

<div style="display: flex; justify-content: space-between;"><div>Federal Communications Commission Washington, D.C. 20554</div><div>OMB 3060-1033 September 2003</div></div> <div style="text-align: center; margin-top: 10px;">FCC 396-C</div>	FOR FCC USE ONLY
<div style="text-align: center;">Multi-Channel Video Program Distributor EEO Program Annual Report</div> <div style="text-align: center; margin-top: 10px;">Read INSTRUCTIONS Before Filling Out Form</div>	FOR COMMISSION USE ONLY FILE NO. -

SECTION I IDENTIFYING INFORMATION

A. Name of Operator:
DISH NETWORK L.L.C.

MSO Name:

B. Employment Unit's Mailing Address
9601 S MERIDIAN BLVD

City
ENGLEWOOD

State
CO

Zip Code
80112-

FCC Registration Number:

Emp. Unit ID # 10748

Application Purpose

☒

New Program Report

☐

Amendment to Program Report

☐ Supplemental Investigation Sheet (SIS) Attached

C. County and State in which unit's employment office is located
ARAPAHOE, CO

D. Category of Respondent (check applicable box)

☐

Fewer than six (6) full-time employees during the selected payroll period: Complete Sections I, II and V

☒

Six (6) or more full-time employees during the selected payroll period: Complete ALL sections of the Form 396-C and the Supplemental Investigation Sheet, if attached

E. Pay Period Covered by this Report (inclusive dates) 09/01/2018 - 8/31/2019

F. Attachments: (See "Exhibit" buttons, below.)

SECTION II COMMUNITY INFORMATION

System Communities Comprising Local Employment Unit

Ident No.	Name of Community	Location (State)	Type
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Review the list of communities served on the previous year's submission and attach as Exhibit
A any additions or deletions, using the format noted above. NOTE: APPLICABLE ONLY TO
CABLE OPERATORS AND NOT TO OTHER MVPD UNITS.

Validate

Save

Edit FRN

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