



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **35190** | Service: **DTV** | Call **KMTV-TV** | Channel: **31 (UHF)**  
ID: | Sign:  
File **0000027256**  
Number:  
FRN: **0002710192** | Date **09/04**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>SCRIPPS BROADCASTING HOLDINGS LLC</b>	David Giles 312 WALNUT STREET 28TH FLOOR CINCINNATI, OH 45202 United States	+1 (513) 977- 3000	DAVE. GILES@SCRIPPS. COM	Limited Liability Company

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
<b>Ray Thurber</b> <i>Vice President / Engineering</i> <i>SCRIPPS BROADCASTING</i> <i>HOLDINGS LLC</i>	Ray Thurber 312 Walnut St. Cincinnati, OH 45202 United States	+1 (248) 827- 9202	ray. thurber@scripps. com

**Broadcaster  
Information  
and  
Transition  
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	KMTV must replace its main antenna and transmitter in order to move to its new channel. It will need to install interim facilities in order to be able to replace the main facility. See attached narrative for a more detailed explanation.

**Transmitters**

Section	Question	Response
<b>Transmitter Related Expenses</b>	Do you have transmitter related expenses?	Yes

**Primary  
Transmitter**

**Existing Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCX Millennium
	Year	2003
	Type	Inductive Output Tube
	IOT Power Type	Three
	Power Capacity	70 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	ULXTE-80
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	50.1 kW
	Justification for New Transmitter	Current transmitter is orphaned and no longer supported by the manufacturer. Parts are in very limited supply or not available. It cannot be re-tuned. Current transmitter has headroom. Station asking for 1 step-up.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No

	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	300 kVA
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	Necessary conduit, wiring and fuse disconnects as quoted by electrical contractor.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary  
Transmitter**

**Other Transmitter Cost Not Listed**

Name	Description
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<b>Ice Bridge Modification</b>	Modify the existing ice bridge so that it will cover the heat exchanges for the new transmitter.
<b>AC Unit Removal</b>	3 AC Units will need to be removed to make room for the new transmitter and heat exchangers.

**Antennas**

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	1000.0 kW



Manufacturer	
Model	TFU- 30DSC-R O4
Year	2003

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**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	Yes
<b>New Antenna Manufacturer and Types</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	761.0 kW
Manufacturer		

Model	TFU-30GTH-R O6
Year	2019
Justification for New Antenna	Existing main antenna is a coaxial slot antenna that is channel specific and cannot be reused on the new channel.

**Primary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No

<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Name	Description
NE State and Omaha City Tax	NE State and Omaha City Tax on Antenna Expenses

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	24
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Design power capacity in use	50.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	1000.0 kW
	Manufacturer	
	Model	TFU-24WB- R C160
Year	2019	

Justification for New Antenna

KMTV needs an interim antenna for operation while it replaces its current main antenna for the new channel.

**Interim Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Interim Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Transmission  
Line**

Section	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

**Primary  
Transmission  
Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1392 feet per run



**Primary  
Transmission  
Line**      **New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1392 feet per run
	Justification for New Transmission Line	Current transmission line has 20' segment lengths which will not work on the new channel. It will need to be replaced.

**Primary  
Transmission  
Line**      **Other Transmission Line Expenses Not Listed**

Name	Description
<b>NE State and Omaha City Tax</b>	NE State and Omaha City Tax on Transmission Line Expenses

**Interim  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Rigid
	Diameter	6 1/8 inches
	Segment Length	Broadband
	Other Segment Length	
	Number of parallel runs	1
	Length	792 feet per run
	Justification for New Transmission Line	KMTV will need an interim antenna for operation while it replaces its main facility for the new channel. The interim antenna will need transmission line.

**Interim  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

Information not provided.

**Tower Equipment And Rigging Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

**Primary Tower**

**Existing Tower**

Section	Question	Response
<b>Existing Tower Description</b>	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	Yes
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Yes
<b>Existing Tower Structure Registration</b>	Do you have a tower registration number?	Yes
	ASR Number	1025131
<b>Coordinates (NAD83 ( North American Datum of 1983))</b>	Latitude (NAD83)	41° 18' 24.6" N-
	Longitude (NAD83)	096° 01' 37.7" W-
	Overall Structure Height	1345.78 feet
	Support Structure Height	1238.83 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1202.09 feet

Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	Scripps Broadcasting Holdings LLC
Date Constructed	06/30/2004

**FM, AM or TV radio  
broadcasters. Facility ID's,  
Call Signs and Services of  
other broadcast stations with  
whom the tower is shared**

Facility ID	Call Sign	Service
26928	KGOR	FM
43238	KQKQ-FM	FM
50308	KSRZ	FM
69686	KXKT	FM

**Other Types of Users**

Users
Land Mobile
FM Booster

**Primary  
Tower**

**Tower Modification Costs**

Section	Question	Response
<b>Engineering Study</b>	Please what type of engineering study is required, if any:	Study needed for documented tower
<b>Tower Reinforcements</b>	Please select whether tower reinforcements are needed:	Major Reinforcements needed

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
<b>Tower Rigging Costs</b>	Complex Tower	N/A
<b>Helicopter Services Required</b>	Are helicopter services required?	No

**Primary  
Tower**

**Other Tower Expenses Not Listed**

Name	Description
<b>PE Review of Rigging Plan</b>	Professional Engineering review of proposed rigging plan as required by ANSI /ASEE A10.48 and ANSI/TIA 322 standards.
<b>Interim Antenna Rigging</b>	Rigging cost necessary for interim antenna.
<b>NE State and Omaha City Tax</b>	NE State and Omaha City Tax on Tower Expenses

**Outside Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	240
	Explanation	Project manager needed to manage all work at transmitter site required to transition to new channel (both the main and interim facilities). With the size of the current engineering staff, KMTV cannot spare personnel to ensure these tasks are completed.
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes

	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
Address transition timing and coordination issues w/ other stations and wireless providers	No	
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No

RF exposure measurements	Yes
Additional Field Engineering Service	No
Number of Days	N/A
Justification	N/A

**Other Professional Services Expenses Not Listed**

**Outside  
Professional  
Services  
Costs**

Name	Description
Site Survey	GatesAir performed a site survey to access changes to facility as necessary to transition to new channel including, power and HVAC requirements, available transmitter room space and existing antenna and transmission line RF characteristics at new channel.
NE State and Omaha City Tax	NE State and Omaha City Tax on Professional Services Expenses.



**Other Expenses**

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
<b>Permit and Filing Costs</b>	Local Zoning	No
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

<b>Name</b>	<b>Description</b>
<b>In-Building Deconstruction</b>	Work necessary to disassemble and remove existing transmitter, beam supplies, step starts, heat exchangers and mask filter.
<b>Employee Time</b>	Time needed by Scripps corporate and KMTV employees to work on the transition to a new channel.
<b>NE State and Omaha City Tax</b>	NE State and Omaha City Tax on Other Expenses
<b>Painting and Lighting</b>	Cost for adjusting the painting and lighting when the overall structure height is reduced (approx. 50 ft).
<b>Site Security</b>	Cost to cover expensive for temporary security when transmission line and antenna are delivered to the site.

**Cost Information**

**Transmitters**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmitter ULXTE-80</b>	<b>\$1,359,766.51</b>	<b>\$1,356,066.51</b>		<b>\$837,000.02</b>	
AC Unit Removal	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Ice Bridge Modification	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Other Electrical Service: Necessary conduit, wiring and fuse disconnects as quoted by electrical contractor.	<i>\$12,300.00</i>	\$12,300.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 50.1 kW	<i>\$1,252,466.51</i>	\$1,252,466.51	N/A	\$837,000.02	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$1,359,766.51</b>	<b>\$1,356,066.51</b>	<b>N/A</b>	<b>\$837,000.02</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$3,524,464.11</b>	<b>\$3,447,797.11</b>	<b>N/A</b>	<b>\$1,084,170.72</b>	<b>N/A</b>

## Components

Actual Information	
Description	File Name
AC Unit Removal	Information not provided.
Ice Bridge Modification	Information not provided.
Other Electrical Service: Necessary conduit, wiring and fuse disconnects as quoted by electrical contractor.	Information not provided.
UHF - Liquid Cooled Solid State Transmitter 50.1 kW	<p><b>Component Description:</b> KMTV Gates Air 2nd Milestone <b>Amount:</b> \$418,500.01</p> <p><b>Component Description:</b> KMTV Gates Air 1st Installment <b>Amount:</b> \$418,500.01</p>
Switchgear - industrial 800 amp	Information not provided.
Transformer 3 phase/480v - 300 KVA	Information not provided.

**Cost Information**

**Antennas**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Antenna TFU-24WB-R C160</b>	<b>\$187,730.00</b>	<b>\$187,400.00</b>		<b>\$141,165.00</b>	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,760.00	N/A
UHF - High Power, Side Mount, basic slot antenna, 24 bay,, 1000 kW input, directional,, horizontally polarized	<i>\$181,000.00</i>	\$181,000.00	N/A	\$135,405.00	N/A
<b>Primary Antenna TFU-30GTH-R O6</b>	<b>\$283,746.00</b>	<b>\$271,416.00</b>		<b>\$0.00</b>	
NE State and Omaha City Tax	<i>\$30,016.00</i>	\$30,016.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A

UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$235,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$471,476.00	\$458,816.00	N/A	\$141,165.00	N/A
<b>Total for all systems</b>	\$3,524,464.11	\$3,447,797.11	N/A	\$1,084,170.72	N/A

### Components

Actual Information	
Description	File Name
Sweep test of existing antenna	<b>Component Description:</b> Represents the second installment of repack sweep for total of 5,760 <b>Amount:</b> \$2,880.00
	<b>Component Description:</b> Represents the FCC Sweep costs, 2 installments for \$5,760 <b>Amount:</b> \$2,880.00
	<b>Component Description:</b> KMTV Antenna Interim Milestone 2 <b>Amount:</b> \$67,702.50
	<b>Component Description:</b> Interim Antenna Milestone 1 <b>Amount:</b> \$67,702.50
UHF - High Power, Side Mount, basic slot antenna, 24 bay,, 1000 kW input, directional,, horizontally polarized	

NE State and Omaha City Tax	Information not provided.
Sweep test of existing antenna	Information not provided.
UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	Information not provided.

**Cost Information**

**Transmission Line**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Transmission Line</b>	<b>\$183,744.00</b>	<b>\$175,032.00</b>		<b>\$106,005.70</b>	
Rigid Transmission Line - copper, 6 1/8" broadband	\$183,744.00	\$175,032.00	N/A	\$106,005.70	N/A
<b>Primary Transmission Line</b>	<b>\$312,145.00</b>	<b>\$298,225.00</b>		<b>\$0.00</b>	
Rigid Transmission Line - copper, 6 1/8"	\$281,184.00	\$267,264.00	N/A	N/A	N/A
NE State and Omaha City Tax	<i>\$30,961.00</i>	\$30,961.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$495,889.00</b>	<b>\$473,257.00</b>	<b>N/A</b>	<b>\$106,005.70</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$3,524,464.11</b>	<b>\$3,447,797.11</b>	<b>N/A</b>	<b>\$1,084,170.72</b>	<b>N/A</b>

**Components**

Actual Information	
Description	File Name



Rigid Transmission Line - copper, 6 1/8" broadband	<p><b>Component Description:</b> RIGID TRANSMISSION LINE - COPPER milestone 1</p> <p><b>Amount:</b> \$53,002.85</p> <p><b>Component Description:</b> RIGID TRANSMISSION LINE - COPPER Milestone 2</p> <p><b>Amount:</b> \$53,002.85</p>
Rigid Transmission Line - copper, 6 1/8"	Information not provided.
NE State and Omaha City Tax	Information not provided.

**Cost Information**

**Tower Equipment and Rigging Costs**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Tower GTOWER</b>	<b>\$801,965.00</b>	<b>\$769,865.00</b>		<b>\$0.00</b>	
NE State and Omaha City Tax	<i>\$50,365.00</i>	\$50,365.00	N/A	N/A	N/A
Interim Antenna Rigging	<i>\$100,000.00</i>	\$100,000.00	N/A	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Major tower reinforcement /modifications	\$421,000.00	\$400,000.00	N/A	N/A	N/A
PE Review of Rigging Plan	<i>\$7,500.00</i>	\$7,500.00	N/A	N/A	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$801,965.00</b>	<b>\$769,865.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$3,524,464.11</b>	<b>\$3,447,797.11</b>	<b>N/A</b>	<b>\$1,084,170.72</b>	<b>N/A</b>

**Components**

Information not provided.

**Cost Information**

**Outside Professional Services**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$115,381.00</b>	<b>\$110,371.00</b>		<b>\$0.00</b>	
NE State and Omaha City Tax	<i>\$7,221.00</i>	\$7,221.00	N/A	N/A	N/A
Site Survey	<i>\$16,900.00</i>	\$16,900.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A

Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A

Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$37,920.00	\$36,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$115,381.00	\$110,371.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$3,524,464.11	\$3,447,797.11	N/A	\$1,084,170.72	N/A

### Components

Information not provided.

**Cost Information**

**Other Expenses**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$279,986.60</b>	<b>\$279,421.60</b>		<b>\$0.00</b>	
Site Security	<i>\$6,000.00</i>	\$6,000.00	N/A	N/A	N/A
Painting and Lighting	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
NE State and Omaha City Tax	<i>\$7,959.00</i>	\$7,959.00	N/A	N/A	N/A
Employee Time	<i>\$124,747.60</i>	\$124,747.60	N/A	N/A	N/A
In-Building Deconstruction	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$21,700.00</i>	\$21,700.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A

Non-zoning permits	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
<b>Sub-total</b>	\$279,986.60	\$279,421.60	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$3,524,464.11	\$3,447,797.11	N/A	\$1,084,170.72	N/A

### Components

Information not provided.

**Cost Information** **Grand Total**

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$3,524,464.11	\$3,447,797.11	\$1,084,170.72

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
The facility has ceased operating on its pre-auction channel.	No
Construction of final facilities or all necessary modifications are complete.	No
All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No



Certification	Section	Question	Response
	<p><b>Submission of Estimated Expenses Statements</b></p>	<p>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), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> <li data-bbox="758 772 1061 1176">1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li data-bbox="758 1198 1061 1444">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li data-bbox="758 1467 1061 1758">3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.</li> </ol>	

4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Sravan Reddy ,  
Reddy .**  
*Senior  
Director,  
General  
Accounting*

09/04/2018

Certification	Section	Question	Response
	<p><b>Submission of Actual Cost Documentation Statements</b></p>	<p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS 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), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p>	
		<ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Sravan Reddy ,  
Reddy .**  
*Senior  
Director,  
General  
Accounting*

09/04/2018

## Attachments