

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 59139 Service: DTV Call KTVN Channel:

ID: Sign: 11 (High VHF) File 0000025334

Number:

FRN: **0002900330** Date **08/14**

Submitted: /2019

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
SARKES TARZIAN, INC. Doing Business As: SARKES TARZIAN, INC.	Station KTVN 205 NORTH COLLEGE AVENUE SUITE 800 BLOOMINGTON, IN 47402 United States	+1 (812) 332-7251	Ifox@ktvn. com	Corporation

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email	
[Confidential]				

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email
Nancy Ory , Esq . Lerman Senter PLLC	2001 L St NW Suite 400 Washington, DC 20036 United States	+1 (202) 416- 6791	nory@lermansenter. 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.	Yes
Briefly describe transition plan	Retune existing primary transmitter to the new channel. Replace non retunable auxiliary transmitter on the new channel. Replace mask filter, low pass filter and combiner. Modify existing exhaust and electrical system for install. Proof

Transmitters

'S	Section	Question	Response
	Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

Primary Transmitter

Existing Transmitter Information

Question	Response
Type of change	Retune Existing
Use	Primary (Main)
Ownership	Owned
Owner	N/A
Is this transmitter currently shared with another station?	No
Is this transmitter currently in operating condition?	Yes
Manufacturer	Gates Air
Model	VAX 3D
	Type of change Use Ownership Owner Is this transmitter currently shared with another station? Is this transmitter currently in operating condition? Manufacturer

Year	2016
Туре	Solid State
Solid State Cooling	Air Cooled
Solid State Power capacity	4.5 kW

Primary Transmitter

Retuning Transmitter Costs

Section	Question	Response
New IOT Tubes	Number of Tubes (including accessories) needed	N/A
New Mask Filter	Power	10 kW
	Other Power	N/A
New Exciter	Is a new exciter needed?	No

Primary Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A

	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	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
combiner	new combiner tuned to the new channel designation
Combiner Testing	Test the combiner for the new channel designation
Other Costs: Ductwork	Ductwork for Transmitter
Combiner installation	Modify transmission line from existing 2 port combiner to new 4 port combiner

Auxiliary Transmitter

Add Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	Auxiliary
	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
Existing Transmitter	Manufacturer	
Manufacturer and Type	Model	Platinum
	Year	2003
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	20 kW

Auxiliary Transmitter

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	VAXTE- 6R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	6.4 kW
	Justification for New Transmitter	Existing Auxiliary transmitter is not re- tunable to the new designated channel.

Auxiliary Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
		'

Other Electrical Service	Yes
Description	Reconnection using existing wiring from currently installed Auxiliary to new Auxiliary
Does the replacement transmitter require HVAC Service?	No
Туре	N/A
Size	N/A
Other Size	N/A
Does the Transmitter Building require an addition, modification, other leashold improvement?	No
Size	N/A
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
	Does the replacement transmitter require HVAC Service? Type Size Other Size Does the Transmitter Building require an addition, modification, other leashold improvement? Size Is an RF Consulting Engineer needed? Is a channel 14 Mask Filer needed? Is additional field engineering time needed?

Auxiliary Transmitter

Other Transmitter Cost Not Listed

Name	Description
Air Exhaust	modify existing exhaust ductwork from current Auxiliary's Harris Platinum configuration to new Auxiliary's Gates Air Vax TE 8 configuration
Other Costs: Ductwork	Ductwork for transmitter

Antennas

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	No

Transmission ^{ବୁଲୋ} ଡ଼	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	No

Tower
Equipment
And
Rigging
Costs

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	No

Outside Professional

Section	Question	Response
Al Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	200
	Explanation	The station's attorney will manage the reimbursement filings, review engineering applications, and engage in any additional coordination that is needed for KTVN to accomplish its repack transition over the three year period.
Outside RF consulting Engineering Services	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	No
Quantity	N/A
Do you have Distributed Transmission System engineering services?	N/A
Critical Facility	N/A
Terrain-Shielded Facility	N/A
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	No
Quantity	N/A
NEPA Section 106 environmental review	No
Environmental Assessment	No
ASR Modification	No
FAA Consultation (including preparation of FAA Form 7460)	No

Attorney and Other Outside Consulting Services

	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
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Other Professional Services Expenses Not Listed
Professional Services Costsided.

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Facility Expenses	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
Permit and Filing Costs	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	Yes
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	No
	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 Not Listed

Expenses Information not provided.

Cost Information

Transmitters

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

Description Primary Transmitter VAX 3D	Predetermined Cost Estimate \$248,350.00	Estimated Cost \$134,840.00	Estimated Cost Justification	Actual Cost \$114,060.02	Actual Cost Justification
combiner	\$120,000.00	\$120,000.00	N/A	\$101,324.02	N/A
Combiner installation	\$10,000.00	\$10,000.00	N/A	\$7,980.00	N/A
UHF and VHF - minor banding issues	\$105,200.00	\$0.00	Imputed per instructions	N/A	N/A
10 kW mask filter	\$8,310.00	\$0.00	Mask filter built into combiner. No need for an external filter.	\$0.00	N/A
Combiner Testing	\$840.00	\$840.00	N/A	\$756.00	N/A
Other Costs: Ductwork	\$4,000.00	\$4,000.00	Estimated Cost of Ductwork on Combiner	\$4,000.00	N/A
Auxiliary Transmitter VAXTE-6R44	\$175,000.00	\$175,000.00		\$128,781.21	

Other Electrical Service: Reconnection using existing wiring from currently installed Auxiliary to new Auxiliary	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Air Exhaust	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Other Costs: Ductwork	\$0.00	\$0.00	N/A	N/A	N/A
High VHF - Air Cooled Solid State Transmitter 6.4 kW	\$165,000.00	\$165,000.00	estimate from Gates Air	\$128,781.21	N/A
Sub-total	\$423,350.00	\$309,840.00	N/A	\$242,841.23	N/A
Total for all systems	\$615,377.50	\$403,522.50	N/A	\$287,164.24	N/A

Components

Actual Information Description	File Name	
combiner	Component Description: Amount:	Dielectric Invoice 242058 for outstanding combiner work; with change order and revised quote. \$6,472.60
	Component Description: Amount:	Consumer Use Tax for Dielectric Combiner Payments made in 2018 \$6,517.18

Component Description: KTVN - Dielectric

combiner plus

combiner

accessories cost; 2nd 45% payment

- Invoice

#MAN00416, PO #1546 with quote.

Amount: \$43,359.12

Component Description: Dielectric Invoice #

242058

Amount: \$6,472.60

Component Description: Dielectric Invoice

for elbow and coupling per attached change order (in attached

invoice).

Amount: \$1,616.00

Component Description: 45% of Dielectric

Invoice for combiner

Amount: \$48,026.75

Component Description: KTVN - Dielectric

combiner plus combiner

accessories cost; 1st 45% payment -

Invoice

#MAN00243, PO #1546 with quote.

Amount: \$43,359.12

	Component Description:	Dielectric Invoice for Elbow and Coupling; Inv #
	Amount:	279006 PO# 1546 \$1,616.00
Combiner installation		
	Component Description:	KTVN - Dielectric combiner installation cost; 2nd 45% payment - Invoice #MAN00416, PO #1546 with quote.
	Amount:	\$1,890.00
	Component Description:	KTVN - Dielectric combiner installation cost; 1st 45% payment - Invoice #MAN00243, PO #1546 with quote.
	Amount:	\$1,890.00
	Component Description:	Dielectric Combiner Install and Sweep Testing. Invoice#
	Amount:	301024. \$4,200.00
UHF and VHF - minor banding issues	Information not provided.	
10 kW mask filter	Information not provided.	

Combiner Testing		
	Component Description:	KTVN - Dielectric combiner testing cost; 1st 45% payment - Invoice #MAN00243, PO #1546 with quote.
	Amount:	\$378.00
	Component Description:	KTVN - Dielectric combiner testing cost; 2nd 45% payment - Invoice #MAN00416, PO #1546 with quote.
	Amount:	\$378.00
Other Costs: Ductwork		
	Component Description:	Applied Mechanical Invoice for Ductwork, with PO.
	Amount:	\$4,000.00
	Component Description:	Applied Mechanical Invoice # 15371
	Amount:	\$4,000.00
Other Electrical Service: Reconnection using existing wiring from currently installed Auxiliary to new Auxiliary	Information not provided.	
Air Exhaust	Information not provided.	
Other Costs: Ductwork	Information not provided.	
High VHF - Air Cooled Solid State Transmitter 6.4 kW		

Component Description: Final invoice for

> actual tax, freight, and installation costs. Costs originally left off first two invoices.

Amount: \$25,072.96

Component Description: KTVN - GatesAir

> transmitter, installation, RF system, electrical; 1st 1/3 payment -

Invoice

#JW30004271-DP, PO #1503 with quote and cover letter (estimated tax omitted).

Amount: \$38,483.05

Component Description: Second 1/3

> Payment of Gates Air Transmitter costs; minus

estimated sales tax and estimated

shipping.

\$38,483.05 **Amount:**

Component Description: transmitter Amount: \$49,782.27 Component Description: KTVN - GatesAir

transmitter, installation, RF system, electrical; 2nd 1/3 payment -

Invoice

#JW30004271-2, PO #1503 with quote and cover letter (estimated tax omitted).

Amount: \$38,483.05

Component Description: GatesAir Invoice #

US0317050

Amount: \$26,742.15

Cost Antennas

Information Information not provided.

Cost Transmission Line

Information Information not provided.

Cost Tower Equipment and Rigging Costs

Information Information not provided.

Cost Information

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
Outside Professional Services	\$159,200.00	\$69,850.00		\$34,073.75	
RF Exposure Measurements	\$21,050.00	\$8,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$15,000.00	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 engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$500.00	N/A	\$250.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$2,000.00	N/A	\$1,837.50	Subtotal invoice includes other line items.
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$3,000.00	N/A	\$2,250.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$3,300.00	Actual cost exceeded the Widelity Estimate.	\$3,230.00	N/A
Project management of the transition	\$31,600.00	\$30,800.00	Actual cost of project management exceeded estimate. Updated estimate cost per	\$26,506.25	N/A
			instruction.		

Total for all	\$615,377.50	\$403,522.50	N/A	\$287,164.24	N/A
systems					

Components

nation not provided. nation not provided. nation not provided. nation not provided.
nation not provided.
nation not provided.
Donent Description: Chesapeake Invoice 4848 for preparing and uploading application for license to cover. \$250.00
μητ. φ250.00
ponent Description: Remainder of invoice (\$625) is separate line item for review of

Perform engineering study for new channel Engineering study **Component Description:** assignment and antenna for new channel development assignment \$1,625.00 Amount: **Component Description:** \$625.00 of invoice for engineering study for new channel assignment. \$1,837.50 of invoice for CP application separate line item. Amount: \$625.00 Prepare and or review reimbursement form **Component Description:** Work was primarily FCC Forms 2100 and 399. **Amount:** \$2,891.25 **Component Description:** KTVN Lerman Senter legal services invoice for invoice review Amount: \$338.75 Project management of the transition **Component Description:** KTVN Lerman Senter legal invoice, July 2018 Amount: \$2,028.75 **Component Description:** KTVN Lerman Senter invoice, August 2018 **Amount:** \$2,433.75

Component Description: Legal project

management services - Lerman

Senter # 466565.

Amount: \$656.25

Component Description: Legal project

management

services - Lerman Senter # 468167.

Amount: \$4,203.75

Component Description: Project

management involving FRN association and

banking information.

Amount: \$1,050.00

Component Description: Legal project

management

services - Lerman Senter # 463906.

Amount: \$656.25

Component Description: Legal project

management

services - Lerman Senter # 467672.

Amount: \$2,561.25

Component Description: KTVN Lerman

Senter invoice, September 2018

Amount: \$2,580.00

Component Description: Project

management advice and counsel regarding repack and reimbursement

process

Amount: \$4,036.25

Component Description: Legal project

management

services - Lerman Senter # 461719.

Amount: \$1,050.00

Component Description: Work includes FCC

Forms 1876, 2100

and 399.

Amount: \$6,300.00

Component Description: Legal project

management services - Lerman Senter # 464474.

Amount: \$131.25

Cost Information

Other Expenses

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

			Estimated		
Description	Predetermined Cost Estimate	Estimated Cost	Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$32,827.50	\$23,832.50		\$10,249.26	
DTV Medical Facility Notification	\$11,550.00	\$4,000.00	N/A	\$2,950.00	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$0.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$0.00	N/A	N/A	N/A
BLM or NFS Coordination	\$1,000.00	\$1,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$18,832.50	\$18,832.50	Estimated Dielectric freight of \$5,332.50 plus an estimated Gates Air freight of \$4,500.00 *3 (\$13,500.00).	\$7,299.26	N/A
Develop and air announcement of upcoming channel change	\$0.00	\$0.00	N/A	N/A	N/A

MVPD Notification of Channel Change	\$0.00	\$0.00	N/A	N/A	N/A
Sub-total	\$32,827.50	\$23,832.50	N/A	\$10,249.26	N/A
Total for all systems	\$615,377.50	\$403,522.50	N/A	\$287,164.24	N/A

Components

File Name	
Component Description: Amount:	KTVN - medical facility notifications cost. Invoice # 1060, PO # 1706. \$2,950.00
Information not provided.	
Information not provided.	
Information not provided.	
Component Description: Amount:	O'Brien's Invoice# 12389 \$1,250.00
Component Description:	KTVN - GatesAir transmitter freight; 1st 1/3 payment - Invoice #JW30004271-DP, PO #1503 with quote.
	Component Description: Amount: Information not provided. Information not provided. Component Description: Amount:

Component Description:	KTVN - Dielectric
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combiner freight cost; 2nd 45% payment - Invoice #MAN00416, PO #1546 with quote.

Amount: \$2,399.63

Component Description: KTVN - Dielectric

combiner freight cost; 1st 45% payment - Invoice #MAN00243, PO #1546 with quote.

Amount: \$2,399.63

Component Description: KTVN - GatesAir

transmitter freight; 2nd 1/3 payment -

Invoice

#JW30004271-2, PO #1503 with

quote.

Amount: \$4,500.00

Component Description: O'brien's invoice

#12388

Amount: \$1,250.00

Develop and air announcement of upcoming channel change

Information not provided.

MVPD Notification of Channel Change

Information not provided.

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$615,377.50	\$403,522.50	\$287,164.24

Reimbursem	entestiatus	Response
	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

Section Question Response

Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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).

- 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.
- 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- The above-named entity acknowledges that all certifications and attached documentation are considered material representations.

- 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 abovenamed applicant for the Authorization(s) specified above. Lawson
Fox
Vice
President

08/14/2019

Attachments