Applicant

EEO Public File

Report

Narrative Statement