



(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 **12/02**
Submitted: **/2019**

Applicant Information Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
SCRIPPS BROADCASTING HOLDINGS LLC	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 Name and Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Name and Information

Applicant	Address	Phone	Email
Ray Thurber <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
Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

**Primary
Transmitter**

Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	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
Existing Transmitter Manufacturer and Type	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
New Transmitter	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
Electrical Service	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.
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	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 leasehold 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
------	-------------

Ice Bridge Modification	Modify the existing ice bridge so that it will cover the heat exchanges for the new transmitter.
AC Unit Removal	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
Existing Antenna Description	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
Existing Antenna Manufacturer and Type	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

**Primary
Antenna**

New Antenna Costs

Section	Question	Response
New Antenna Description	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
New Antenna Manufacturer and Types	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
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	
	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
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches

Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	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
New Antenna Description	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
New Antenna Manufacturer and Type	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
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
Side Mount Brackets	Do you require the separate purchase of side mount brackets for an antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	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
Existing Transmission Line Description	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
Existing Transmission Line Manufacturer and Type	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
New Transmission Line Costs	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
NE State and Omaha City Tax	NE State and Omaha City Tax on Transmission Line Expenses

**Interim
Transmission
Line**

New Transmission Line

Section	Question	Response
New Transmission Line Costs	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
Existing Tower Description	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
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1025131
Coordinates (NAD83 (North American Datum of 1983))	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
69686	KXKT	FM
26928	KGOR	FM
50308	KSRZ	FM
43238	KQKQ-FM	FM

Other Types of Users

Users
Land Mobile
FM Booster

**Primary
Tower**

Tower Modification Costs

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

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

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

Outside Professional Services Costs

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	595
	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.
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	Yes
	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	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	
RF Field Engineering Services	Comprehensive coverage verification via field study	No

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

**Outside
Professional
Services
Costs**

Other Professional Services Expenses Not Listed

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
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	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
Other Miscellaneous Expenses	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?	Yes
	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

Name	Description
In-Building Deconstruction	Work necessary to disassemble and remove existing transmitter, beam supplies, step starts, heat exchangers and mask filter.
Employee Time	Time needed by Scripps corporate and KMTV employees to work on the transition to a new channel.
NE State and Omaha City Tax	NE State and Omaha City Tax on Other Expenses
Painting and Lighting	Cost for adjusting the painting and lighting when the overall structure height is reduced (approx. 50 ft).
Site Security	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
Primary Transmitter ULXTE-80	\$1,416,206.51	\$1,412,506.51		\$871,543.73	
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
Other Electrical Service: Necessary conduit, wiring and fuse disconnects as quoted by electrical contractor.	<i>\$68,740.00</i>	\$68,740.00	see Justifying Quote KMTV-TV Electric Company of Omaha	\$34,543.71	N/A
Ice Bridge Modification	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
AC Unit Removal	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Sub-total	\$1,416,206.51	\$1,412,506.51	N/A	\$871,543.73	N/A
Total for all systems	\$3,866,719.11	\$4,129,760.11	N/A	\$1,667,953.16	N/A

Components

Actual Information	
Description	File Name
UHF - Liquid Cooled Solid State Transmitter 50.1 kW	Component Description: KMTV Gates Air 1st Installment Amount: \$418,500.01
	Component Description: KMTV Gates Air 2nd Milestone Amount: \$418,500.01
	Information not provided.
	Information not provided.
	Component Description: PARTIAL BILLING: PROVIDE LABOR AND MATERIAL TO INSTALL POWER PANELS, TRANSFORMER Amount: \$30,570.00
	Component Description: Provide 240 Feet of Unistrut for the transmitter installers at the tower site. Amount: \$536.71
Component Description: PARTIAL BILLING: PROVIDE LABOR AND MATERIAL TO INSTALL POWER PANELS, TRANSFORMER Amount: \$3,437.00	
Switchgear - industrial 800 amp	Information not provided.
Transformer 3 phase/480v - 300 KVA	Information not provided.
Other Electrical Service: Necessary conduit, wiring and fuse disconnects as quoted by electrical contractor.	Component Description: PARTIAL BILLING: PROVIDE LABOR AND MATERIAL TO INSTALL POWER PANELS, TRANSFORMER Amount: \$30,570.00
	Component Description: Provide 240 Feet of Unistrut for the transmitter installers at the tower site. Amount: \$536.71
	Component Description: PARTIAL BILLING: PROVIDE LABOR AND MATERIAL TO INSTALL POWER PANELS, TRANSFORMER Amount: \$3,437.00

Ice Bridge Modification	Information not provided.
AC Unit Removal	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
Interim Antenna TFU-24WB-R C160	\$187,730.00	\$187,400.00		\$71,222.50	
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	\$67,702.50	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$3,520.00	N/A
Primary Antenna TFU-30GTH-R O6	\$296,046.00	\$281,714.00		\$16,698.00	
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
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$6,400.00	N/A

Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$10,298.00	Please see the attached quote and invoice from Dielectric #800078CMZ and #415010 respectively	\$10,298.00	N/A
NE State and Omaha City Tax	\$30,016.00	\$30,016.00	N/A	N/A	N/A
Sub-total	\$483,776.00	\$469,114.00	N/A	\$87,920.50	N/A
Total for all systems	\$3,866,719.11	\$4,129,760.11	N/A	\$1,667,953.16	N/A

Components

Actual Information		
Description	File Name	
UHF - High Power, Side Mount, basic slot antenna, 24 bay,, 1000 kW input, directional,, horizontally polarized	Component Description:	UHF - BROADBAND SLOT, SIDE
	Amount:	\$18,646.80
	Component Description:	KMTV Antenna Interim Milestone 2
	Amount:	\$67,702.50
	Component Description:	Interim Antenna Milestone 1
	Amount:	\$67,702.50

<p>Sweep test of existing antenna</p>	<p>Component Description: Other - Sweep KMTV Aux - Omaha, NE</p> <p>Amount: \$640.00</p> <p>Component Description: Represents the FCC Sweep costs, 2 installments for \$5,760</p> <p>Amount: \$2,880.00</p> <p>Component Description: Represents the second installment of repack sweep for total of 5,760</p> <p>Amount: \$2,880.00</p>
<p>UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized</p>	<p>Information not provided.</p>
<p>Sweep test of existing antenna</p>	<p>Component Description: Other - includes one field engineer on-site for one day, travel, expenses and report</p> <p>Amount: \$6,400.00</p>
<p>Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)</p>	<p>Component Description: OTHER 6-1/8" 75 OHM EIA ELBOW COMPLEX</p> <p>Amount: \$10,298.00</p>
<p>NE State and Omaha City Tax</p>	<p>Information not provided.</p>

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
Interim Transmission Line	\$183,744.00	\$175,032.00		\$53,002.85	
Rigid Transmission Line - copper, 6 1/8" broadband	\$183,744.00	\$175,032.00	N/A	\$53,002.85	N/A
Primary Transmission Line	\$312,145.00	\$298,225.00		\$194,893.03	
NE State and Omaha City Tax	<i>\$30,961.00</i>	\$30,961.00	N/A	N/A	N/A
Rigid Transmission Line - copper, 6 1/8"	\$281,184.00	\$267,264.00	N/A	\$194,893.03	N/A
Sub-total	\$495,889.00	\$473,257.00	N/A	\$247,895.88	N/A
Total for all systems	\$3,866,719.11	\$4,129,760.11	N/A	\$1,667,953.16	N/A

Components

Actual Information	
Description	File Name

Rigid Transmission Line - copper, 6 1/8" broadband	<p>Component Description: KMTV-TV-380-Interim Transmission Line - 6 1/8" Broadband Rigid Copper</p> <p>Amount: \$13,687.72</p> <p>Component Description: RIGID TRANSMISSION LINE - COPPER Milestone 2</p> <p>Amount: \$53,002.85</p> <p>Component Description: RIGID TRANSMISSION LINE - COPPER milestone 1</p> <p>Amount: \$53,002.85</p>
NE State and Omaha City Tax	Information not provided.
Rigid Transmission Line - copper, 6 1/8"	<p>Component Description: INPUT COMPLEX 6-1/8" 75 OHM</p> <p>Amount: \$13,406.00</p> <p>Component Description: T/L 6-75 EIA LENGTH 15' TO 20' FIXED FLG 1 END/ SWIVEL FLG 1 END</p> <p>Amount: \$6,940.63</p> <p>Component Description: KMTV-TV-310-Primary Transmission Line - 6 1/8" Rigid Copper</p> <p>Amount: \$174,546.40</p>

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
Primary Tower GTOWER	\$1,018,890.00	\$1,320,915.00		\$459,043.05	
Tall Tower (greater than 500')	\$210,500.00	\$534,125.00	Please see quote 20181228-234 Rev B	\$276,895.80	N/A
Interim Antenna Rigging	<i>\$316,925.00</i>	\$316,925.00	Please see quote ERI 20181009-513 Rev B	\$180,437.25	N/A
NE State and Omaha City Tax	<i>\$50,365.00</i>	\$50,365.00	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	\$1,710.00	N/A
Sub-total	\$1,018,890.00	\$1,320,915.00	N/A	\$459,043.05	N/A
Total for all systems	\$3,866,719.11	\$4,129,760.11	N/A	\$1,667,953.16	N/A

Components

Actual Information	
Description	File Name
Tall Tower (greater than 500')	Component Description: Climbing & Mapping Inspection Amount: \$9,833.30
	Component Description: MAIN ANTENNA STRUCTURAL INSTALLATION Amount: \$267,062.50
	Component Description: ANTENNA INSTALLATION Amount: \$53,667.25
	Component Description: ANTENNA INSTALLATION Amount: \$126,770.00
Interim Antenna Rigging	Information not provided.
NE State and Omaha City Tax	Information not provided.
Major tower reinforcement /modifications	Information not provided.
PE Review of Rigging Plan	Information not provided.
Structural engineering tower load study for well documented tower	Component Description: Structural Analysis Amount: \$1,710.00

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
Outside Professional Services	\$171,471.00	\$174,046.00		\$1,050.00	
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
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
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	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
RF Exposure Measurements	\$21,050.00	\$20,000.00	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 request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Project management of the transition	\$94,010.00	\$99,675.00	Widely Strategic Support Quote	\$1,050.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A

Sub-total	\$171,471.00	\$174,046.00	N/A	\$1,050.00	N/A
Total for all systems	\$3,866,719.11	\$4,129,760.11	N/A	\$1,667,953.16	N/A

Components

Actual Information Description	File Name
NE State and Omaha City Tax	Information not provided.
Site Survey	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.
Prepare request for Special Temporary Authorization	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.
Perform engineering study for new channel assignment and antenna development	Information not provided.
ASR modification (prepare FCC Form 854)	Information not provided.
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
RF Exposure Measurements	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.												
Project management of the transition	<table border="0"> <tr> <td data-bbox="722 331 1029 365">Component Description:</td> <td data-bbox="1161 331 1369 517">Preparation of STA App. for Interim Operation on Pre-transition Ch</td> </tr> <tr> <td data-bbox="722 533 831 566">Amount:</td> <td data-bbox="1161 533 1262 566">\$750.00</td> </tr> <tr> <td data-bbox="722 674 1029 707">Component Description:</td> <td data-bbox="1161 674 1369 779">Preparation of STA and ERP/tpo Calculations</td> </tr> <tr> <td data-bbox="722 795 831 828">Amount:</td> <td data-bbox="1161 795 1246 828">\$75.00</td> </tr> <tr> <td data-bbox="722 936 1029 969">Component Description:</td> <td data-bbox="1161 936 1316 969">FCC Repack</td> </tr> <tr> <td data-bbox="722 976 831 1010">Amount:</td> <td data-bbox="1161 976 1262 1010">\$225.00</td> </tr> </table>	Component Description:	Preparation of STA App. for Interim Operation on Pre-transition Ch	Amount:	\$750.00	Component Description:	Preparation of STA and ERP/tpo Calculations	Amount:	\$75.00	Component Description:	FCC Repack	Amount:	\$225.00
Component Description:	Preparation of STA App. for Interim Operation on Pre-transition Ch												
Amount:	\$750.00												
Component Description:	Preparation of STA and ERP/tpo Calculations												
Amount:	\$75.00												
Component Description:	FCC Repack												
Amount:	\$225.00												
Prepare and or review reimbursement form	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
Other Expenses	\$280,486.60	\$279,921.60		\$500.00	
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
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
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
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A

Non-zoning permits	<i>\$25,000.00</i>	\$25,000.00	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
Equipment Delivery and Handling Charges	<i>\$21,700.00</i>	\$21,700.00	N/A	N/A	N/A
Equipment Storage	<i>\$500.00</i>	\$500.00	per Team J Storage & Fulfillment Agreement	\$500.00	N/A
In-Building Deconstruction	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Sub-total	\$280,486.60	\$279,921.60	N/A	\$500.00	N/A
Total for all systems	\$3,866,719.11	\$4,129,760.11	N/A	\$1,667,953.16	N/A

Components

Actual Information	
Description	File Name
Site Security	Information not provided.
Painting and Lighting	Information not provided.
NE State and Omaha City Tax	Information not provided.
Employee Time	Information not provided.
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
DTV Medical Facility Notification	Information not provided.

FCC Filing Fees - Form 2100 license to cover application	Information not provided.				
FCC Filing Fees - Special Temporary Authorization request	Information not provided.				
Non-zoning permits	Information not provided.				
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.				
Equipment Delivery and Handling Charges	Information not provided.				
Equipment Storage	<table> <tr> <td>Component Description:</td> <td>Monthly Sq Ft Storage</td> </tr> <tr> <td>Amount:</td> <td>\$500.00</td> </tr> </table>	Component Description:	Monthly Sq Ft Storage	Amount:	\$500.00
Component Description:	Monthly Sq Ft Storage				
Amount:	\$500.00				
In-Building Deconstruction	Information not provided.				

Cost Information **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$3,866,719.11	\$4,129,760.11	\$1,667,953.16

Reimbursement Status

Question	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

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	<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"> 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. 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 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. 	

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*

12/02/2019

Certification	Section	Question	Response
	<p>Submission of Actual Cost Documentation Statements</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"> 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. 3. 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 above-named applicant for the Authorization(s) specified above.

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

12/02/2019

Attachments