



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **38584** | Service: **DTV** | Call **KMCT-TV** | Channel: **22 (UHF)** |  
ID: | Sign: |  
File **0000026258**  
Number:  
FRN: **0028580298** | Date **08/24**  
Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

| Applicant                                                             | Address                                                                         | Phone             | Email                  | Applicant Type            |
|-----------------------------------------------------------------------|---------------------------------------------------------------------------------|-------------------|------------------------|---------------------------|
| <b>KMCT HOLDINGS, LLC</b><br>Doing Business As:<br>KMCT HOLDINGS, LLC | Dante Thompson<br>3409 RUTHERFORD RD EXT.<br>TAYLORS, SC 29687<br>United States | +1 (864) 244-1616 | programming@wggs16.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>Joseph C Chautin III</b><br><i>Hardy, Carey, Chautin &amp; Balkin, LLP</i> | 1080 West Causeway Approach<br>Mandeville, LA 70471<br>United States | +1 (985) 629-0777 | jchautin@hardycarey.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                                                                                                                                                                                                                                                                                                                             |  | KMCT will be moving from frequency 38 to 22. We have contracted with an engineering firm and installation engineers to make this move. The installation engineer will handle all equipment installs along with the tower work needed. |

**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                                                      | SBTXUREA1500   |
|                                            | Year                                                       | 2015           |
|                                            | Type                                                       | Solid State    |
|                                            | Solid State Cooling                                        | Air Cooled     |
|                                            | Solid State Power Capacity                                 | 1.5 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                                     | TMU9                                                                                                                                                                                         |
|                 | Transmitter Type                          | Solid State                                                                                                                                                                                  |
|                 | Solid State Cooling                       | Air Cooled                                                                                                                                                                                   |
|                 | Solid State Power capacity                | 3.0 kW                                                                                                                                                                                       |
|                 | Justification for New Transmitter         | Current transmitter cannot be retuned to repack channel. Changes on this transmitter represent the minimal possible adjustment to accommodate the new channel and reach the previous market. |

**Primary  
Transmitter**

**Other Transmitter Costs**

| Section            | Question                              | Response |
|--------------------|---------------------------------------|----------|
| Electrical Service | Service Entrance (3 phases 800A 208V) | Yes      |
|                    | 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 |
| <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**  
Information not provided.

**Antennas**

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

**Primary  
Antenna**

**Add Antenna Information**

| Section                                | Question                                                        | Response           |
|----------------------------------------|-----------------------------------------------------------------|--------------------|
| Existing Antenna Description           | Type of change                                                  | Purchase<br>New    |
|                                        | Antenna Use                                                     | Primary<br>(Main)  |
|                                        | Description of Use                                              | N/A                |
|                                        | Ownership                                                       | Owned              |
|                                        | Owner                                                           | N/A                |
|                                        | Site                                                            | N/A                |
|                                        | Is this antenna currently shared with any other stations?       | No                 |
|                                        | Is this antenna directional?                                    | Yes                |
|                                        | Is antenna in operating condition?                              | Yes                |
|                                        | Is antenna located on or in close proximity to an antenna farm? | No                 |
| Existing Antenna Manufacturer and Type | Class                                                           | Full Power         |
|                                        | Mounting                                                        | Side Mount         |
|                                        | Antenna position in stack                                       | Not in Stack       |
|                                        | Polarization                                                    | Horizontal         |
|                                        | Type                                                            | Slotted<br>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)<br>.....                        | 20.0 kW            |
|                                        |                                                                 |                    |

|              |           |
|--------------|-----------|
| Manufacturer |           |
| Model        | PSILP12OI |
| Year         | 2015      |



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?                                              | Yes             |
|                                    | Will antenna be located on or in close proximity to an antenna farm? | No              |
| New Antenna Manufacturer and Types | Class                                                                | Full Power      |
|                                    | Mounting                                                             | Side Mount      |
|                                    | Antenna position in stack                                            | Not in Stack    |
|                                    | Polarization                                                         | Elliptical      |
|                                    | 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)<br>.....                             | 25.0 kW         |
|                                    | Manufacturer                                                         |                 |
|                                    | Model                                                                | DLP12B          |

|  |                               |                                                                    |
|--|-------------------------------|--------------------------------------------------------------------|
|  | Year                          | 2018                                                               |
|  | Justification for New Antenna | Existing antenna is cut for current channel and cannot be retuned. |

## 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**  
Information not provided.

**Transmission Line**

| Section                               | Question                                        | Response |
|---------------------------------------|-------------------------------------------------|----------|
| Transmission Line<br>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                                                                       | Flexible Foam    |
|                                                         | Diameter                                                                   | 1 5/8 inches     |
|                                                         | Other Diameter                                                             | N/A              |
|                                                         | Segment Length                                                             | N/A              |
|                                                         | Other Segment Length                                                       | N/A              |
|                                                         | Number of parallel runs                                                    | 1                |
|                                                         | Length                                                                     | 400 feet per run |

**Primary** **New Transmission Line**  
**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? | Yes                                                                                                      |
|                                    | Type                                      | Flexible Foam                                                                                            |
|                                    | Diameter                                  | 1 5/8 inches                                                                                             |
|                                    | Other Diameter                            | N/A                                                                                                      |
|                                    | Segment Length                            | N/A                                                                                                      |
|                                    | Other Segment Length                      | N/A                                                                                                      |
|                                    | Number of parallel runs                   | 1                                                                                                        |
|                                    | Length                                    | 400 feet per run                                                                                         |
|                                    | Justification for New Transmission Line   | Both systems will set up side by side during testing and transition. Minimize down time for channel move |

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

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                                               | Leased            |
|                                                     | Is this tower consider Complex?                         | No                |
|                                                     | Is this tower currently shared with any other stations? | No                |
|                                                     | One or more FM, AM or TV radio broadcaster(s)           | N/A               |
|                                                     | Others Types of Users                                   | N/A               |
|                                                     | Is tower documented for structural analysis?            | Yes               |
|                                                     | Is tower compliant with Rev G?                          | Unknown           |
| Existing Tower Structure Registration               | Do you have a tower registration number?                | Yes               |
|                                                     | ASR Number                                              | 1296986           |
| Coordinates (NAD83 ( North American Datum of 1983)) | Latitude (NAD83)                                        | 32° 30' 21.2" N-  |
|                                                     | Longitude (NAD83)                                       | 092° 08' 55.6" W- |
|                                                     | Overall Structure Height                                | 344.81 feet       |
|                                                     | Support Structure Height                                | 339.89 feet       |
|                                                     | Ground Elevation Above Mean Sea Level (AMSL)            | 68.90 feet        |
|                                                     |                                                         |                   |

|                  |                                                                         |
|------------------|-------------------------------------------------------------------------|
| Structure Type   | GTOWER -<br>Guyed<br>Structure Used<br>for<br>Communication<br>Purposes |
| Tower Owner      | Branch<br>Towers, LLC                                                   |
| Date Constructed | 10/05/2015                                                              |

**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:     | No 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**

Information not provided.



**Outside  
Professional**

| Section                                                           | Question                                                                     | Response                                                                                                         |
|-------------------------------------------------------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| <b>Services Costs<br/>Outside Project<br/>Management Services</b> | Do you require outside project management services?                          | Yes                                                                                                              |
|                                                                   | Number of Hours                                                              | 200                                                                                                              |
|                                                                   | Explanation                                                                  | General project managment including, Pattern analysis, antenna spec, transmitter spec, installation, supervision |
| <b>Outside RF consulting<br/>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<br/>Outside Consulting<br/>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                                                                           | No  |
|                                      | FAA Consultation (including preparation of FAA Form 7460)                                  | No  |
|                                      | 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                                                                   | No  |
|                                      | Additional Field Engineering Service                                                       | No  |
|                                      | Number of Days                                                                             | N/A |
|                                      | Justification                                                                              | N/A |

## Outside

## Professional

## Other Professional Services Expenses Not Listed

## Services Costs

Name

Description

|                                           |                                              |
|-------------------------------------------|----------------------------------------------|
| <b>Additional Attorney's Fees</b>         | To handle form 387 and other legal expenses. |
| <b>Engineering Services Other Matters</b> | Other Matters                                |

**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                                                                                                   | No       |
|                                     | BLM or NFS Coordination                                                                                              | No       |
|                                     | FCC Construction Permit Minor Change                                                                                 | No       |
|                                     | FCC License to Cover Application                                                                                     | No       |
|                                     | FCC Special Temporary Authority Application                                                                          | No       |
| <b>Other Miscellaneous Expenses</b> | 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?                                                                      | 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                                                                          |
|-----------------------|--------------------------------------------------------------------------------------|
| Station Coordination  | American Tower invoice for capital contribution for coordination with other stations |
| Attorney Fees - Other | Other attorney fees for the transition                                               |

## 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 TMU9</b>                           | <b>\$348,058.81</b>         | <b>\$180,881.52</b> |                                                                                                                                                                                                                                                    | <b>\$171,183.91</b> |                           |
| Service entrance 3 phase/800 amp/208 volt                 | \$14,400.00                 | \$21,040.00         | Invoice 1928 from RLH ELECTRIC, LLC                                                                                                                                                                                                                | \$18,970.06         | N/A                       |
| UHF - Air Cooled Solid State Transmitter 2.501 - 3.999 kW | \$155,600.00                | \$32,767.31         | This 3rd transmitter component is due to a bug in the LMS software. Cost Estimate is the remainder of the 4 quotes (\$159,841.52) minus what was paid in the first 2 components (\$127,074.21). The 4 quotes have been previously uploaded to LMS. | \$25,139.64         | N/A                       |

|                                                        |                     |                     |                                                                                                                                                                                                                                                                                                                   |                     |                                                                                                              |
|--------------------------------------------------------|---------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------------------------------------------|
| UHF - Air Cooled Solid State Transmitter<br>1 - 2.5 kW | \$126,000.00        | \$75,015.40         | ***System Notice:<br>Estimate adjusted and locked because line has been superseded.<br>***Estimate 1820 from Ultranet Wireless LLC DBA Kentuckiana Broadcast Technical Services.                                                                                                                                  | \$75,015.40         | 11/29 Do not upload invoices to this transmitter, please use UHF - Air Cooled Solid State Transmitter 3.0 kW |
| UHF - Air Cooled Solid State Transmitter<br>3.0 kW     | <b>\$52,058.81</b>  | \$52,058.81         | ***System Notice:<br>Estimate adjusted and locked because line has been superseded.<br>***Please see attached quotes: 19009 and 1809R from SJ Ramer Associates as well as Ultranet Wireless, LLC Estimate #1820 and Air Service Professionals invoice I6470. There four have been combined and uploaded into LMS. | \$52,058.81         | x                                                                                                            |
| <b>Sub-total</b>                                       | <b>\$348,058.81</b> | <b>\$180,881.52</b> | <b>N/A</b>                                                                                                                                                                                                                                                                                                        | <b>\$171,183.91</b> | <b>N/A</b>                                                                                                   |

|                              |              |              |     |              |     |
|------------------------------|--------------|--------------|-----|--------------|-----|
| <b>Total for all systems</b> | \$564,351.97 | \$484,616.76 | N/A | \$408,959.69 | N/A |
|------------------------------|--------------|--------------|-----|--------------|-----|

## Components

| Actual Information                                        |                               | File Name                                                                                                             |  |
|-----------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------|--|
| Description                                               |                               |                                                                                                                       |  |
| Service entrance 3 phase /800 amp/208 volt                | <b>Component Description:</b> | Labor and materials to add a 3 phase 208 volt service to the transmitter building and hook up new 3 phase transmitter |  |
|                                                           | <b>Amount:</b>                | \$7,340.00                                                                                                            |  |
|                                                           | <b>Component Description:</b> | Install 3ph primary pole w/3 pot 25 bv to serve customer 120-208                                                      |  |
|                                                           | <b>Amount:</b>                | \$11,630.06                                                                                                           |  |
| UHF - Air Cooled Solid State Transmitter 2.501 - 3.999 kW | <b>Component Description:</b> | Primary Transmitter                                                                                                   |  |
|                                                           | <b>Amount:</b>                | \$15,703.00                                                                                                           |  |
|                                                           | <b>Component Description:</b> | Primary Transmitter                                                                                                   |  |
|                                                           | <b>Amount:</b>                | \$9,436.64                                                                                                            |  |
|                                                           | <b>Component Description:</b> | Please deny this invoice                                                                                              |  |
|                                                           | <b>Amount:</b>                | N/A                                                                                                                   |  |
|                                                           | <b>Component Description:</b> | Please deny this invoice.                                                                                             |  |
|                                                           | <b>Amount:</b>                | N/A                                                                                                                   |  |



|                                                        |                                                                                                                                                                            |
|--------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| UHF - Air Cooled Solid<br>State Transmitter 1 - 2.5 kW | <div> <b>Component Description:</b> Please reject this invoice</div> <div> <b>Amount:</b> N/A</div>                                                                        |
|                                                        | <div> <b>Component Description:</b> Downpayment for transmitter package</div> <div> <b>Amount:</b> \$65,009.71</div>                                                       |
|                                                        | <div> <b>Component Description:</b> Louisiana State Sales Taxes</div> <div> <b>Amount:</b> \$10,005.69</div>                                                               |
| UHF - Air Cooled Solid<br>State Transmitter 3.0 kW     | <div> <b>Component Description:</b> Installed 2-2.5 ton Mitsubishi mini splits for the television control transmitter station.</div> <div> <b>Amount:</b> \$8,719.00</div> |
|                                                        | <div> <b>Component Description:</b> Please deny this invoice</div> <div> <b>Amount:</b> N/A</div>                                                                          |
|                                                        | <div> <b>Component Description:</b> Please deny this invoice.</div> <div> <b>Amount:</b> N/A</div>                                                                         |
|                                                        | <div> <b>Component Description:</b> Transmitter</div> <div> <b>Amount:</b> \$43,339.81</div>                                                                               |

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 |
|-------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------|
| Primary Antenna DLP12B                                                                                            | \$24,463.16                 | \$28,283.16    |                                                                                                                           | \$20,247.28 |                           |
| Sweep test of existing antenna                                                                                    | \$6,730.00                  | \$10,550.00    | SJ Ramer Associates Invoice #19019                                                                                        | \$10,550.00 | N/A                       |
| UHF - High Power, Side Mount, basic slot antenna, 25 kW input, directional,, elliptically or circularly polarized | \$9,697.28                  | \$9,697.28     | This amount is the total estimated cost for the actual equipment being installed. Quotes and invoices have been uploaded. | \$1,661.40  | per invoices submitted    |

|                                                                                                     |                   |              |                                                                                                                                                                                                       |              |     |
|-----------------------------------------------------------------------------------------------------|-------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----|
| UHF - High Power, Side Mount, basic slot antenna, 25 kW input, directional,, horizontally polarized | <b>\$8,035.88</b> | \$8,035.88   | ***System Notice: Estimate adjusted and locked because line has been superseded. ***This is for an equivalent replacement of the Channel 38 antenna for Channel 22. This is not an equipment upgrade. | \$8,035.88   | N/A |
| <b>Sub-total</b>                                                                                    | \$24,463.16       | \$28,283.16  | N/A                                                                                                                                                                                                   | \$20,247.28  | N/A |
| <b>Total for all systems</b>                                                                        | \$564,351.97      | \$484,616.76 | N/A                                                                                                                                                                                                   | \$408,959.69 | N/A |

## Components

| Actual Information             |                               |
|--------------------------------|-------------------------------|
| Description                    | File Name                     |
| Sweep test of existing antenna | <b>Component Description:</b> |
|                                | KMCT-210-Primary Antenna      |
|                                | - Sweep Test                  |
|                                | <b>Amount:</b> \$4,550.00     |
|                                | <b>Component Description:</b> |
|                                | Primary Antenna               |
|                                | - Sweep Test                  |
|                                | <b>Amount:</b> \$6,000.00     |

|                                                                                                                   |                                                                                                                |                                                                                                                                          |
|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| UHF - High Power, Side Mount, basic slot antenna, 25 kW input, directional,, elliptically or circularly polarized | <b>Component Description:</b><br><br><b>Amount:</b>                                                            | UHF - Lower Power Side Mount<br>\$1,661.40                                                                                               |
| UHF - High Power, Side Mount, basic slot antenna, 25 kW input, directional,, horizontally polarized               | <b>Component Description:</b><br><br><b>Amount:</b><br><br><b>Component Description:</b><br><br><b>Amount:</b> | Primary Antenna - UHF Side Mount Directional H-POL<br>\$4,017.94<br><br>Primary Antenna - UHF Side Mount Directional H-POL<br>\$4,017.94 |

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<br>Cost Estimate | Estimated<br>Cost | Estimated<br>Cost<br>Justification | Actual Cost  | Actual Cost<br>Justification |
|----------------------------------------------------------------------|--------------------------------|-------------------|------------------------------------|--------------|------------------------------|
| Primary<br>Transmission<br>Line                                      | \$9,600.00                     | \$9,200.00        |                                    | \$5,321.12   |                              |
| Flexible<br>Foam<br>Transmission<br>Line -<br>dielectric, 1 5<br>/8" | \$9,600.00                     | \$9,200.00        | N/A                                | \$5,321.12   | N/A                          |
| Sub-total                                                            | \$9,600.00                     | \$9,200.00        | N/A                                | \$5,321.12   | N/A                          |
| Total for all<br>systems                                             | \$564,351.97                   | \$484,616.76      | N/A                                | \$408,959.69 | N/A                          |

Components

| Actual Information |           |
|--------------------|-----------|
| Description        | File Name |

Flexible Foam Transmission  
Line - dielectric, 1 5/8"

**Component Description:**

Flex Hanger Snap  
IN 1 5/8 Foam  
SSH-158

**Amount:**

\$372.00

**Component Description:**

New Transmission  
Line

**Amount:**

\$2,157.14

**Component Description:**

Primary  
Transmission Line  
- Flexible Foam 1 5  
/8"

**Amount:**

\$634.84

**Component Description:**

New Transmission  
Line

**Amount:**

\$2,157.14

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                                              | \$96,800.00                 | \$81,617.08    |                                       | \$71,617.08  |                           |
| Structural engineering tower load study for well documented tower | \$12,600.00                 | \$12,000.00    | N/A                                   | \$2,000.00   | N/A                       |
| Short Tower (less than 500')                                      | \$84,200.00                 | \$69,617.08    | Ultramet Wireless, LLC invoice 459917 | \$69,617.08  | N/A                       |
| Sub-total                                                         | \$96,800.00                 | \$81,617.08    | N/A                                   | \$71,617.08  | N/A                       |
| Total for all systems                                             | \$564,351.97                | \$484,616.76   | N/A                                   | \$408,959.69 | N/A                       |

Components

| Actual Information                                                |                                                                                      |
|-------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Description                                                       | File Name                                                                            |
| Structural engineering tower load study for well documented tower | <div>Component Description: Broadcast structural</div> <div>Amount: \$2,000.00</div> |

|                              |                               |                                                     |
|------------------------------|-------------------------------|-----------------------------------------------------|
| Short Tower (less than 500') |                               |                                                     |
|                              | <b>Component Description:</b> | Mobilization,<br>Tower Labor,<br>Parts              |
|                              | <b>Amount:</b>                | \$67,395.65                                         |
|                              |                               |                                                     |
|                              | <b>Component Description:</b> | Tubular Arm Pipe<br>Mount 80" Fac; 3-1<br>/2" x 48" |
|                              | <b>Amount:</b>                | Scheduled 40 Galv<br>\$2,221.43                     |



## 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>\$61,680.00</b>          | <b>\$169,935.00</b> |                                                                        | <b>\$133,604.30</b> |                           |
| Project management of the transition                                                | \$31,600.00                 | \$148,185.00        | Please see Estimated Cost Justification KMCT-510-Project Management v0 | \$127,509.30        | N/A                       |
| Engineering Services Other Matters                                                  | <i>\$500.00</i>             | \$500.00            | Per Du Treil Invoice 241006                                            | \$500.00            | N/A                       |
| Additional Attorney's Fees                                                          | <i>\$1,500.00</i>           | \$1,500.00          | Cost to support attorney fees for form 387 and other legal needs       | \$1,055.00          | N/A                       |
| Attorney Fees - Prepare and File request for Special Temporary Authorization        | \$3,680.00                  | \$3,500.00          | N/A                                                                    | \$0.00              | N/A                       |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00                  | \$2,250.00          | N/A                                                                    | \$725.00            | N/A                       |

|                                                                                                           |              |              |                                   |              |     |
|-----------------------------------------------------------------------------------------------------------|--------------|--------------|-----------------------------------|--------------|-----|
| Attorney Fees<br>- Prepare and<br>File FCC Form<br>2100 (main),<br>Construction<br>Permit<br>Application  | \$5,260.00   | \$5,000.00   | N/A                               | \$1,340.00   | N/A |
| Prepare<br>request for<br>Special<br>Temporary<br>Authorization                                           | \$2,050.00   | \$1,500.00   | N/A                               | \$0.00       | N/A |
| Prepare<br>engineering<br>section of FCC<br>Form 2100<br>(main),<br>License to<br>Cover<br>Application    | \$1,580.00   | \$1,000.00   | N/A                               | \$0.00       | N/A |
| Prepare<br>engineering<br>section of FCC<br>Form 2100<br>(main),<br>Construction<br>Permit<br>Application | \$3,155.00   | \$2,000.00   | Per Du Treil<br>Invoice<br>241005 | \$2,000.00   | N/A |
| Perform<br>engineering<br>study for new<br>channel<br>assignment<br>and antenna<br>development            | \$7,360.00   | \$2,000.00   | N/A                               | \$0.00       | N/A |
| Prepare and<br>or review<br>reimbursement<br>form                                                         | \$2,630.00   | \$2,500.00   | N/A                               | \$475.00     | N/A |
| <b>Sub-total</b>                                                                                          | \$61,680.00  | \$169,935.00 | N/A                               | \$133,604.30 | N/A |
| <b>Total for all<br/>systems</b>                                                                          | \$564,351.97 | \$484,616.76 | N/A                               | \$408,959.69 | N/A |

Components

| Actual Information                   |                        |                    |
|--------------------------------------|------------------------|--------------------|
| Description                          | File Name              |                    |
| Project management of the transition | Component Description: | Project Management |
|                                      | Amount:                | \$12,900.00        |
|                                      | Component Description: | Project Management |
|                                      | Amount:                | \$6,309.95         |
|                                      | Component Description: | Project Management |
|                                      | Amount:                | \$4,718.00         |
|                                      | Component Description: | Project Management |
|                                      | Amount:                | \$2,840.70         |
|                                      | Component Description: | Project Management |
|                                      | Amount:                | \$7,985.40         |
|                                      | Component Description: | Project Management |
|                                      | Amount:                | \$8,700.00         |
|                                      | Component Description: | Project Management |
|                                      | Amount:                | \$2,896.10         |
|                                      | Component Description: | Project Management |
|                                      | Amount:                | \$2,750.30         |

|                               |                                                                                                              |
|-------------------------------|--------------------------------------------------------------------------------------------------------------|
| <b>Component Description:</b> | "PO LINE 1 - NTP<br>Billable KMCT-TV<br>FID:38584 ATC<br>Tower 204618<br>WEST MONROE<br>BROADCAST<br>REPACK" |
| <b>Amount:</b>                | \$9,480.00                                                                                                   |
| <b>Component Description:</b> | Project<br>Management                                                                                        |
| <b>Amount:</b>                | \$23,400.00                                                                                                  |
| <b>Component Description:</b> | Project<br>Management                                                                                        |
| <b>Amount:</b>                | \$296.25                                                                                                     |
| <b>Component Description:</b> | Project<br>Management                                                                                        |
| <b>Amount:</b>                | \$3,311.65                                                                                                   |
| <b>Component Description:</b> | Bookkeeping                                                                                                  |
| <b>Amount:</b>                | \$480.00                                                                                                     |
| <b>Component Description:</b> | Engineering<br>Services & Travel<br>Charges                                                                  |
| <b>Amount:</b>                | \$2,500.00                                                                                                   |
| <b>Component Description:</b> | Engineering<br>Services                                                                                      |
| <b>Amount:</b>                | \$2,800.00                                                                                                   |
| <b>Component Description:</b> | BOOKKEEPING -<br>LIZ ERICKSON                                                                                |
| <b>Amount:</b>                | \$480.00                                                                                                     |

|                               |                                             |
|-------------------------------|---------------------------------------------|
| <b>Component Description:</b> | Project Management                          |
| <b>Amount:</b>                | \$4,255.70                                  |
| <b>Component Description:</b> | Project Management<br>KMCT Repack-Mar 2018  |
| <b>Amount:</b>                | \$8,700.00                                  |
| <b>Component Description:</b> | Project Management<br>KMCT Repack-July 2018 |
| <b>Amount:</b>                | \$16,950.00                                 |
| <b>Component Description:</b> | Project Management                          |
| <b>Amount:</b>                | \$3,894.35                                  |
| <b>Component Description:</b> | Project Management                          |
| <b>Amount:</b>                | \$2,019.65                                  |
| <b>Component Description:</b> | Project Management                          |
| <b>Amount:</b>                | \$3,103.85                                  |
| <b>Component Description:</b> | Project Management                          |
| <b>Amount:</b>                | \$2,764.65                                  |
| <b>Component Description:</b> | Project Management                          |
| <b>Amount:</b>                | \$745.00                                    |

|                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                       | <b>Component Description:</b> Project Management<br><b>Amount:</b> \$2,407.75                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Engineering Services<br>Other Matters | <b>Component Description:</b> KMCT-Form 399 work<br><b>Amount:</b> \$500.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Additional Attorney's Fees            | <b>Component Description:</b> Legal Services - Review FCC notice regarding first transition progress reports; deadline.<br><b>Amount:</b> \$75.00<br><br><b>Component Description:</b> Legal Services - Draft Form 399 in LMS<br><b>Amount:</b> \$80.00<br><br><b>Component Description:</b> KMCT-550-Attorney - Other Expenses Not Listed - Form 387 and other legal needs<br><b>Amount:</b> \$150.00<br><br><b>Component Description:</b> Develop and Air Channel Change Announcements<br><b>Amount:</b> \$75.00<br><br><b>Component Description:</b> Load Form 387 quarterly transition progress report in LMS<br><b>Amount:</b> \$75.00 |

|                                                                                    |                                                 |                                                                                    |
|------------------------------------------------------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------|
|                                                                                    | <b>Component Description:</b><br><b>Amount:</b> | Repack Legal Expenses<br>\$275.00                                                  |
|                                                                                    | <b>Component Description:</b><br><b>Amount:</b> | Legal Fees<br>\$150.00                                                             |
|                                                                                    | <b>Component Description:</b><br><b>Amount:</b> | Attorney - License to Cover (Main)<br>\$100.00                                     |
|                                                                                    | <b>Component Description:</b><br><b>Amount:</b> | Prepare draft of Form 387 2nd Qtr 2018 report<br>\$75.00                           |
| Attorney Fees - Prepare and File request for Special Temporary Authorization       | Information not provided.                       |                                                                                    |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | <b>Component Description:</b><br><b>Amount:</b> | Legal Services - Check status of Form 2100 CP app for KMCT and Form 399<br>\$75.00 |
|                                                                                    | <b>Component Description:</b><br><b>Amount:</b> | Review email and American Tower letter to FAWM<br>\$650.00                         |

|                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                            |                                                                         |                                                            |                                                                                                     |                                                            |                                                      |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------|
| <p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p> | <table> <tr> <td data-bbox="694 100 1114 383"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 100 1430 383"> <p>Attorney - Construction Permit Application (Main)</p> <p>\$80.00</p> </td></tr> <tr> <td data-bbox="694 383 1114 719"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 383 1430 719"> <p>Legal Services - Review response from K. Albritton on status of 2100 and 399</p> <p>\$875.00</p> </td></tr> <tr> <td data-bbox="694 719 1114 943"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 719 1430 943"> <p>Medical Facility Notification</p> <p>\$385.00</p> </td></tr> </table> | <p><b>Component Description:</b></p> <p><b>Amount:</b></p> | <p>Attorney - Construction Permit Application (Main)</p> <p>\$80.00</p> | <p><b>Component Description:</b></p> <p><b>Amount:</b></p> | <p>Legal Services - Review response from K. Albritton on status of 2100 and 399</p> <p>\$875.00</p> | <p><b>Component Description:</b></p> <p><b>Amount:</b></p> | <p>Medical Facility Notification</p> <p>\$385.00</p> |
| <p><b>Component Description:</b></p> <p><b>Amount:</b></p>                                    | <p>Attorney - Construction Permit Application (Main)</p> <p>\$80.00</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            |                                                                         |                                                            |                                                                                                     |                                                            |                                                      |
| <p><b>Component Description:</b></p> <p><b>Amount:</b></p>                                    | <p>Legal Services - Review response from K. Albritton on status of 2100 and 399</p> <p>\$875.00</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                            |                                                                         |                                                            |                                                                                                     |                                                            |                                                      |
| <p><b>Component Description:</b></p> <p><b>Amount:</b></p>                                    | <p>Medical Facility Notification</p> <p>\$385.00</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                            |                                                                         |                                                            |                                                                                                     |                                                            |                                                      |
| <p>Prepare request for Special Temporary Authorization</p>                                    | <p>Information not provided.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                            |                                                                         |                                                            |                                                                                                     |                                                            |                                                      |
| <p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>      | <p>Information not provided.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                            |                                                                         |                                                            |                                                                                                     |                                                            |                                                      |
| <p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>   | <table> <tr> <td data-bbox="694 1290 1114 1626"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1114 1290 1430 1626"> <p>KMCT-Form 2100; Exhibits Professional Services</p> <p>\$2,000.00</p> </td></tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <p><b>Component Description:</b></p> <p><b>Amount:</b></p> | <p>KMCT-Form 2100; Exhibits Professional Services</p> <p>\$2,000.00</p> |                                                            |                                                                                                     |                                                            |                                                      |
| <p><b>Component Description:</b></p> <p><b>Amount:</b></p>                                    | <p>KMCT-Form 2100; Exhibits Professional Services</p> <p>\$2,000.00</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                            |                                                                         |                                                            |                                                                                                     |                                                            |                                                      |
| <p>Perform engineering study for new channel assignment and antenna development</p>           | <p>Information not provided.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                            |                                                                         |                                                            |                                                                                                     |                                                            |                                                      |



|                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                                                                       |                |          |                               |                                                                                                |                |          |
|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------|----------------|----------|-------------------------------|------------------------------------------------------------------------------------------------|----------------|----------|
| Prepare and or review<br>reimbursement form | <table> <tr> <td data-bbox="694 98 1101 313"> <b>Component Description:</b> </td><td data-bbox="1101 98 1428 313">           Legal Services -<br/>Review FCC<br/>Incentive Auction<br/>Closing Notice         </td></tr> <tr> <td data-bbox="694 313 1101 403"> <b>Amount:</b> </td><td data-bbox="1101 313 1428 403">           \$250.00         </td></tr> <tr> <td data-bbox="694 403 1101 649"> <b>Component Description:</b> </td><td data-bbox="1101 403 1428 649">           Tel call from FCC,<br/>Review KMCT<br/>Form 1876, Memos<br/>to client, Review<br/>FCC notice, etc.         </td></tr> <tr> <td data-bbox="694 649 1101 752"> <b>Amount:</b> </td><td data-bbox="1101 649 1428 752">           \$225.00         </td></tr> </table> | <b>Component Description:</b> | Legal Services -<br>Review FCC<br>Incentive Auction<br>Closing Notice | <b>Amount:</b> | \$250.00 | <b>Component Description:</b> | Tel call from FCC,<br>Review KMCT<br>Form 1876, Memos<br>to client, Review<br>FCC notice, etc. | <b>Amount:</b> | \$225.00 |
| <b>Component Description:</b>               | Legal Services -<br>Review FCC<br>Incentive Auction<br>Closing Notice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                               |                                                                       |                |          |                               |                                                                                                |                |          |
| <b>Amount:</b>                              | \$250.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                               |                                                                       |                |          |                               |                                                                                                |                |          |
| <b>Component Description:</b>               | Tel call from FCC,<br>Review KMCT<br>Form 1876, Memos<br>to client, Review<br>FCC notice, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                               |                                                                       |                |          |                               |                                                                                                |                |          |
| <b>Amount:</b>                              | \$225.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                               |                                                                       |                |          |                               |                                                                                                |                |          |

## 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>\$23,750.00</b>          | <b>\$14,700.00</b> |                                                                                 | <b>\$6,986.00</b> |                           |
| Attorney Fees - Other                                   | <i>\$1,000.00</i>           | \$1,000.00         | Please see the attached invoice #33303 from Hardy, Carey, Chautin & Balkin, LLP | \$0.00            | N/A                       |
| Station Coordination                                    | <i>\$2,500.00</i>           | \$2,500.00         | N/A                                                                             | \$2,500.00        | N/A                       |
| MVPD Notification of Channel Change                     | <i>\$2,500.00</i>           | \$2,500.00         | N/A                                                                             | \$2,000.00        | N/A                       |
| Develop and air announcement of upcoming channel change | <i>\$2,500.00</i>           | \$2,500.00         | N/A                                                                             | \$212.50          | N/A                       |
| Equipment Storage                                       | <i>\$1,200.00</i>           | \$1,200.00         | N/A                                                                             | \$0.00            | N/A                       |
| Equipment Delivery and Handling Charges                 | <i>\$2,500.00</i>           | \$2,500.00         | N/A                                                                             | \$0.00            | N/A                       |
| DTV Medical Facility Notification                       | \$11,550.00                 | \$2,500.00         | N/A                                                                             | \$2,273.50        | N/A                       |
| <b>Sub-total</b>                                        | <b>\$23,750.00</b>          | <b>\$14,700.00</b> | N/A                                                                             | <b>\$6,986.00</b> | N/A                       |

|                              |              |              |     |              |     |
|------------------------------|--------------|--------------|-----|--------------|-----|
| <b>Total for all systems</b> | \$564,351.97 | \$484,616.76 | N/A | \$408,959.69 | N/A |
|------------------------------|--------------|--------------|-----|--------------|-----|

## Components

| <b>Actual Information</b>                               |                                                                                                                                                                                                        |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Description</b>                                      | <b>File Name</b>                                                                                                                                                                                       |
| Attorney Fees - Other                                   | Information not provided.                                                                                                                                                                              |
| Station Coordination                                    | <b>Component Description:</b> Capital Contribution<br><b>Amount:</b> \$2,500.00                                                                                                                        |
| MVPD Notification of Channel Change                     | <b>Component Description:</b> MVPD Notification<br><b>Amount:</b> \$2,000.00                                                                                                                           |
| Develop and air announcement of upcoming channel change | <b>Component Description:</b> Memo to Ken A. and Darryl M.<br><b>Amount:</b> \$75.00<br><br><b>Component Description:</b> Attorney - Construction Permit Application (Main)<br><b>Amount:</b> \$137.50 |
| Equipment Storage                                       | Information not provided.                                                                                                                                                                              |
| Equipment Delivery and Handling Charges                 | Information not provided.                                                                                                                                                                              |

|                                      |                               |                                                    |
|--------------------------------------|-------------------------------|----------------------------------------------------|
| DTV Medical Facility<br>Notification |                               |                                                    |
|                                      | <b>Component Description:</b> | KMCT-TV Medical<br>Notification                    |
|                                      | <b>Amount:</b>                | \$2,091.00                                         |
|                                      |                               |                                                    |
|                                      | <b>Component Description:</b> | Develop and Air<br>Channel Change<br>Announcements |
|                                      | <b>Amount:</b>                | \$82.50                                            |
|                                      |                               |                                                    |
|                                      | <b>Component Description:</b> | Medical Facility<br>Notification                   |
|                                      | <b>Amount:</b>                | \$100.00                                           |

|                  |                       |                             |                |
|------------------|-----------------------|-----------------------------|----------------|
| Cost Information | Grand Total           |                             |                |
|                  |                       | Predetermined Cost Estimate | Estimated Cost |
|                  |                       |                             | Actual Cost    |
|                  | Total for all systems | \$564,351.97                | \$484,616.76   |
|                  |                       |                             | \$408,959.69   |

|                      |                                                                                                                                                                                                                    |          |
|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| Reimbursement Status | Question                                                                                                                                                                                                           | Response |
|                      | The facility has ceased operating on its pre-auction channel.                                                                                                                                                      | Yes      |
|                      | 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"> <li>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>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.

|                                                                                                                                                                                                                                   |                                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| <p>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.</p> |                                                                        |
| <p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>                                                                         | <p><b>Tom Fawbush</b><br/><i>General Manager</i></p> <p>08/24/2020</p> |



| Certification | Section                                            | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Response |
|---------------|----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
|               | Submission of Actual Cost Documentation Statements | <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.

|                                                                                                                                                                                                                                                                                                                                                                    |                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| <p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>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.</p> |                                                    |
| <p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>                                                                                                                                                                                                          | <p><b>Tom Fawbush</b><br/>GM</p> <p>08/24/2020</p> |

## Attachments