

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0032111239**

File Number: **0000134703**

Submit Date: **02/01/2021**

Call Sign: **WABG-TV**

Facility ID: **43203**

City: **GREENWOOD**

State: **MS**

Service: **Full Service Television**

Purpose: **EEO Report**

Status: **Received**

Status Date: **02/01/2021**

Filing Status: **Active**

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Licensee Information

Licensee Name, Type and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CALA BROADCAST PARTNERS LLC Doing Business As: WABG-TV	Legal Department, Cox Media Group 223 Perimeter Center Parkway NE Atlanta, GA 30346 United States	+1 (470) 508-3472	alysia.long@cmg.com	LLC

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Christina H Burrow Cooley LLP	Christina H. Burrow 1299 Pennsylvania Avenue NW Suite 700 Washington, DC 20004 United States	+1 (202) 776-2687	cburrow@cooley.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
181137	WNBD-LD	GRENADA	MS	No
181144	WXVT-LD	CLEVELAND	MS	No
43203	WABG-TV	GREENWOOD	MS	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)?	Yes
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
Rebecca L. Swan	Regional VP of Television

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	02/01 /2021
Certified Title	Vice President and Secretary
Authorized Party Name	Heidi Eddy-Dorn

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
WABG-TV 2019-2020 Annual EEO Public File Report.pdf	Applicant	EEO Public File Report	WABG-2019-2020 EEO Public File Report	Done with Virus Scan and/or Conversion
WABG-TV 2020- 2021 Annual EEO Public File Report.pdf	Applicant	EEO Public File Report	WABG-2020-2021 EEO Public File Report	Done with Virus Scan and/or Conversion
WABG-TV EEO Exhibit-Explanation Regarding Acquisition of Station.pdf	Applicant	All Purpose	WABG-Explanation Regarding Acquisition of Station	Done with Virus Scan and/or Conversion
WABG-TV Exhibit 1 - Discrimination Charges and Complaints.pdf	Applicant	Discrimination Complaints	WABG-Discrimination Complaint Exhibit	Done with Virus Scan and/or Conversion
WABG-TV -MISSISSIPPI TV FCC EEO Narrative 2021.pdf	Applicant	Narrative Statement	WABG-Narrative Statement	Done with Virus Scan and/or Conversion