Federal Communicati Washington, D.C. 20		Approved 3060-0113 (Mar	of onin	OR FCC USE ONLY	<u> </u>	
FCC 396		·				
(To t	ST EQUAL EN PROGR be filed with broadca	IPLOYMENT OPPORTUN AM REPORT ast license renewal application)	III F	FOR COMMISSION USE ONLY FILE NO. - 20111021AAN		
Section I	Read INSTRUCTION	NS Before Filling Out Form				
Legal Name of th WKNG, LLC	ne Licensee					
Mailing Address P.O. BOX 626	5					
City TALLAPOOSA		State or Co GA			Zip Code 30176 -	
Telephone Numb 7708301055	per (include area coo	de) E-Mail Ad STEVE102				
		Facility ID Number 73183				Call Sign WKNG
TYPE OF BRO STATION: (if applicable)		mmercial Broadcast Station Radio TV Low Power TV International		Noncommercial Broadcast Station C Educational Radio C Educational TV		
List call sign and Also list stations operated pursuar agreement on thi EEO compliance	t to Program Report d location of all stati s operated by the lice nt to a time brokerag s report, responses of e efforts at brokered is a station or a grou	ons included on this statement. List ensee pursuant to a time brokerage a e agreement. To the extent that licen or information provided in Sections stations, as well as any other station up of commonly owned stations in th	agreement nsees inclu I through ns, include	Indicate on the ude stations oper II should take in ed on this form.	table below which rated pursuant to a not consideration the For purposes of the	h stations are time brokerage ne licensee's is form, a station
		Station List	t			
Also list station operated pursuar agreement on the well as any othe	s operated by the li- nt to a time brokerag is report, responses er stations, included	tons included on this statement. List censee pursuant to a time brokerag ge agreement. To the extent that lice should take into consideration the l on this form. For purposes of this e market that share at least one empty	ge agreem ensees inc licensee' s form, a	ent. Indicate on lude stations op s EEO complia	the table below v erated pursuant to nce efforts at brok	which stations are a time brokerage kered stations, as
Call Sign	Facility ID Number	Type (check applicable box)		cation y/State)	Time Brokerag (check appli	
WKNG	73183	• AM O FM O TV	TALLAF	POOSA, GA	O Yes	• No
Call Sign	Facility ID Number	Type (check applicable box)		cation y/State)	Time Brokerag (check appli	

WWGA	183308	C _{AM} ⊙ _{FM} C _{TV}	TALLAPOOSA, GA	O Yes O No			
		CONTACT PERSON IF 07	THER THAN I ICENSEE				
Name AUDREY P. R		S 1	Street Address 120 20TH STREET, NW SUITE 700 NORTH				
City WASHINGTO	N DC	z Zip Code 7	Celephone Number 2029731210				
	FILING INSTRUCTIONS						
Broadcast station licensees are required to afford equal employment opportunity to all qualified persons and to refrain from discriminating in employment and related benefits on the basis of race, color, national origin, religion, and sex. See 47 C.F.R. Section 73.2080. Pursuant to these requirements, a license renewal applicant whose station employment unit employs five or more full-time station employees must file a report of its activities to ensure equal employment opportunity. If a station employment unit employs fewer than five full-time employees, no equal employment opportunity program information need be filed. If a station employment unit is filing a combined report, a copy of the report must be filed with each station's renewal application.							
	hese requirements may result in sanctions or license renewal being delayed or denied. These requirements are contained in 47 C.F.R. Section 73.2080 and are authorized by the Communications Act of 1934, as amended.						
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)?							
If so, provide a brief description of the complaint(s), including the persons involved, the date of the filing, the court or agency, the file number (if any), and the disposition or current status of the matter.							
[Exhibit 1]							
Does your stati	on employment unit em	ploy fewer than five full-time	employees?	• Yes C No			
Consider as "fu	ll-time" employees all	those permanently working 30	0 or more hours a week.				
If your station employment unit employs fewer than five full-time employees, complete the certification below, return the form to the FCC, and place a copy in your station(s) public file. You do not have to complete the rest of this form. If your station employment unit employs five or more full-time employees, you must complete all of this form and follow all instructions.							
CERTIFICATION.							
This report must be certified, as follows:							
 A. By licensee, if an individual; B. By a partner, if a partnership (general partner, if a limited partnership); C. By an officer, if a corporation or an association; or D. By an attorney of the licensee, in case of physical disability or absence from the United States of the licensee. 							
WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).							
I certify to the best of my knowledge, information and belief, all statements contained in this report are true and correct. Signed Name of Respondent STEVEN L. GRADICK							
Title PRESIDENT		r	Telephone No. (include area 708301055	code)			

Date 10/21/2011	

The purpose of this document is to provide broadcast licensees, the FCC, and the public with information about whether the station is meeting equal employment opportunity requirements.

GENERAL POLICY

A broadcast station must provide equal employment opportunity to all qualified individuals without regard to their race, color, national origin, religion or sex in all personnel actions including recruitment, evaluation, selection, promotion, compensation, training and termination.

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: STEVEN L. GRADICK	Title: PRESIDENT
INALIG. STEVEN L. UKADICK	

It is also the responsibility of all persons at a broadcast station making employment decisions with respect to recruitment, evaluation, selection, promotion, compensation, training and termination of employees to ensure that no person is discriminated against in employment because of race, color, religion, national origin or sex.

I. EEO PUBLIC FILE REPORT Attach as an exhibit one copy of each of the EEO public file reports from the previous two years. Stations are required to place annually such information as is required by 47 C.F.R. Section 73.2080 in their public files.	
II. NARRATIVE STATEMENT Provide a statement in an exhibit which demonstrates how the station achieved broad and inclusive outreach during the two-year period prior to filing this application. Stations that have experienced difficulties in their outreach efforts should explain.	[Exhibit 3]

FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this report. We will use the information you provide to determine if the benefit requested is consistent with the public interest. If we believe there may be a violation or potential violation of a FCC statute, regulation, rule or order, your request may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your request may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding. In addition, all information provided in this form will be available for public inspection. If you owe a past due debt to the federal government, any information you provide may also be disclosed to the Department of Treasury Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized. We have estimated that each response to this collection of information will average 5 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-0113), Washington, D. C. 20554. We will also accept your comments via the Internet if you send them to jboley@cc.gov. Remember - you are not required to respond to a collection or information sponsored by the Federal government, a

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.

Exhibits

Exhibit 2 Description: NOT APPLICABLE PURSUANT TO SECTION 73.2080(D)

Attachment 2

Exhibit 3 Description: NOT APPLICABLE PURSUANT TO SECTION 73.2080(D)

Attachment 3