

(REFERENCE COPY - Not for submission)

Broadcast Equal Employment Opportunity Program Report

FRN: **0006165955** | File Number: **0000192001** | Submit Date: **05/31/2022** | Call Sign: **KSL-TV** | Facility ID: **6359** | City: **SALT LAKE CITY** | State: **UT**
 Service: **Full Service Television** | Purpose: **EEO Report** | Status: **Received** | Status Date: **05/31/2022** | 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
Bonneville International Corporation	Jason Englund 55 North 300 West 2nd Floor Salt Lake City, UT 84101 United States	+1 (801) 575-5872	fccnotices@bonneville.com	COR

Contact Representatives

Contact Name	Address	Phone	Email	Contact Type
Kenneth E. Satten WILKINSON BARKER KNAUER, LLP	1800 M Street, NW Suite 800N WASHINGTON, DC 20036 United States	+1 (202) 783-4141	ksatten@wbklaw.com	Legal Representative

Common Stations

Facility Identifier	Call Sign	City	State	Time Brokerage Agreement
54156	KSL-FM	MIDVALE	UT	No
27462	KRSP-FM	SALT LAKE CITY	UT	No
60452	KSFI	SALT LAKE CITY	UT	No
6359	KSL-TV	SALT LAKE CITY	UT	No
87974	KZNS-FM	COALVILLE	UT	Yes
60458	KZNS	SALT LAKE CITY	UT	Yes
6375	KSL	SALT LAKE CITY	UT	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
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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
Tanya Vea	Executive Vice President

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	05/31 /2022
Certified Title	Executive Vice President and General Counsel
Authorized Party Name	Jason Englund

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>2020-2021 EEO LPF for SLC.pdf</u>	Applicant	All Purpose	2020-2021 EEO Public File Report	Done with Virus Scan and /or Conversion
<u>2021-2022 EEO LPF for SLC.pdf</u>	Applicant	EEO Public File Report	2021-2022 EEO Public File Report	Done with Virus Scan and /or Conversion
<u>Exhibit for 396 for KSL-TV SLC-EEO Complaint.pdf</u>	Applicant	Discrimination Complaints	EEO Complaint	Done with Virus Scan and /or Conversion
<u>Exhibit for 396 for SLC-EEO Outreach.pdf</u>	Applicant	Narrative Statement	EEO Outreach	Done with Virus Scan and /or Conversion