

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0007997562** | File Number: **0000188253** | Submit Date: **03/31/2022** | Call Sign: **KWEX-DT** | Facility ID: **35881** |  
 City: **SAN ANTONIO** | State: **TX**  
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **03/31/2022** | 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>KWEX LICENSE PARTNERSHIP, L.P.</b> Doing Business As: KWEX LICENSE PARTNERSHIP, L.P.	CHRISTOPHER G. WOOD 5999 CENTER DRIVE LOS ANGELES, CA 90045 United States	+1 (310) 348-3600	CWOOD@UNIVISION.NET	LIP

## Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
MATTHEW S. DELNERO COVINGTON & BURLING LLP	ONE CITYCENTER 850 TENTH STREET, NW WASHINGTON, DC 20001 United States	+1 (202) 662-5543	MDELNERO@COV.COM	Legal Representative

## Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
48837	KCOR-CD	SAN ANTONIO	TX	No
125710	KNIC-DT	BLANCO	TX	No
35881	KWEX-DT	SAN ANTONIO	TX	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
Chris Morris	President and 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	03/31/2022
Certified Title	SVP, ASSOC GC GOV AND REG AFF
Authorized Party Name	CHRISTOPHER G WOOD

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<a href="#">San Antonio 2021-2022 Annual EEO Report Final 3.31.2022.pdf</a>	Applicant	EEO Public File Report	San Antonio EEO Annual Report 2021-2022	Done with Virus Scan and/or Conversion
<a href="#">San Antonio EEO Annual Report 2020-2021.pdf</a>	Applicant	EEO Public File Report	San Antonio EEO Annual Report 2020-2021	Done with Virus Scan and/or Conversion
<a href="#">San Antonio TV EEO Program Narrative 3.31.2022.pdf</a>	Applicant	Narrative Statement	San Antonio TV EEO Program Narrative Statement	Done with Virus Scan and/or Conversion