



(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0005077508** | File Number: **0000208161** | Submit Date: **01/26/2023** | Call Sign: **WTBY-TV** | Facility ID: **67993** |
City: **Jersey City** | State: **NJ**
Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **01/26/2023** | 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
TRINITY BROADCASTING OF NEW YORK, INC.	111 E. 15TH STREET NEW YORK, NY 10003 United States	+1 (212) 777-2120	cmmay@maylawoffices.com	NFP

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Kevin T. Fisher Broadcast Consultant Smith & Fisher	4791 Wintergreen Court Woodbridge, VA 22192 United States	+1 (703) 505-1751	Kevin@smithandfisher.com	Technical Representative
Coby M May , Esq. . Attorney COLBY M. MAY, ESQ., P.C.	P. O. Box 15473 WASHINGTON, DC 20003 United States	+1 (202) 544-5171	CMMAY@MAYLAWOFFICES.COM	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
67993	WTBY-TV	Jersey City	NJ	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

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
Kristin Egan	Station 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	01/26 /2023
Certified Title	Assistant Secretary
Authorized Party Name	John B Casoria , Esq .

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
FCC Form 396 -- Exhibit 1 -- EEO Complaints (WTBY-TV, Jersey City, New Jersey) (February 2023).docx	Applicant	All Purpose		Done with Virus Scan and/or Conversion
FCC Form 396 -- Exhibit 3 -- WTBY-TV Narrative Statement (2023).docx	Applicant	Narrative Statement		Done with Virus Scan and/or Conversion
WTBY 2022 EEO Public File Report.pdf	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
WTBY 2023 EEO Public File Report.pdf	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
WTBY Co-Religionist List 02-01-2021 to 01-31-2022.pdf	Applicant	EEO Public File Report		Done with Virus Scan and/or Conversion
WTBY Co-Religionist List 02-01-2022 to 01-31-2023.pdf	Applicant	All Purpose		Done with Virus Scan and/or Conversion