



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **70852** | Service: **DTV** | Call **WAND** | Channel: **20 (UHF)** |
ID: | Sign:
File **000028625**
Number:
FRN: **0003780202** | Date **01/31**
Submitted: **/2019**

Applicant Information Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---------------------------------|---|-----------------------------|--|------------------------|
| WAND(TV) PARTNERSHIP | Keith Wilkowski 624 W. MUHAMMAD ALI BLVD. LOUISVILLE, KY 40203 United States | +1 (419) 277- 6006 | kwilkowski@blockcommunications. com | Limited Partnership |

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 |
|---|--|-----------------------|-------------------------------|
| Robert Gunther <i>Chief Engineer</i> <i>WAND(TV)</i> <i>Partnership</i> | Robert Gunther 904 Southside Drive Decatur, IL 62521 United States | +1 (217) 424- 2500 | Robert.Gunther@wandtv. 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 | New transmitter will be placed in existing building. A side mount antenna will be placed on existing tower until time to shut down current transmitter and put new TX online and correct primary antenna placed on top of the tower. |

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 | Refurbished HP50DDW |
| | Year | 2006 |
| | Type | Inductive Output Tube |
| | IOT Power Type | Two |
| | Power Capacity | 50 kW |

**Primary
Transmitter**

New Transmitter Costs

| Section | Question | Response |
|------------------------|---|---|
| New Transmitter | Use | Primary (Main) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | Yes |
| | Manufacturer | |
| | Model | ULXTE-90 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 50 kW |
| | Justification for New Transmitter | Existing unit is outdated and can not be re-tuned to new specs. |

**Primary
Transmitter**

Other Transmitter Costs

| Section | Question | Response |
|---------------------------|---------------------------------------|----------|
| Electrical Service | Service Entrance (3 phases 800A 208V) | No |
| | Switchgear (industrial 800 amp) | No |
| | Transformer (480V) | Yes |
| | Power | 300 kVA |
| | Rigid Conduit and Wiring | No |
| | Size | N/A |
| | Length | N/A |
| | Other Electrical Service | Yes |

| | | |
|--|---|--|
| | Description | Parallel Surge Suppressor for 3PH WYE or DELTA (Lightning and surge protection). |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Type | N/A |
| | Size | N/A |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leasehold improvement? | No |
| | Size | N/A |
| Channel 14 Costs | Is an RF Consulting Engineer needed? | N/A |
| | Is a channel 14 Mask Filer needed? | N/A |
| | Is additional field engineering time needed? | N/A |
| | Number of Days | N/A |

Primary Transmitter

Other Transmitter Cost Not Listed

| Name | Description |
|------------------------------------|---|
| Mask Filter | Filter for preventing out of band emmissions |
| RF Accessories | RF system components necessary for the interim use and permanent install of the new transmitter |
| Transmitter Electrical Work | Electrical work for installation of GatesAir transmitter |
| Building Electrical work | Install electrical system components in building by ALLTECH Electric |

| | |
|---|--|
| State and local sales tax on materials needed for electrical service | State and Local Sales tax on materials relating to electrical installation |
| Installation services | Fees for installing the transmitter and inside RF system. |
| State and local sales tax on transmitter | State and Local Sales tax on the new transmitter. |
| Shipping | Shipping charges for transmitter components |

Antennas

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

**Primary
Antenna**

Existing Antenna Information

| Section | Question | Response |
|---|--|--------------------|
| Existing Antenna Description | Type of change | Purchase New |
| | Antenna Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing antenna shared with another station or stations? | No |
| | Is the existing antenna directional? | No |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna Manufacturer and Type | Class | Full Power |
| | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Circular |
| | Type | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels | N/A |
| | Design power capacity in use | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 1000.0 kW |

| | |
|--------------|-----------------------------|
| Manufacturer | |
| Model | TFU-31JTH /VP-R T110C |
| Year | 2011 |

**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? | No |
| | 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 Manufacturer and Types | Class | Full Power |
| | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Circular |
| | 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) | 1000.0 kW |
| Manufacturer | | |

| | |
|-------------------------------|---|
| Model | TFU-31JTH /VP-R T110 /C150 CH 20 |
| Year | 2017 |
| Justification for New Antenna | Changing from channel 17 to channel 20. Current equipment cannot be used for the new channel. |

Primary Antenna

Other Antenna Costs

| Section | Question | Response |
|------------------------------------|---|------------------------|
| Combiner for Shared Antenna | 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 |
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | Yes |
| | Broadband or Single Channel? | Single Channel |
| | Feed Line Size | 6 1/8 inches 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
Antenna**

Other Antenna Cost Not Listed

| Name | Description |
|----------------------------------|--|
| Reducer | Transmission line reducer-two needed |
| Transformer | Matching transformer for new transmission line-two needed |
| State and Local Sales Tax | State and local sales tax in the amount of 9.25% is calculated on the total cost, bringing the total amount to 627937.32 |

**Interim
Antenna**

New Antenna Costs

| Section | Question | Response |
|--|--|------------------------|
| New Antenna Description | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Ownership | Owned |
| | Owner | N/A |
| | Is antenna shared? | No |
| | Is antenna directional? | No |
| | Will antenna be located on or in close proximity to an antenna farm? | No |
| New Antenna Manufacturer and Type | Class | Full Power |
| | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Elliptical |
| | Type | Broadband Slot |
| | Number of Stations Supported | 1 |
| | Number of Panels/Bays | 16 |
| | Lower Limit | 470.00 MHz |
| | Upper Limit | 695.00 MHz |
| | Design power capacity in use | 100.0 % |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 435.3 kW |
| | Manufacturer | |
| | Model | TFU-16WB /VP-R S230 |
| | Year | 2017 |

| | |
|--|---|
| | <p>Justification for New Antenna</p> <p>Interim side mount antenna to be put in place while primary antenna and feedline is replaced to minimize loss of on air time.</p> |
|--|---|

Interim Antenna

Other Antenna Costs

| Section | Question | Response |
|---------------------------------|---|--------------|
| Elbow Complex | Do you require the separate purchase of the Elbow Complex? | Yes |
| | Broadband or Single Channel? | S |
| | Feed Line Size | 6 1/8 inches |
| Side Mount Brackets | Do you require the separate purchase of side mount brackets for an antenna? | No |
| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | No |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

Interim Antenna

Other Antenna Cost Not Listed

| Name | Description |
|--------------------|--|
| Sales Tax | State and local sales tax is calculated at 9.25% on the amount of the total sale, bringing the total cost to 383011.38 |
| Transformer | Matching transformer for new transmission line. |

**Transmission
Line**

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

**Primary
Transmission
Line**

Existing Transmission Line

| Section | Question | Response |
|---|--|----------------------|
| Existing Transmission Line Description | Type of change | Purchase New |
| | Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is the existing transmission line shared with another station or stations? | No |
| | Is Transmission Line in operating condition? | Yes |
| Existing Transmission Line Manufacturer and Type | Manufacturer | |
| | Type | Rigid |
| | Diameter | 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 | 1350 feet per run |

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

| Section | Question | Response |
|------------------------------------|---|---|
| New Transmission Line Costs | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | Yes |
| | 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 | 1200 feet per run |
| | Justification for New Transmission Line | Current equipment cannot be used for the new channel. |

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

Information not provided.

**Interim
Transmission
Line**

New Transmission Line

| Section | Question | Response |
|------------------------------------|---|--|
| New Transmission Line Costs | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Type | Rigid |
| | Diameter | 6 1/8 inches |
| | Segment Length | 19 3/4 ' |
| | Other Segment Length | |
| | Number of parallel runs | 1 |
| | Length | 1350 feet per run |
| | Justification for New Transmission Line | Current transmission line cannot be used with new channel assignment of channel 20 |

**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? | 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? | Yes |
| Existing Tower Structure Registration | Do you have a tower registration number? | Yes |
| | ASR Number | 1009651 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 39° 57' 08.6" N- |
| | Longitude (NAD83) | 088° 49' 56.6" W- |
| | Overall Structure Height | 1313.96 feet |
| | Support Structure Height | 1243.10 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 686.02 feet |

| | |
|------------------|--|
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | WAND(TV) Partnership |
| Date Constructed | 10/01/1980 |

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 Services Costs

| Section | Question | Response |
|---|--|---|
| Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 595 |
| | Explanation | WDRB does not have sufficient resource capacity and expertise in house to handle all of the reimbursement filing. |
| Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | No |
| | 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 | No |
| | Quantity | N/A |
| | Do you have Distributed Transmission System engineering services? | N/A |
| | Critical Facility | N/A |
| | Terrain-Shielded Facility | N/A |
| Attorney and Other Outside Consulting Services | Prepare and file Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |

| | | |
|--------------------------------------|--|-----|
| | For Main Facility | Yes |
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | No |
| | Quantity | N/A |
| | NEPA Section 106 environmental review | No |
| | Environmental Assessment | Yes |
| | ASR Modification | Yes |
| | 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 | Yes |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
| | 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 |
|-------------------------------------|--|----------|
| AM Pattern Disturbance | Is an Impact Study needed? | No |
| | Is Remediation needed? | No |
| Facility Expenses | Name | N/A |
| | Other Distributed Transmission System Expenses Not listed | N/A |
| | Name | N/A |
| | Is Notification of a Medical Facility required as a result of DTV broadcasting? | Yes |
| Permit and Filing Costs | Local Zoning | No |
| | Non-zoning permits | No |
| | 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)? | No |
| | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | No |
| | Does this relocation require Equipment Storage? | No |
| | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change? | No |
| | Does this relocation require MVPD Notification of a Channel Change? | No |

**Other
Expenses**

Other Expenses Not Listed

| Name | Description |
|---------------------------|--|
| Rental of heavy equipment | rental of forklift or sky-jack to off load transmitter antennas and transmission line and other equipment. |

Cost Information

Transmitters

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|-----------------------------|-----------------------|------------------------------|-----------------------|---------------------------|
| Primary Transmitter ULXTE-90 | \$1,901,501.57 | \$1,751,173.73 | | \$1,745,863.88 | |
| Shipping | <i>\$13,500.00</i> | \$13,500.00 | N/A | \$13,500.00 | N/A |
| State and local sales tax on transmitter | <i>\$106,055.20</i> | \$106,055.20 | N/A | \$100,745.35 | N/A |
| Installation services | <i>\$81,690.50</i> | \$81,690.50 | N/A | \$81,690.50 | N/A |
| State and local sales tax on materials needed for electrical service | <i>\$0.00</i> | \$0.00 | N/A | \$0.00 | N/A |
| Building Electrical work | <i>\$0.00</i> | \$0.00 | N/A | \$0.00 | N/A |
| Transmitter Electrical Work | <i>\$12,101.82</i> | \$12,101.82 | N/A | \$12,101.82 | N/A |
| Mask Filter | <i>\$56,125.88</i> | \$56,125.88 | N/A | \$56,125.88 | N/A |

| | | | | | |
|--|----------------|----------------|-----|----------------|-----|
| Other Electrical Service: Parallel Surge Suppressor for 3PH WYE or DELTA (Lightning and surge protection). | \$0.00 | \$0.00 | N/A | \$0.00 | N/A |
| Transformer 3 phase /480v - 300 KVA | \$36,800.00 | \$0.00 | N/A | \$0.00 | N/A |
| UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW | \$1,473,000.00 | \$1,359,472.16 | N/A | \$1,359,472.16 | N/A |
| RF Accessories | \$122,228.17 | \$122,228.17 | N/A | \$122,228.17 | N/A |
| Sub-total | \$1,901,501.57 | \$1,751,173.73 | N/A | \$1,745,863.88 | N/A |
| Total for all systems | \$3,718,572.77 | \$3,285,956.43 | N/A | \$1,761,333.83 | N/A |

Components

| Actual Information | |
|--------------------|--|
| Description | File Name |
| Shipping | <p>Component Description: This is the line item for freight for the attached invoice.</p> <p>Amount: \$13,500.00</p> |

| | |
|--|---|
| State and local sales tax on transmitter | Component Description: Tax Amount: \$100,745.35 |
| Installation services | Component Description: This is the line item for installation of the transmitter shown on the invoice. Amount: \$81,690.50 |
| State and local sales tax on materials needed for electrical service | Information not provided. |
| Building Electrical work | Information not provided. |
| Transmitter Electrical Work | Component Description: This is the electrical cost for the transmitter. Amount: \$12,101.82 |
| Mask Filter | Component Description: This is the line item for the Mask Filter System on the invoice. Amount: \$56,125.88 |
| Other Electrical Service: Parallel Surge Suppressor for 3PH WYE or DELTA (Lightning and surge protection). | Information not provided. |
| Transformer 3 phase/480v - 300 KVA | Information not provided. |

| | |
|--|---|
| UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW | Component Description: Transmitter Amount: \$192,023.01 |
| | Component Description: This invoice is for 2 /3 of the transmitter cost and is now due. The final 1/3 will be due after installation. Amount: \$1,167,449.15 |
| RF Accessories | Component Description: This is the line item for RF accessories on the attached invoice. Amount: \$122,228.17 |

Cost Information

Antennas

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|---------------------|--|---------------|---------------------------|
| Interim Antenna TFU-16WB /VP-R S230 | \$286,356.88 | \$274,696.88 | | \$0.00 | |
| UHF - Lower Power Side Mount, One station antenna -- 200-500 kW, elliptically or circularly polarized | \$227,000.00 | \$216,000.00 | N/A | N/A | N/A |
| Transformer | <i>\$7,898.00</i> | \$7,898.00 | Two transformers are required for impedance matching for interim antenna, primary antenna and transmitter. | \$0.00 | N/A |
| Sales Tax | <i>\$32,428.88</i> | \$32,428.88 | N/A | \$0.00 | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | \$0.00 | N/A |

| | | | | | |
|--|---------------------|---------------------|---|---------------|-----|
| Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed) | \$12,300.00 | \$11,970.00 | Price quoted by manufacturer, quote attached. | \$0.00 | N/A |
| Primary Antenna TFU-31JTH /VP-R T110 /C150 CH 20 | \$374,429.32 | \$316,034.82 | | \$0.00 | |
| UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized | \$289,500.00 | \$233,437.50 | N/A | \$0.00 | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | \$0.00 | N/A |
| Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed) | \$12,300.00 | \$10,298.00 | N/A | \$0.00 | N/A |
| Reducer | <i>\$4,836.00</i> | \$4,836.00 | N/A | \$0.00 | N/A |
| State and Local Sales Tax | <i>\$53,166.32</i> | \$53,166.32 | N/A | \$0.00 | N/A |

| | | | | | |
|------------------------------|-------------------|----------------|--|----------------|-----|
| Transformer | <i>\$7,897.00</i> | \$7,897.00 | Two transformers are required for impedance matching for interim antenna, primary antenna and transmitter. | \$0.00 | N/A |
| Sub-total | \$660,786.20 | \$590,731.70 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,718,572.77 | \$3,285,956.43 | N/A | \$1,761,333.83 | N/A |

Components

Information not provided.

Cost Information

Transmission Line

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|-----------------------|------------------------------|-----------------------|---------------------------|
| Interim Transmission Line | \$272,700.00 | \$215,595.00 | | \$0.00 | |
| Rigid Transmission Line - copper, 6 1/8" | \$272,700.00 | \$215,595.00 | N/A | \$0.00 | N/A |
| Primary Transmission Line | \$416,400.00 | \$311,902.00 | | \$0.00 | |
| Rigid Transmission Line - copper, 8 3/16" | \$416,400.00 | \$311,902.00 | N/A | \$0.00 | N/A |
| Sub-total | \$689,100.00 | \$527,497.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,718,572.77 | \$3,285,956.43 | N/A | \$1,761,333.83 | N/A |

Components

Information not provided.

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 TOWER | \$223,100.00 | \$191,501.00 | | \$0.00 | |
| Structural engineering tower load study for well documented tower | \$12,600.00 | \$8,000.00 | N/A | \$0.00 | N/A |
| Tall Tower (greater than 500') | \$210,500.00 | \$183,501.00 | N/A | \$0.00 | N/A |
| Sub-total | \$223,100.00 | \$191,501.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,718,572.77 | \$3,285,956.43 | N/A | \$1,761,333.83 | N/A |

Components

Information not provided.

Cost Information

Outside Professional Services

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|---------------------|------------------------------|--------------------|---------------------------|
| Outside Professional Services | \$229,505.00 | \$219,500.00 | | \$15,469.95 | |
| RF Exposure Measurements | \$21,050.00 | \$20,000.00 | N/A | \$0.00 | N/A |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$80,000.00 | N/A | \$0.00 | N/A |
| ASR modification (prepare FCC Form 854) | \$2,105.00 | \$2,000.00 | N/A | \$0.00 | 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 | \$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 | \$0.00 | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | \$0.00 | N/A |

| | | | | | |
|--|-----------------------|-----------------------|------------|-----------------------|------------|
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | \$0.00 | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | \$0.00 | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$2,500.00 | N/A | \$0.00 | N/A |
| Project management of the transition | \$94,010.00 | \$90,750.00 | N/A | \$15,469.95 | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$0.00 | N/A |
| Sub-total | \$229,505.00 | \$219,500.00 | N/A | \$15,469.95 | N/A |
| Total for all systems | \$3,718,572.77 | \$3,285,956.43 | N/A | \$1,761,333.83 | N/A |

Components

| Actual Information | |
|--|---------------------------|
| Description | File Name |
| RF Exposure Measurements | Information not provided. |
| Comprehensive coverage verification via field study, if needed | Information not provided. |

| | |
|---|---------------------------|
| ASR modification (prepare FCC Form 854) | Information not provided. |
| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | Information not provided. |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. |

Project management of the transition

Component Description: Project Management
Amount: \$241.75

Component Description: Project Management
Amount: \$1,324.00

Component Description: Project Management
Amount: \$1,342.90

Component Description: Project Management
Amount: \$1,496.00

Component Description: Project Management
Amount: \$1,586.00

Component Description: Project Management
Amount: \$1,809.30

Component Description: Project Management
Amount: \$2,710.05

Component Description: Project Management
Amount: \$2,914.55

Component Description: Project Management
Amount: \$2,045.40

Prepare and or review
reimbursement form

Information not provided.

Cost Information

Other Expenses

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|-----------------------------|-----------------------|------------------------------|-----------------------|---------------------------|
| Other Expenses | \$14,580.00 | \$5,553.00 | | \$0.00 | |
| DTV Medical Facility Notification | \$11,550.00 | \$2,538.00 | N/A | \$0.00 | N/A |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | \$0.00 | N/A |
| FCC Filing Fees - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | \$0.00 | N/A |
| Rental of heavy equipment | <i>\$2,500.00</i> | \$2,500.00 | N/A | \$0.00 | N/A |
| Sub-total | \$14,580.00 | \$5,553.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,718,572.77 | \$3,285,956.43 | N/A | \$1,761,333.83 | N/A |

Components

Information not provided.

Cost Information **Grand Total**

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|------------------------------|------------------------------------|-----------------------|--------------------|
| Total for all systems | \$3,718,572.77 | \$3,285,956.43 | \$1,761,333.83 |

Reimbursement Status

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

| Certification | Section | Question | Response |
|---------------|---|---|----------|
| | <p>Submission of Estimated Expenses Statements</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="726 772 1021 1164">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 data-bbox="726 1187 1005 1444">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. <li data-bbox="726 1467 1013 1747">3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. | |

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

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

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

Keith Wilkowski
Vice President, Legal /Governmental Affairs

01/31/2019

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

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

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

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

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

Keith Wilkowski
Vice President, Legal /Governmental Affairs

01/31/2019

Attachments