



(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: 0003229739	File Number: 0000122366	Submit Date: 09/24/2020	Call Sign: KTBG	Facility ID: 9928	City:
WARRENSBURG	State: MO				
Service: Full Power FM	Purpose: EEO Report	Status: Received	Status Date: 09/24/2020	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.	KTBG 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
Public Television 19, Inc.	125 EAST 31ST STREET KANSAS CITY, MO 64108 United States	+1 (816) 756-3580	mroberts@kansascitypbs.org	NFP

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Derek Teslik Gray Miller Persh LLP	2233 Wisconsin Avenue, NW, Ste. 226 Washington, DC 20007 United States	+1 (202) 559-7489	dteslik@graymillerpersh.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
9928	KTBG	WARRENSBURG	MO	No
53843	KCPT	KANSAS CITY	MO	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

Responsibility for Implementation

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
Donna Collene	Sr. Director of Human Resources

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	09/24/2020
Certified Title	Chief Technology Officer
Authorized Party Name	Jeffery M Evans

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
EEO Prong3-Report2018-19 (1).pdf	Applicant	EEO Public File Report	2018-2019 EEO Public File Report	Done with Virus Scan and /or Conversion
EEO & Prong 3 Report 2019 -2020b.pdf	Applicant	EEO Public File Report	2019-2020 EEO Public File Report	Done with Virus Scan and /or Conversion
Public Television 19 EEO Narrative Statement 2020.pdf	Applicant	Narrative Statement	Narrative Statement	Done with Virus Scan and /or Conversion