

(REFERENCE COPY - Not for submission)

# Broadcast Equal Employment Opportunity Program Report

FRN: **0024008567** | File Number: **0000142163** | Submit Date: **03/31/2021** | Call Sign: **WHBQ-TV** | Facility ID: **12521**  
 City: **MEMPHIS** | State: **TN**  
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **03/31/2021** | Filing Status: **Active**

## General Information

Section	Question	Response
<b>Attachments</b>	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
<b>WHBQ (Memphis), LLC</b> Doing Business As: WHBQ (Memphis), LLC	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 Burrow Attorney Cooley LLP	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
12521	WHBQ-TV	MEMPHIS	TN	No

## Program Report Questions

Section	Question	Response
<b>Discrimination Complaints</b>	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
<b>Full-time Employees</b>	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
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**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 /2021
Certified Title	Vice President and Secretary
Authorized Party Name	Heidi Eddy- Dorn

**Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
<a href="#">EEO-Acquisition of Station(s) Exhibit (Cox).pdf</a>	Applicant	All Purpose	WHBQ-Acquisition of Station Exhibit	Done with Virus Scan and /or Conversion
<a href="#">Memphis 2020-2021 EEO Public File Report.pdf</a>	Applicant	EEO Public File Report	WHBQ-TV 2020-2021 EEO Public File Report	Done with Virus Scan and /or Conversion
<a href="#">WHBQ Narrative Statement.pdf</a>	Applicant	Narrative Statement	WHBQ-TV-Narrative Statement	Done with Virus Scan and /or Conversion
<a href="#">WHBQ-TV 2019-2020 EEO Public File Report.pdf</a>	Applicant	EEO Public File Report	WHBQ-TV 2019-2020 EEO Public File Report	Done with Virus Scan and /or Conversion
<a href="#">WHBQ-TV Discrimination Complaints.pdf</a>	Applicant	Discrimination Complaints	WHBQ-TV-Discrimination Complaints Exhibit	Done with Virus Scan and /or Conversion