

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

| Facility ID: File Number: | 74137 000002 | Service: DTV 8806 | Call Sign: | WTTE | Channel: 27 (UHF) |
|------------------------------------|-----------------|-----------------------------|----------------|------|--------------------------|
| FRN: 000 | 3778925 | Date Submitted: | 08/31 /2017 | | |

Applicant Name, Type, and Contact Information

Applicant Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|--|-----------------------------|---------------------------------------|-------------------|
| COLUMBUS (WTTE-TV) LICENSEE, INC. Doing Business As: COLUMBUS (WTTE-TV) LICENSEE, INC. | Lisa Asher 2000 WEST 41ST STREET BALTIMORE, MD 21211 United States | +1 (410) 662- 9688 | LAsher@cunninghambroadcasting. com | Corporation |

Reimbursement Contact Name and Information Reimbursement Contact Information

| Applicant | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] | | | |

Preparer Preparer Contact Name and Information

| Contact Information | Applicant | Address | Phone | Email |
|------------------------|---|---|-----------------------|--------------------------------|
| | Paul A. Cicelski , Esq . Lerman Senter PLLC | 2001 L Street NW Suite 400 Washington, DC 20036 United States | +1 (202) 416- 6756 | pcicelski@lermansenter. com |

| Broadcaster | Question | Response |
|--|--|----------------|
| Information and Transition Plan | 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 | See Exhibit A. |

| Transmitters | Section | Question | Response |
|--------------|---------------------------------|---|----------|
| | Transmitter Related Expenses | Do you have transmitter related expenses? | Yes |

| Primary | Existing Transmitter Information | | | | | |
|-------------|-------------------------------------|--|--------------------------|--|--|--|
| Transmitter | 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 | | | | |
| | Manufacturer and Type | Model | Quantum QDCN2 | | | |
| | | Year | 2002 | | | |
| | | Туре | Inductive Output Tube | | | |
| | | IOT Power Type | Two | | | |
| | | Power Capacity | 60 kW | | | |

Existing Transmitter Information

| Primary | New Transmitter Costs | | | | | |
|-------------|-----------------------|---|---|--|--|--|
| Transmitter | Section | Question | Response | | | |
| | New Transmitter | Use | Primary (Main) | | | |
| | | Change Type | Purchase New | | | |
| | | Is this a request for upgraded equipment? | Yes | | | |
| | | Manufacturer | | | | |
| | | Model | ULXTE-72 | | | |
| | | Transmitter Type | Solid State | | | |
| | | Solid State Cooling | Liquid Cooled | | | |
| | | Solid State Power capacity | 43.5 kW | | | |
| | | Justification for New Transmitter | Per the manufacturer, the current transmitter cannot be retuned. See Exhibit B. | | | |

| Primary | Other Transmitter Costs | | | | | |
|-------------|-------------------------|---------------------------------------|------------|--|--|--|
| Transmitter | Section | Question | Response | | | |
| | Electrical Service | Service Entrance (3 phases 800A 208V) | No | | | |
| | | Switchgear (industrial 800 amp) | Yes | | | |
| | | Transformer (480V) | Yes | | | |
| | | Power | 300 kVA | | | |
| | | Rigid Conduit and Wiring | Yes | | | |
| | | Size | 2 inches | | | |
| | | Length | 800.0 feet | | | |
| | | Other Electrical Service | No | | | |
| | | | | | | |

| | Description | N/A |
|---|--|-----|
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Туре | N/A |
| | Size | N/A |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leashold improvement? | No |
| | Size | N/A |
| Channel 14 Costs | Is an RF Consulting Engineer needed? | N/A |
| | Is a channel 14 Mask Filer needed? | N/A |
| | Is additional field engineering time needed? | N/A |
| | Number of Days | N/A |

Other Transmitter Cost Not Listed

Primary Other Transmitter Co Transmitter Information not provided.

| Antennas Section | | Question | Response |
|------------------|---------------|---------------------------------------|----------|
| Antenna Rela | ated Expenses | Do you have antenna related expenses? | Yes |

| Primary | Existing Antenna Information | | | | | |
|---------|---------------------------------|--|--------------------|--|--|--|
| Antenna | Section | Question | Response | | | |
| | Existing Antenna Description | Type of change | Purchase New | | | |
| | | Antenna Use | Primary (Main) | | | |
| | | Description of Use | N/A | | | |
| | | Ownership | Owned | | | |
| | | Owner | N/A | | | |
| | | Site | N/A | | | |
| | | Is the existing antenna shared with another station or stations? | No | | | |
| | | Is the existing antenna directional? | No | | | |
| | | Is antenna in operating condition? | Yes | | | |
| | | Is antenna located on or in close proximity to an antenna farm? | No | | | |
| | Existing Antenna | Class | Full Power | | | |
| | Manufacturer and Type | Mounting | Top Mount | | | |
| | | Antenna position in stack | Bottom | | | |
| | | Polarization | Horizontal | | | |
| | | Туре | Slotted Coaxial | | | |
| | | Number of Stations Supported | N/A | | | |
| | | Number of Panels | N/A | | | |
| | | Design power capacity in use | N/A | | | |
| | | Lower Limit | N/A | | | |
| | | Upper Limit | N/A | | | |
| | | Other Antenna Type | N/A | | | |
| | | ERP: (Effective Radiated Power) | 1000.0 kW | | | |

| Manufacturer | |
|--------------|-----------------------|
| Model | TFU- 30GBH-R O8 |
| Year | 2002 |

| Primary | New Antenna Costs | | | |
|---------|-------------------------|--|--------------------|--|
| Antenna | Section | Question | Response | |
| | New Antenna Description | Use | Primary (Main) | |
| | | Description of Use | N/A | |
| | | Change Type | Purchase New | |
| | | Is this a request for upgraded equipment? | Yes | |
| | | Ownership | Owned | |
| | | Owner | N/A | |
| | | Is antenna shared? | No | |
| | | Is antenna directional? | No | |
| | | Will antenna be located on or in close proximity to an antenna farm? | No | |
| | New Antenna | Class | Full Power | |
| | Manufacturer and Types | Mounting | Top Mount | |
| | | Antenna position in stack | Bottom | |
| | | Polarization | Elliptical | |
| | | Туре | 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) | 829.0 kW | |
| | | Manufacturer | | |
| | | | 1 | |

| Model | TFU-26GBI /VP-R O8 |
|-------------------------------|--|
| Year | 2017 |
| Justification for New Antenna | Current antenna is a single channel antenna that cannot be used for the new post- auction channel. |

Primary Other Antenna Costs

| Antenna | Section | Question | Response |
|------------|--------------------------------|---|---------------------------|
| | Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | No |
| | | Туре | |
| | | Number of channels supported | N/A |
| | | Frequencies of channels supported | N/A |
| | | Frequency | N/A |
| | | Do you need a combiner output splitter /switcher for dual feed lines? | N/A |
| | Elbow Complex | Do you require the separate purchase of the Elbow Complex? | Yes |
| | | Broadband or Single Channel? | Single Channel |
| Side Mount | | Feed Line Size | 6 1/8 inches inches |
| | Side Mount Brackets | Do you require the separate purchase of side mount brackets for a high power antenna? | No |

| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | No |
|--------------------------|---|-----|
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

Primary
AntennaOther Antenna Cost Not ListedInformation not provided.

| Interim | New Antenna Costs | | | |
|---------|-------------------------|--|--------------------|--|
| Antenna | Section | Question | Response | |
| | New Antenna Description | Use | Interim | |
| | | Description of Use | N/A | |
| | | Change Type | Purchase New | |
| | | Ownership | Owned | |
| | | Owner | N/A | |
| | | Is antenna shared? | Yes | |
| | | Is antenna directional? | Yes | |
| | | Will antenna be located on or in close proximity to an antenna farm? | No | |
| | New Antenna | Class | Full Power | |
| | Manufacturer and Type | Mounting | Side Mount | |
| | | Antenna position in stack | Not in Stack | |
| | | Polarization | Elliptical | |
| | | Туре | Broadband Panel | |
| | | Number of Stations Supported | 2 | |
| | | Number of Panels/Bays | 8 | |
| | | Lower Limit | 470.00 MHz | |
| | | Upper Limit | 598.00 MHz | |
| | | Design power capacity in use | 100.0 % | |
| | | Other Antenna Type | N/A | |
| | | ERP: (Effective Radiated Power) | 100.0 kW | |
| | | Manufacturer | | |
| | | Model | TFU-8WB- 1-R | |
| | | Year | 2017 | |

| r New Antenna Interim antenna to be used to stay on the air for both WSYX and WTTE while the main antenna |
|---|
| undergoes construction for the post- auction channel |

Interim Other Antenna Costs

Antenna

| Section | Question | Response | |
|--------------------------------|---|------------------|--|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | Yes | |
| | Туре | 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 | |
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | Yes | |
| | Broadband or Single Channel? | S | |
| | Feed Line Size | 4 1/16 inches | |
| Side Mount Brackets | Do you require the separate purchase of side mount brackets for an antenna? | Yes | |
| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | No | |

| Sweep Test | Do you require the sweep testing of | Yes |
|------------|-------------------------------------|-----|
| | transmission line and antenna? | |

Enter a list of RF channel numbers.

RF Channel Number

27

28

Interim Other Antenna Cost Not Listed

Antenna Information not provided.

| Transmissior | n Seffien | Question | Response |
|--------------|---------------------------------------|---|----------|
| | Transmission Line Related Expenses | Do you have transmission line related expenses? | Yes |

Existing Transmission Line Primary Existing Transmission

| sior | Section | Question | Response |
|------|---|--|----------------------|
| | Existing Transmission Line Description | Type of change | Utilize Existing |
| | | Use | Primary (Main) |
| | | Description of Use | N/A |
| | | Ownership | Owned |
| | | Owner | N/A |
| | Site | N/A | |
| | | Is the existing transmission line shared with another station or stations? | No |
| | | Is Transmission Line in operating condition? | Yes |
| | Existing Transmission | Manufacturer | Dielectric |
| | Line Manufacturer and Type | Туре | Rigid |
| | | Diameter | 6 1/8 inches |
| | | Other Diameter | N/A |
| | | Segment Length | 20 inches |
| | | Other Segment Length | N/A |
| | | Number of parallel runs | 1 |
| | | Length | 1027 feet per run |

Other Transmission Line Expenses Not Listed Primary Transmission to provided.

| Auxiliary | Add Transmission Line | | | |
|------------|--|--|-----------------------|--|
| Fransmissi | on Line Section | Question | Response | |
| | Existing Transmission Line Description | Type of change | Utilize Existing | |
| | | Use | Auxiliary (Backup) | |
| | | Description of Use | Backup | |
| | | Ownership | Owned | |
| | | Owner | N/A | |
| | | Site | N/A | |
| | | Is this transmission currently shared with any other stations? | Yes | |
| | | Is Transmission Line in operating condition? | Yes | |
| | Existing Transmission Line Manufacturer and | Manufacturer | Dielectric | |
| Туре | | Туре | Rigid | |
| | | Diameter | 4 1/16 inches | |
| | | Other Diameter | N/A | |
| | | Segment Length | 20 inches | |
| | | Other Segment Length | N/A | |
| | | Number of parallel runs | 1 | |
| | | Length | 865 feet per run | |

Add Transmission Line

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

| Facility ID | Call Sign |
|-------------|-----------|
| 56549 | WSYX |

Auxiliary Other Transmission Line Expenses Not Listed

Other Transmission Auxiliary Transmission Ioinetion not provided.

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

Existing Tower Primarv

| - | | | •• | - | |
|---|---|-----|-----|----|--|
| т | - |)v | | ٦r | |
| | L |) Y | V 4 | 51 | |

| Section | Question | Response |
|-----------------------------------|---|--|
| Existing Tower | Type of change | Modify Existing |
| Description | Tower Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Leased |
| | Is this tower consider Complex? | Candelabra |
| | Is this tower currently shared with any other stations? | Yes |
| | One or more FM, AM or TV radio broadcaster(s) | Yes |
| | Others Types of Users | Yes |
| | Is tower documented for structural analysis? | Yes |
| | Is tower compliant with Rev G? | Unknown |
| Existing Tower | Do you have a tower registration number? | Yes |
| Structure Registration | ASR Number | 1011933 |
| Coordinates (NAD83 (| Latitude (NAD83) | 39° 56' 14.0" N- |
| North American Datum of 1983)) | Longitude (NAD83) | 083° 01' 16.0" W |
| | Overall Structure Height | 1033.45 feet |
| | Support Structure Height | 1000.64 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 713.90 feet |
| | Structure Type | TOWER - Free Standing or Guyed Structure |

| | Tower Owner | Sinclair Communications, LLC |
|--|------------------|------------------------------------|
| | Date Constructed | 10/11/1993 |

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 |
|-------------|-----------|---------|
| 20758 | WUFM | FM |
| 10929 | WHKC | FM |
| 56549 | WSYX | DTV |

Other Types of Users

Users

3 LPFM stations

Amateur Radio

Primary Tower Modification Costs

Tower

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

Primary Tower Rigging Costs

Section Question Response Tower Rigging Costs Complex Tower Candelabra

Other Tower Expenses Not Listed Primary Tower

| Outside | Section | Question | Response |
|--------------|--|--|---|
| Professional | Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | | Number of Hours | 470 |
| | | Explanation | Outside consulting engineering, legal work, and accounting services, as well as project management for regional and comprehensive repack execution. |
| | Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | Yes |
| | | Prepare engineering section of Form FCC Construction Permit Application | Yes |
| | | For Auxiliary Facility | No |
| | | For Main Facility | Yes |
| | | Prepare engineering section of Form FCC License to Cover Application | Yes |
| | | For Auxiliary Facility | No |
| | | For Main Facility | Yes |
| | | Prepare request for Special Temporary Authority | Yes |
| | | Quantity | 2 |
| | | Do you have Distributed Transmission System engineering services? | N/A |
| | | Critical Facility | N/A |
| | | Terrain-Shielded Facility | N/A |

| Attorney and Other Outside Consulting | Prepare and file Form FCC Construction Permit Application | Yes |
|--|--|-----|
| Services | 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 | 2 |
| | NEPA Section 106 environmental review | Yes |
| | Environmental Assessment | Yes |
| | ASR Modification | Yes |
| | FAA Consultation (including preparation of FAA Form 7460) | Yes |
| | Negotiation of Lease and other Matter for Shared Locations | Yes |
| | Prepare or Review FCC Form 399 for Reimbursement | Yes |
| | Address transition timing and coordination issues w/ other stations and wireless providers | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
| | RF exposure measurements | No |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

Other Professional Services Expenses Not Listed Professional Services roostsided.

| Other | Section | Question | Response |
|----------|---------------------------------|--|----------|
| Expenses | AM Pattern Disturbance | Is an Impact Study needed? | No |
| | | Is Remediation needed? | No |
| | Facility Expenses | Name | N/A |
| | | Other Distributed Transmission System Expenses Not listed | N/A |
| | | Name | N/A |
| | | Is Notification of a Medical Facility required as a result of DTV broadcasting? | Yes |
| | Permit and Filing Costs | Local Zoning | Yes |
| | | Non-zoning permits | Yes |
| | | BLM or NFS Coordination | No |
| | | FCC Construction Permit Minor Change | No |
| | | FCC License to Cover Application | Yes |
| | | FCC Special Temporary Authority Application | Yes |
| | Other Miscellaneous Expenses | Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)? | Yes |
| | | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | Yes |
| | | Does this relocation require Equipment Storage? | Yes |
| | | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change? | Yes |
| | | Does this relocation require MVPD Notification of a Channel Change? | Yes |

Other Expenses Not Listed

Expenses Information not provided.

Transmitters

Cost Information

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary Transmitter ULXTE-72 | \$1,568,800.00 | \$1,491,300.00 | | \$0.00 | |
| 2" Rigid Conduit and Wiring (Cost per foot) | \$20,800.00 | \$20,000.00 | N/A | N/A | N/A |
| UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW | \$1,473,000.00 | \$1,400,000.00 | N/A | N/A | N/A |
| Switchgear - industrial 800 amp | \$38,200.00 | \$36,300.00 | N/A | N/A | N/A |
| Transformer 3 phase/480v - 300 KVA | \$36,800.00 | \$35,000.00 | N/A | N/A | N/A |
| Sub-total | \$1,568,800.00 | \$1,491,300.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,309,826.00 | \$3,325,166.00 | N/A | \$0.00 | N/A |

Components

Antennas

Cost Information

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|--|----------------|------------------------------|
| Interim Antenna TFU-8WB-1-R | \$221,650.00 | \$215,500.00 | | \$0.00 | |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| Elbow complex, single channel, at antenna input, per 4 1 /16. feedline (if needed) | \$9,570.00 | \$9,100.00 | N/A | N/A | N/A |
| Side mount brackets for high power antennas (if not included in antenna base cost) | \$23,150.00 | \$22,000.00 | N/A | N/A | N/A |
| UHF - High Power, Side Mount, broadband panel, 8 bay,, 100 kW input, directional,, elliptically or circularly polarized | \$98,000.00 | \$98,000.00 | This is a Widelity pre-fill cost that did not correctly populate. | N/A | N/A |
| New combiner, cost per channel (without antenna) | \$84,200.00 | \$80,000.00 | N/A | N/A | N/A |
| Primary Antenna TFU- 26GBH/VP-R O8 | \$308,530.00 | \$462,985.00 | | \$0.00 | |

| Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed) | \$12,300.00 | \$11,700.00 | N/A | N/A | N/A |
|--|----------------|----------------|---|--------|-----|
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| UHF - High Power Top Mount (200- 1000 kW), One station antenna , elliptically or circularly polarized | \$289,500.00 | \$444,885.00 | See Response to August 11 Inquiry. | N/A | N/A |
| Sub-total | \$530,180.00 | \$678,485.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,309,826.00 | \$3,325,166.00 | N/A | \$0.00 | N/A |

Components

Transmission Line

Cost Information

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|-----------------------------------|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary Transmission Line | \$0.00 | \$0.00 | | \$0.00 | |
| Auxiliary Transmission Line | \$0.00 | \$0.00 | | \$0.00 | |
| Sub-total | \$0.00 | \$0.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,309,826.00 | \$3,325,166.00 | N/A | \$0.00 | N/A |

Components

Tower Equipment and Rigging Costs

Cost Information

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary Tower TOWER | \$862,000.00 | \$819,000.00 | | \$0.00 | |
| Complex Tower (includes, for example, those with candelabras and /or stacked antennas) | \$421,000.00 | \$400,000.00 | N/A | N/A | N/A |
| Major tower reinforcement /modifications | \$421,000.00 | \$400,000.00 | N/A | N/A | N/A |
| Structural engineering tower load study for a documented tower with candelabra | \$20,000.00 | \$19,000.00 | N/A | N/A | N/A |
| Sub-total | \$862,000.00 | \$819,000.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,309,826.00 | \$3,325,166.00 | N/A | \$0.00 | N/A |

Components

Outside Professional Services

Cost Information

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Outside Professional Services | \$220,150.00 | \$208,250.00 | | \$0.00 | |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$80,000.00 | N/A | N/A | N/A |
| FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase | \$2,105.00 | \$2,000.00 | N/A | N/A | N/A |
| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | \$10,520.00 | \$10,000.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | N/A | N/A |

| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | N/A | N/A |
|---|------------|------------|-----|-----|-----|
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | N/A | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| Prepare request for Special Temporary Authorization | \$4,100.00 | \$3,000.00 | N/A | N/A | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | N/A | N/A |
| ASR modification (prepare FCC Form 854) | \$2,105.00 | \$2,000.00 | N/A | N/A | N/A |
| NEPA Section 106 environmental review, if needed | \$6,310.00 | \$6,000.00 | N/A | N/A | N/A |

| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$7,360.00 | \$7,000.00 | N/A | N/A | N/A |
|--|----------------|----------------|-----|--------|-----|
| Attorney Fees - Negotiation of lease and other matters for shared locations | \$4,210.00 | \$4,000.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$2,250.00 | N/A | N/A | N/A |
| Project management of the transition | \$74,260.00 | \$70,500.00 | N/A | N/A | N/A |
| Sub-total | \$220,150.00 | \$208,250.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,309,826.00 | \$3,325,166.00 | N/A | \$0.00 | N/A |
| | | | | | |

Components

Other Expenses

Cost Information

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|--------------------------------|-------------------|---|----------------|------------------------------|
| Other Expenses | \$128,696.00 | \$128,131.00 | | \$0.00 | |
| Equipment Storage | \$15,000.00 | \$15,000.00 | See Exhibit J. | N/A | N/A |
| Equipment Delivery and Handling Charges | \$10,000.00 | \$10,000.00 | See Exhibit J. | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$28,566.00 | \$28,566.00 | See Response to August 11 Inquiry. | N/A | N/A |
| Local Zoning | \$20,000.00 | \$20,000.00 | See Exhibit J. | N/A | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | N/A | N/A |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| Non-zoning permits | \$10,000.00 | \$10,000.00 | See Exhibit J. | N/A | N/A |
| MVPD Notification of Channel Change | \$5,000.00 | \$5,000.00 | See Exhibit J. | N/A | N/A |
| Develop and air announcement of upcoming channel change | \$28,050.00 | \$28,050.00 | See Response to August 11 Inquiry. | N/A | N/A |

| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | N/A | N/A | N/A |
|---|----------------|----------------|-----|--------|-----|
| Sub-total | \$128,696.00 | \$128,131.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,309,826.00 | \$3,325,166.00 | N/A | \$0.00 | N/A |

Components

| Cost | Grand Total | | | | | |
|-------------|-----------------------|--------------------------------|----------------|-------------|--|--|
| Information | | Predetermined Cost Estimate | Estimated Cost | Actual Cost | | |
| | Total for all systems | \$3,309,826.00 | \$3,325,166.00 | \$0.00 | | |

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

| Certification | Section | Question | Response |
|---------------|--|---|----------|
| | Submission of Estimated Expenses Statements | 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. | |
| | | 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. The above-named entity acknowledges that all certifications and attached documentation are | |
| | | considered material representations. 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. | |
| | | | |

- 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 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. | Lisa Asher Secretary 08/31/2017 |

Attachments