Approved by OMB (Office of Management and Budget) 3060-0386
July 2002

Federal Communications Commission

(REFERENCE COPY - Not for submission)

Digital Class A Engineering STA Application

File Number: **0000028894** | Submit Date: **07/13/2017** | Call Sign: **KHMF-CA** | Facility ID: **52420** | FRN: **0019028406**
State: **Arkansas** | City: **BENTONVILLE**
Service: **DCA** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **07/19/2017** | Expiration Date:
Filing Status: **InActive**

General Information

Section	Question	Response

Fees, Waivers, and Exemptions

Section	Question	Response
Fees	Is the applicant exempt from FCC application Fees?	No
	Indicate reason for fee exemption:	
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	Total number of rule sections involved in this waiver request:	

Application Type	Fee Code	Fee Amount
Engineering STA	MGT	$190.00
	Total	**$190.00**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
KMYA, LLC **Applicant** Doing Business As: KMYA, LLC	Larry Morton 17200 Chenal Parkway Suite 300-267 Little Rock, AR 72223 United States	+1 (501) 476-1507	EQUITYLEM@GMAIL.COM	Other

Authorization Holder Name

☐ Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact Representatives (2)

Contact Name	Address	Phone	Email	Contact Type
JIM MCPHETRIDGE **MCPHETRIDGE** WES Broadcasting	Jim McPhetridge 228 FLYNN DRIVE EL PASO, TX 79932 United States	+1 (915) 892-2775	JMCPHETRIDGE@SBCGLOBAL.NET	Technical Representative
LARRY Morton *President* KMYA, LLC	Larry Morton PO Box 23808 LITTLE ROCK, AR 72221 United States	+1 (501) 476-1507	EQUITYLEM@GMAIL.COM	Owner's Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	52420
	State	Arkansas
	City	BENTONVILLE
	DCA Channel	35
	Designated Market Area	Ft. Smith-Fay-Sprngdl-Rgrs

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1037677
Coordinates (NAD83)	Latitude	36° 23' 37.0" N+
	Longitude	094° 10' 58.0" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	96.0 meters
	Support Structure Height	94.5 meters
	Ground Elevation (AMSL)	384.1 meters
Antenna Data	Height of Radiation Center Above Ground Level	92 meters
	Height of Radiation Center Above Mean Sea Level	476.1 meters
	Effective Radiated Power	6.28 kW

Antenna Technical Data

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1001898
Antenna Manufacturer and Model	Manufacturer:	Kathrein
	Model	723147 x 2
	Rotation	0 degrees
	Electrical Beam Tilt	Not Applicable
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
Elevation Radiation Pattern	Does the proposed antenna propose elevation radiation patterns that vary with azimuth for reasons other than the use of mechanical beam tilt?	No
	Uploaded file for elevation antenna (or radiation) pattern data	
	Out-of-Channel Emission Mask:	Full Service

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	0.213	**90**	0.799	**180**	0.830	**270**	0.001
10	0.325	**100**	0.873	**190**	0.669	**280**	0.001
20	0.457	**110**	0.978	**200**	0.515	**290**	0.001
30	0.605	**120**	0.915	**210**	0.375	**300**	0.001
40	0.769	**130**	0.810	**220**	0.259	**310**	0.001
50	0.911	**140**	0.829	**230**	0.143	**320**	0.001
60	0.987	**150**	0.949	**240**	0.043	**330**	0.001
70	0.981	**160**	0.995	**250**	0.005	**340**	0.019
80	0.439	**170**	0.951	**260**	0.001	**350**	0.100

Additional Azimuths

Degree	V_A
62	1.0
162	1.0

Certification

Section	Question	Response
General Certification Statements	The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).	
	The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR §1.2002(b), for the definition of "party to the application" as used in this certification §1.2002 (c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
Authorized Party to Sign	**FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID** Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503).	
	I certify that this application includes all required and relevant attachments.	Yes
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	**Larry Morton Morton** *Manager* 07/13/2017

Attachments

File Name	Uploaded By	Attachment Type	Description
28894.pdf	Internal	All Purpose	
Extraordinary Circumstance for KHMF Ch 35 Bentonville, AR.pdf	Applicant	General Information	Extraordinary Circumstance for KHMF Ch 35