



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **146** | Service: **DTV** | Call **WXIN** | Channel: **22 (UHF)**  
ID: | Sign:  
File **0000028154**  
Number:  
FRN: **0005047105** | Date **07/30**  
Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>TRIBUNE BROADCASTING INDIANAPOLIS, LLC</b>	Steve Zanolini 6910 NETWORK PLACE INDIANAPOLIS, IN 46278 United States	+1 (317) 687-6566	szanolini@tribunemedia.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>Bill Vanduyhoven , Vnduyhov .</b> <i>Sr Director of Engineering RF Systems Nexstar Broadcasting</i>	Bill Vanduyhoven 2211 Rabbit Hill Cir Dacula, GA 30019 United States	+1 (404) 312-8693	bvanduyhoven@nexstar.tv

**Broadcaster Information and Transition Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	Yes
Briefly describe transition plan	Replace Antenna Line and Combiner Replace transmitters

Question	Response
Sharee Station Facility ID	56526
Call Sign	WTTK
Type	Commercial
Licensee Name	Tribune Media Company
Status	LICENSED
DTS (Distributed Transmission System)	No
Community of License	KOKOMO, IN
Pre-auction RF Channel	15
Post-auction RF Channel	15
Neilsen DMA	Indianapolis
Network Affiliation	

**Transmitters**

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

**Auxiliary  
Transmitter****Add Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	BAckup
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	Invator HX HU5000BD
	Year	2010
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	5 kW

**Auxiliary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	UAXTE-8
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	4.5 kW
	Justification for New Transmitter	Manufacturer of existing Axcera has not responded to requests. See justification

**Auxiliary  
Transmitter**

**Other Transmitter Costs**

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

	Description	100 Amp 208 feed from existing
<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

**Auxiliary Transmitter** **Other Transmitter Cost Not Listed**  
Information not provided.

**Primary  
Transmitter**

**Existing Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCX-2
	Year	2001
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	50 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	ULXTE-60
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	38 kW
	Justification for New Transmitter	Current transmitter is not re-tunable as stated by the manufacturer

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	200.0 feet
	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**

Name	Description
Site survey	Site survey



**Antennas**

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

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Broadband Panel
	Number of Stations Supported	2
	Number of Panels	12
	Design power capacity in use	90.0 %
	Lower Limit	470.00 MHz
	Upper Limit	659.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	1500.0 kW

Manufacturer	
Model	TUM20-04-12/48H-1-R-T
Year	2005

**Facility ID's and Call Signs of all stations with whom the antenna is shared.**

Facility ID	Call Sign
56526	WTTK

**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	Yes
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Types</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	Polarization	Elliptical
	Type	Broadband Panel
	Number of Stations Supported	2
	Number of Panels/Bays	20
	Lower Limit	470.00 MHz
	Upper Limit	525.00 MHz
	Design power capacity in use	80.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	1500.0 kW
Manufacturer		

Model	TUM20-04-12/48H-1-R-T
Year	2019
Justification for New Antenna	Current Antenna will not work on the new assigned channels for WXIN and WTTK

**Primary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	Yes
	Type	New
	Number of channels supported	2
	Frequencies of channels supported	RF channel
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	No
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Broadband
	Feed Line Size	8 3/16 inches inches
<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
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**Enter a list of RF channel numbers.**

<b>RF Channel Number</b>
15
22

**Primary Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	Yes
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	2
	Number of Panels/Bays	16
	Lower Limit	470.00 MHz
	Upper Limit	660.00 MHz
	Design power capacity in use	80.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	900.0 kW
	Manufacturer	
	Model	TFU-WB16
Year	2019	

Justification for New Antenna	Antenna to operate on during construction and transition for 2 stations.
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**Interim 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?	Yes
	Broadband or Single Channel?	S
	Feed Line Size	6 1/8 inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an antenna?	Yes
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Interim Antenna**

**Other Antenna Cost Not Listed**

Information not provided.



**Transmission  
Line**

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

**Primary  
Transmission  
Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1100 feet per run

**Facility ID's and Call Signs of all stations with whom the transmission line is shared.**

Facility ID	Call Sign
56526	WTTK

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

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1100 feet per run
	Justification for New Transmission Line	Current section length will not work with assigned channels

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

Information not provided.

**Interim  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Rigid
	Diameter	6 1/8 inches
	Segment Length	Broadband
	Other Segment Length	
	Number of parallel runs	1
	Length	800 feet per run
	Justification for New Transmission Line	Transmission line to feed interim antenna for 2 stations

**Interim  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

Information not provided.

**Tower Equipment And Rigging Costs**

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

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Yes
Existing Tower Structure Registration	Is tower compliant with Rev G?	No
	Do you have a tower registration number?	Yes
Coordinates (NAD83 ( North American Datum of 1983))	ASR Number	1030684
	Latitude (NAD83)	39° 53' 20.0" N-
	Longitude (NAD83)	086° 12' 07.0" W-
	Overall Structure Height	1040.01 feet
	Support Structure Height	979.97 feet
	Ground Elevation Above Mean Sea Level (AMSL)	810.03 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Tribune Broadcasting Indianapolis, LLC
Date Constructed	01/01/1984

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

Facility ID	Call Sign	Service
56526	WTTK	DTV

**Primary  
Tower**

**Tower Modification Costs**

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

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
<b>Tower Rigging Costs</b>	Complex Tower	N/A
<b>Helicopter Services Required</b>	Are helicopter services required?	Yes

**Primary  
Tower**

**Other Tower Expenses Not Listed**

Information not provided.

**Outside Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	No
	Number of Hours	N/A
	Explanation	N/A
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
	<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application
For Auxiliary Facility		N/A
For Main Facility		N/A
Prepare and file Form FCC License to Cover Application		No
For Auxiliary Facility		N/A
For Main Facility		N/A



	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	No
	Address transition timing and coordination issues w/ other stations and wireless providers	No
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

**Outside Professional Services Costs**      **Other Professional Services Expenses Not Listed**  
Information not provided.

**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)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

Name	Description
Taxes	Indiana State Taxes

**Cost Information**

**Transmitters**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmitter ULXTE-60</b>	<b>\$1,536,094.38</b>	<b>\$1,280,294.38</b>		<b>\$919,273.19</b>	
Site survey	<i>\$5,294.38</i>	\$5,294.38	N/A	\$5,294.38	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$5,000.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,220,000.00	N/A	\$913,978.81	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A	N/A	N/A
<b>Auxiliary Transmitter UAXTE-8</b>	<b>\$241,500.00</b>	<b>\$140,000.00</b>		<b>\$131,193.27</b>	
Other Electrical Service: 100 Amp 208 feed from existing	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A

UHF - Air Cooled Solid State Transmitter 4 - 6 kW	\$236,500.00	\$135,000.00	N/A	\$131,193.27	N/A
<b>Sub-total</b>	\$1,777,594.38	\$1,420,294.38	N/A	\$1,050,466.46	N/A
<b>Total for all systems</b>	\$4,783,034.38	\$3,734,917.60	N/A	\$2,245,511.42	N/A

## Components

Actual Information	
Description	File Name
Site survey	<p><b>Component Description:</b> Site survey</p> <p><b>Amount:</b> \$5,294.38</p>
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.
Switchgear - industrial 800 amp	Information not provided.

UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	<p><b>Component Description:</b> payment ULXTE-60</p> <p><b>Amount:</b> \$61,668.00</p>
	<p><b>Component Description:</b> 3rd payment - ULXTE-60</p> <p><b>Amount:</b> \$269,603.37</p>
	<p><b>Component Description:</b> 2nd payment for ULXTE-60 transmitter</p> <p><b>Amount:</b> \$291,353.72</p>
	<p><b>Component Description:</b> deposit for primary transmitter</p> <p><b>Amount:</b> \$291,353.72</p>
Service entrance 3 phase /800 amp/208 volt	Information not provided.
Other Electrical Service: 100 Amp 208 feed from existing	Information not provided.
UHF - Air Cooled Solid State Transmitter 4 - 6 kW	<p><b>Component Description:</b> payment UAXTE-8</p> <p><b>Amount:</b> \$14,877.70</p> <p><b>Component Description:</b> UAXTE-8 Transmitter</p> <p><b>Amount:</b> \$116,315.57</p>

**Cost Information**

**Antennas**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Antenna TFU-WB16</b>	<b>\$144,180.00</b>	<b>\$120,980.50</b>		<b>\$114,665.50</b>	
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$0.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$6,400.00	N/A
UHF - High Power, Side Mount, basic slot antenna, 16 bay,, 900 kW input, directional,, horizontally polarized	<i>\$102,000.00</i>	\$102,000.00	N/A	\$97,492.50	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$12,580.50	N/A	\$10,773.00	N/A

<b>Primary Antenna TUM20-04-12/48H-1-R-T</b>	<b>\$877,880.00</b>	<b>\$574,629.72</b>		<b>\$297,759.72</b>	
Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	\$18,950.00	\$16,650.00	N/A	\$8,325.00	N/A
New combiner, cost per channel (without antenna)	\$84,200.00	\$51,429.72	N/A	\$51,429.72	N/A
Sweep test of existing antenna	\$6,730.00	\$6,550.00	N/A	\$2,880.00	N/A
UHF - High Power Top Mount (200-1000 kW), Two Station broadband panel antenna, elliptically or circularly polarized	\$768,000.00	\$500,000.00	N/A	\$235,125.00	N/A
<b>Sub-total</b>	<b>\$1,022,060.00</b>	<b>\$695,610.22</b>	<b>N/A</b>	<b>\$412,425.22</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$4,783,034.38</b>	<b>\$3,734,917.60</b>	<b>N/A</b>	<b>\$2,245,511.42</b>	<b>N/A</b>

## Components

**Actual Information**  
**Description**

**File Name**



Side mount brackets for high power antennas (if not included in antenna base cost)	Information not provided.																				
Sweep test of existing antenna	<table> <tr> <td data-bbox="703 371 1015 405"><b>Component Description:</b></td> <td data-bbox="1145 371 1318 443">2nd payment - sweep test</td> </tr> <tr> <td data-bbox="703 450 818 483"><b>Amount:</b></td> <td data-bbox="1145 450 1270 483">\$2,880.00</td> </tr> <tr> <td data-bbox="703 591 1015 624"><b>Component Description:</b></td> <td data-bbox="1145 591 1318 663">2nd payment - sweep test</td> </tr> <tr> <td data-bbox="703 669 818 703"><b>Amount:</b></td> <td data-bbox="1145 669 1270 703">\$2,880.00</td> </tr> <tr> <td data-bbox="703 810 1015 844"><b>Component Description:</b></td> <td data-bbox="1145 810 1318 882">1st payment - sweep test</td> </tr> <tr> <td data-bbox="703 889 818 922"><b>Amount:</b></td> <td data-bbox="1145 889 1270 922">\$2,880.00</td> </tr> <tr> <td data-bbox="703 1030 1015 1064"><b>Component Description:</b></td> <td data-bbox="1145 1030 1337 1102">last 10% for this component</td> </tr> <tr> <td data-bbox="703 1108 818 1142"><b>Amount:</b></td> <td data-bbox="1145 1108 1246 1142">\$640.00</td> </tr> <tr> <td data-bbox="703 1249 1015 1283"><b>Component Description:</b></td> <td data-bbox="1145 1249 1318 1321">1st payment - sweep test</td> </tr> <tr> <td data-bbox="703 1328 818 1361"><b>Amount:</b></td> <td data-bbox="1145 1328 1270 1361">\$2,880.00</td> </tr> </table>	<b>Component Description:</b>	2nd payment - sweep test	<b>Amount:</b>	\$2,880.00	<b>Component Description:</b>	2nd payment - sweep test	<b>Amount:</b>	\$2,880.00	<b>Component Description:</b>	1st payment - sweep test	<b>Amount:</b>	\$2,880.00	<b>Component Description:</b>	last 10% for this component	<b>Amount:</b>	\$640.00	<b>Component Description:</b>	1st payment - sweep test	<b>Amount:</b>	\$2,880.00
<b>Component Description:</b>	2nd payment - sweep test																				
<b>Amount:</b>	\$2,880.00																				
<b>Component Description:</b>	2nd payment - sweep test																				
<b>Amount:</b>	\$2,880.00																				
<b>Component Description:</b>	1st payment - sweep test																				
<b>Amount:</b>	\$2,880.00																				
<b>Component Description:</b>	last 10% for this component																				
<b>Amount:</b>	\$640.00																				
<b>Component Description:</b>	1st payment - sweep test																				
<b>Amount:</b>	\$2,880.00																				

UHF - High Power, Side Mount, basic slot antenna, 16 bay,, 900 kW input, directional,, horizontally polarized

**Component Description:** 1st payment - TFU16WB-1-R Antenna  
**Amount:** \$45,866.25

**Component Description:** putting the dollars here because the last 10% of this component was on a zero balance invoice.  
**Amount:** \$5,760.00

**Component Description:** 2nd payment - TFU16WB-1-R  
**Amount:** \$45,866.25

**Component Description:** 2nd payment - TFU16WB-1-R  
**Amount:** \$45,866.25

**Component Description:** 1st payment - TFU16WB-1-R Antenna  
**Amount:** \$45,866.25

<p>Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)</p>	<p><b>Component Description:</b> 2nd payment - elbow complex  <b>Amount:</b> \$5,386.50</p>
	<p><b>Component Description:</b> 1st payment - elbow complex  <b>Amount:</b> \$5,386.50</p>
	<p><b>Component Description:</b> 2nd payment - elbow complex  <b>Amount:</b> \$5,386.50</p>
	<p><b>Component Description:</b> 1st payment - elbow complex  <b>Amount:</b> \$5,386.50</p>
<p>Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)</p>	<p><b>Component Description:</b> Elbow complex - 2nd payment  <b>Amount:</b> \$3,746.25</p>
	<p><b>Component Description:</b> last 10% of elbow complex  <b>Amount:</b> \$832.50</p>
	<p><b>Component Description:</b> Elbow complex - 1st payment  <b>Amount:</b> \$3,746.25</p>
<p>New combiner, cost per channel (without antenna)</p>	<p><b>Component Description:</b> combiner  <b>Amount:</b> \$10,284.87</p>
	<p><b>Component Description:</b> combiner - shared cost with WTTK  <b>Amount:</b> \$41,144.85</p>

Sweep test of existing antenna	<b>Component Description:</b>	Sweep Test 2nd payment
	<b>Amount:</b>	\$1,440.00
	<b>Component Description:</b>	Sweep test - 1st payment
	<b>Amount:</b>	\$1,440.00
UHF - High Power Top Mount (200-1000 kW), Two Station broadband panel antenna, elliptically or circularly polarized	<b>Component Description:</b>	ELLIPTICALLY POLARIZED TUM20-O4-12/48H-1-R-T PANEL ANTENNA - 1st payment
	<b>Amount:</b>	\$105,806.25
	<b>Component Description:</b>	ELLIPTICALLY POLARIZED TUM20-O4-12/48H-1-R-T PANEL ANTENNA
	<b>Amount:</b>	\$105,806.25
	<b>Component Description:</b>	Antenna TUM20-04-12/48H-1-R-T Panel Antenna
	<b>Amount:</b>	\$23,512.50
	<b>Component Description:</b>	ceiling hanger kit - 50% of this invoice was paid by WTTK
	<b>Amount:</b>	N/A
	<b>Component Description:</b>	ceiling hanger kit - 50% of this invoice was paid by WTTK
	<b>Amount:</b>	N/A

**Cost Information**

**Transmission Line**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Transmission Line</b>	<b>\$185,600.00</b>	<b>\$150,000.00</b>		<b>\$147,651.92</b>	
Rigid Transmission Line - copper, 6 1/8" broadband	\$185,600.00	\$150,000.00	N/A	\$147,651.92	N/A
<b>Primary Transmission Line</b>	<b>\$381,700.00</b>	<b>\$260,000.00</b>		<b>\$123,117.51</b>	
Rigid Transmission Line - copper, 8 3/16"	\$381,700.00	\$260,000.00	N/A	\$123,117.51	N/A
<b>Sub-total</b>	<b>\$567,300.00</b>	<b>\$410,000.00</b>	<b>N/A</b>	<b>\$270,769.43</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$4,783,034.38</b>	<b>\$3,734,917.60</b>	<b>N/A</b>	<b>\$2,245,511.42</b>	<b>N/A</b>

**Components**

Actual Information	
Description	File Name
Rigid Transmission Line - copper, 6 1/8" broadband	<b>Component Description:</b>
	<b>Amount:</b>
	<b>Component Description:</b>
	<b>Amount:</b>

TLSCR's rounded down

\$2,319.97

1st payment - transmission line

\$64,951.74

**Component Description:** 2nd payment -  
transmission line  
**Amount:** \$64,951.74

**Component Description:** TLSCR's rounded  
down  
**Amount:** \$2,319.97

**Component Description:** Cut pieces  
**Amount:** \$1,807.50

**Component Description:** Cut pieces  
**Amount:** \$6,145.50

**Component Description:** 2nd payment -  
TLSCR'S  
**Amount:** \$2,319.98

**Component Description:** 2nd payment -  
transmission line  
**Amount:** \$64,954.74

**Component Description:** 1st payment -  
TLSCR'S  
**Amount:** \$2,319.98

**Component Description:** 1st payment -  
transmission line  
**Amount:** \$64,951.74

**Component Description:** CUT PIECES  
**Amount:** \$5,155.50

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Rigid Transmission Line -  
copper, 8 3/16"

**Component Description:** monies applied to  
this category from  
elbow complex  
**Amount:** \$3,835.61

**Component Description:** TLSCR'S TBD T/L  
8-75 EIA LENGTH  
15' TO 20' - 1st  
payment  
**Amount:** \$2,801.25

**Component Description:** hangers - 50% of  
this invoice was  
paid by WTTK  
**Amount:** \$163.20

**Component Description:** 8-3/16" 75 OHM  
EIA transmission  
line - 1st payment  
**Amount:** \$55,431.50

**Component Description:** Transmission line  
8-3/16" 75 OHM -  
2nd payment  
**Amount:** \$55,431.50

**Component Description:** cut pieces and  
hangers - 50% of  
this invoice was  
paid by WTTK  
**Amount:** \$2,653.20

**Component Description:** TLSCR'S TBD T/L  
8-75 EIA LENGTH  
15' TO 20' - 2nd  
payment  
**Amount:** \$2,801.25

**Cost Information**

**Tower Equipment and Rigging Costs**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Tower TOWER</b>	<b>\$1,275,100.00</b>	<b>\$1,080,513.00</b>		<b>\$432,256.50</b>	
Tower Helicopter Lift	<i>\$0.00</i>	\$0.00	Included in Rigging costs	N/A	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$204,000.00	Based on attached Quote split with WTTK	N/A	N/A
Serious tower reinforcement /modifications	\$1,052,000.00	\$864,513.00	Based on attached Quote split with WTTK	\$432,256.50	N/A
<b>Sub-total</b>	<b>\$1,275,100.00</b>	<b>\$1,080,513.00</b>	N/A	<b>\$432,256.50</b>	N/A
<b>Total for all systems</b>	<b>\$4,783,034.38</b>	<b>\$3,734,917.60</b>	N/A	<b>\$2,245,511.42</b>	N/A

**Components**

Actual Information	
Description	File Name
Tower Helicopter Lift	Information not provided.
Structural engineering tower load study for well documented tower	Information not provided.



Tall Tower (greater than 500')	Information not provided.																
Serious tower reinforcement /modifications	<table> <tr> <td data-bbox="708 286 1157 322"><b>Component Description:</b></td> <td data-bbox="1157 286 1428 322">rigging costs</td> </tr> <tr> <td data-bbox="708 322 1157 358"><b>Amount:</b></td> <td data-bbox="1157 322 1428 358">\$125,771.10</td> </tr> <tr> <td data-bbox="708 465 1157 501"><b>Component Description:</b></td> <td data-bbox="1157 465 1428 501">change order</td> </tr> <tr> <td data-bbox="708 501 1157 537"><b>Amount:</b></td> <td data-bbox="1157 501 1428 537">\$13,019.50</td> </tr> <tr> <td data-bbox="708 645 1157 680"><b>Component Description:</b></td> <td data-bbox="1157 645 1428 680">last payment</td> </tr> <tr> <td data-bbox="708 680 1157 716"><b>Amount:</b></td> <td data-bbox="1157 680 1428 716">\$41,923.70</td> </tr> <tr> <td data-bbox="708 824 1157 860"><b>Component Description:</b></td> <td data-bbox="1157 824 1428 896">amount due upon crew arrival</td> </tr> <tr> <td data-bbox="708 896 1157 931"><b>Amount:</b></td> <td data-bbox="1157 896 1428 931">\$251,542.20</td> </tr> </table>	<b>Component Description:</b>	rigging costs	<b>Amount:</b>	\$125,771.10	<b>Component Description:</b>	change order	<b>Amount:</b>	\$13,019.50	<b>Component Description:</b>	last payment	<b>Amount:</b>	\$41,923.70	<b>Component Description:</b>	amount due upon crew arrival	<b>Amount:</b>	\$251,542.20
<b>Component Description:</b>	rigging costs																
<b>Amount:</b>	\$125,771.10																
<b>Component Description:</b>	change order																
<b>Amount:</b>	\$13,019.50																
<b>Component Description:</b>	last payment																
<b>Amount:</b>	\$41,923.70																
<b>Component Description:</b>	amount due upon crew arrival																
<b>Amount:</b>	\$251,542.20																

**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>\$40,930.00</b>	<b>\$29,000.00</b>		<b>\$0.00</b>	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$11,000.00	N/A	N/A	N/A

Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$40,930.00	\$29,000.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$4,783,034.38	\$3,734,917.60	N/A	\$2,245,511.42	N/A

## Components

Information not provided.

**Cost Information**

**Other Expenses**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$100,050.00</b>	<b>\$99,500.00</b>		<b>\$79,593.81</b>	
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$28,500.00</i>	\$28,500.00	N/A	\$28,437.50	N/A
Taxes	<i>\$10,000.00</i>	\$10,000.00	N/A	\$9,346.09	N/A
MVPD Notification of Channel Change	<i>\$11,000.00</i>	\$11,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$0.00</i>	\$0.00	N/A	N/A	N/A
Equipment Storage	<i>\$10,500.00</i>	\$10,500.00	N/A	\$10,190.00	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$3,275.00	N/A
Equipment Delivery and Handling Charges	<i>\$28,500.00</i>	\$28,500.00	N/A	\$28,345.22	N/A
<b>Sub-total</b>	<b>\$100,050.00</b>	<b>\$99,500.00</b>	<b>N/A</b>	<b>\$79,593.81</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$4,783,034.38</b>	<b>\$3,734,917.60</b>	<b>N/A</b>	<b>\$2,245,511.42</b>	<b>N/A</b>

## Components

Actual Information		
Description	File Name	
Disposal Costs (for equipment and other waste, net of any salvage value)	<b>Component Description:</b> Equipment disposal - Split 50 /50 with WTTK <b>Amount:</b> \$14,218.75	
	<b>Component Description:</b> Equipment disposal - Split 50 /50 with WTTK <b>Amount:</b> \$11,375.00	
	<b>Component Description:</b> Equipment disposal - Split 50 /50 with WTTK <b>Amount:</b> \$2,843.75	
	<hr/>	
	Taxes	<b>Component Description:</b> State Taxes <b>Amount:</b> \$8,610.78
		<b>Component Description:</b> Indiana State Taxes <b>Amount:</b> \$178.59
<b>Component Description:</b> Indiana State Taxes <b>Amount:</b> \$430.19		
<b>Component Description:</b> Indiana State Taxes <b>Amount:</b> \$126.53		
MVPD Notification of Channel Change	Information not provided.	

Develop and air announcement of upcoming channel change	Information not provided.	
Equipment Storage	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Storage Fee</p> <p>\$3,295.00</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>50% of storage costs will be paid by WTTK</p> <p>\$5,247.50</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>50% of storage costs will be paid by WTTK</p> <p>\$1,647.50</p>
DTV Medical Facility Notification	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>medical testing</p> <p>\$3,275.00</p>
Equipment Delivery and Handling Charges	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Freight</p> <p>\$4,539.72</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Freight and Shipping - other 50% will be paid by WTTK</p> <p>\$788.99</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Freight and Shipping</p> <p>\$6,279.58</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Freight and Shipping</p> <p>\$2,551.35</p>

**Component Description:** Freight and Shipping  
**Amount:** \$2,682.97

**Component Description:** Freight and Shipping - other  
50% will be paid by WTTK  
**Amount:** \$1,609.62

**Component Description:** Freight and Shipping - other  
50% will be paid by WTTK  
**Amount:** \$4,279.24

**Component Description:** Freight and Shipping  
**Amount:** \$3,742.50

**Component Description:** Freight and Shipping - other  
50% will be paid by WTTK  
**Amount:** \$1,871.25

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

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$4,783,034.38	\$3,734,917.60	\$2,245,511.42

**Reimbursement Status**

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



Certification	Section	Question	Response
	<p><b>Submission of Estimated Expenses Statements</b></p>	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p> <ol style="list-style-type: none"> <li data-bbox="746 779 1038 1167">1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li data-bbox="746 1196 1023 1435">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li data-bbox="746 1464 1034 1749">3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.</li> </ol>	

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

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

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

**Teri Ann  
Guillory**  
*Broadcasting  
Operations*

07/30/2020

Certification	Section	Question	Response
	<b>Submission of Actual Cost Documentation Statements</b>	<p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p>	
		<ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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

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

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

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

**Teri Ann  
Guillory**  
*Broadcasting  
Operations*

07/30/2020

## Attachments