



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **38591** | Service: **DTV** | Call **KLTS-TV** | Channel: **17 (UHF)** |
ID: | Sign:
File **0000028074**
Number:
FRN: **0001720192** | Date **06/20**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|-----------------------|-------------------|------------------|-------------------|
| LOUISIANA EDUCATIONAL TELEVISION AUTHORITY | Donald R Ballard | +1 (225) 767-4273 | dballard@lpb.org | Government Entity |
| Doing Business As: | 7733 PERKINS RD | | | |
| Louisiana Public Broadcasting | BATON ROUGE, LA 70810 | | | |
| | United States | | | |

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 |
|--|---------|-------|-------|
| The Preparer is same as the reimbursement contact. | | | |

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 | 1.Install an interim antenna on channel 24 at our present licensed ERP or as close to it as we can obtain with our existing transmitter. 2.Purchase a replacement top mount antenna and line for the repack channel 17 with new mask filter and transmitter. |

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 | HU0015KAD |
| | Year | 2009 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 15 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? | No |
| | Manufacturer | |
| | Model | CTX728 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 23 kW |
| | Justification for New Transmitter | Required transmitter to operate on repack channel. Existing mask filter can not be retuned. A lower gain antenna is required to keep the tower height in compliance with the FAA resulting in a higher required TPO than the existing transmitter. |

**Primary
Transmitter**

Other Transmitter Costs

| Section | Question | Response |
|--|---|---------------------|
| Electrical Service | Service Entrance (3 phases 800A 208V) | No |
| | Switchgear (industrial 800 amp) | No |
| | Transformer (480V) | No |
| | Power | N/A |
| | Rigid Conduit and Wiring | Yes |
| | Size | 4 inches |
| | Length | 500.0 feet |
| | Other Electrical Service | No |
| | Description | N/A |
| HVAC Service | Does the replacement transmitter require HVAC Service? | Yes |
| | Type | Heating and Cooling |
| | Size | 20 tons |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leasehold improvement? | Yes |
| | Size | 600.0 square feet |
| 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 |
|------|-------------|
|------|-------------|

| | |
|---|------------------------------|
| Transmitter Install equipment rental | Heavy lift equipment rental. |
| Shipping and Handling | Manufacturer delivery |

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 | Horizontal |
| | 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) | 350.0 kW |
| | | |

| | |
|--------------|---------|
| Manufacturer | |
| Model | TFU-47J |
| Year | 1978 |

Primary
Antenna

New Antenna Costs

| Section | Question | Response |
|------------------------------------|--|-----------------|
| New Antenna Description | Use | Primary (Main) |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | Yes |
| | Ownership | Owned |
| | Owner | N/A |
| | Is antenna shared? | No |
| | Is antenna directional? | 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 | Elliptical |
| | Type | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels/Bays | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Design power capacity in use | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 280.0 kW |
| | Manufacturer | |
| | | |

| | |
|-------------------------------|--|
| Model | ATC-BCE4280-V0-17 |
| Year | 2019 |
| Justification for New Antenna | Existing antenna can not be retuned by the manufacturer and must be replaced for the new repack 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 |
|-----------------|---|
| Shipping | Alive has put TBD on the quote. This is an arbitrary number |

**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 | 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) | 350.0 kW |
| | Manufacturer | |
| | Model | ATC- BCSE16CS1- u1 |
| | | |

| | |
|-------------------------------|---|
| Year | 2018 |
| Justification for New Antenna | KLTS-DT wishes to broadcast at close to full power while the main transmission system is replaced for the repack channel. |

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? | B |
| | Feed Line Size | 6 1/8 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? | Yes |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

Interim Antenna

Other Antenna Cost Not Listed

| Name | Description |
|----------|--|
| Shipping | Alive has put TBD on the attached quote. This is an arbitrary number |

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 | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 19 3/4 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1316 feet per run |

Primary **New Transmission Line**
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? | No |
| | Type | Rigid |
| | Diameter | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 19 1/2 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1316 feet per run |
| | Justification for New Transmission Line | Existing line is not compatible with the repack channel. |

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

Information not provided.

Interim **New Transmission Line**
Transmission Line

| Section | Question | Response |
|------------------------------------|---|--|
| New Transmission Line Costs | Use | Interim |
| | Description of Use | N/A |
| | Change Type | Purchase New |
| | Type | Flexible Air |
| | Diameter | 5 inches |
| | Segment Length | N/A |
| | Other Segment Length | |
| | Number of parallel runs | 1 |
| | Length | 1300 feet per run |
| | Justification for New Transmission Line | KLTS-DT would like to remain on the air while the existing transmission system is replaced for the repack channel. |

Interim **Other Transmission Line Expenses Not Listed**
Transmission Line

Information not provided.

**Tower
Equipment
And
Rigging
Costs**

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

**Primary
Tower**

Existing Tower

| Section | Question | Response |
|--|---|-------------------|
| Existing Tower Description | Type of change | Modify Existing |
| | Tower Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | 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 | Yes |
| | Is tower documented for structural analysis? | Yes |
| | Is tower compliant with Rev G? | No |
| Existing Tower Structure Registration | Do you have a tower registration number? | No |
| | ASR Number | |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 32° 40' 40.1" N- |
| | Longitude (NAD83) | 093° 55' 30.7" W- |
| | Overall Structure Height | 1080.04 feet |
| | Support Structure Height | 1006.88 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 250.00 feet |
| | | |

| | | |
|--|------------------|---|
| | Structure Type | GTOWER - Guyed Structure Used for Communication Purposes |
| | Tower Owner | LOUISIANA EDUCATIONAL TELEVISION AUTHORITY DBA KLTS |
| | Date Constructed | 05/26/1978 |

**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 |
|-------------|-----------|---------|
| 4317 | KDAQ | FM |

Other Types of Users

| Users |
|-----------------|
| Bluebird Wirele |

Primary Tower

Tower Modification Costs

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

**Primary
Tower**

Tower Rigging Costs

| Section | Question | Response |
|------------------------------|-----------------------------------|----------|
| Tower Rigging Costs | Complex Tower | N/A |
| Helicopter Services Required | Are helicopter services required? | No |

**Primary
Tower**

Other Tower Expenses Not Listed

Information not provided.

**Outside
Professional**

| Section | Question | Response |
|---|--|---|
| Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | Number of Hours | 500 |
| | Explanation | We will need outside assistance with project management due to insufficient staffing levels to support a major project. |
| 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 | 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 |
| Attorney and Other Outside Consulting Services | Prepare and file Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | Yes |
| | | |

| | | |
|--------------------------------------|--|-----|
| | For Main Facility | Yes |
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | Yes |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | Yes |
| | Quantity | 2 |
| | NEPA Section 106 environmental review | No |
| | Environmental Assessment | No |
| | ASR Modification | Yes |
| | FAA Consultation (including preparation of FAA Form 7460) | Yes |
| | 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 | Yes |
| | Number of Days | 22 |
| | | |

| | |
|---------------|--|
| Justification | We do not have comprehensive internal resources. Consulting RF Engineers are needed to meet the analytical, coordination, and FCC compliance needs of the station. |
|---------------|--|

Outside Professional Services Costs **Other Professional Services Expenses Not Listed**
Services 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 | No |
| | FCC Special Temporary Authority Application | No |
| 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? | No |
| | Does this relocation require Equipment Storage? | No |
| | 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 Information not provided. |
|-----------------------|---|

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 CTX728 | \$1,179,000.00 | \$1,124,000.00 | | \$157,500.00 | |
| UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW | \$947,000.00 | \$900,000.00 | N/A | \$157,500.00 | N/A |
| Transmitter Install equipment rental | \$22,000.00 | \$22,000.00 | Rental of heavy duty equipment will be required to install the transmitter and the heat exchanger. | N/A | N/A |
| Shipping and Handling | \$22,000.00 | \$22,000.00 | N/A | N/A | N/A |
| 20 Ton system | \$115,500.00 | \$110,000.00 | This building is going to require adjustments to the environmental controls due to the location in a more northern latitude (additional heating) | N/A | N/A |

| | | | | | |
|---|----------------|----------------|-----|--------------|-----|
| Other -- Building Addition Size: 600.0 | \$22,000.00 | \$22,000.00 | N/A | N/A | N/A |
| 4" Rigid Conduit and Wiring (Cost per foot) | \$50,500.00 | \$48,000.00 | N/A | N/A | N/A |
| Sub-total | \$1,179,000.00 | \$1,124,000.00 | N/A | \$157,500.00 | N/A |
| Total for all systems | \$3,872,847.00 | \$3,710,289.00 | N/A | \$416,857.12 | N/A |

Components

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

| | |
|---|---|
| UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW | Component Description: N/A Amount: N/A |
| | Component Description: Heartland Video_KLTS - Shreveport Rebrande Quote_WISQ48350_11-27-17 Amount: N/A |
| | Component Description: KLTS_Channel 17 Transmitter_1st Downpayment_INVOICE_E1703345 Amount: \$157,800.00 |
| | Component Description: KLTS_Channel 17 Transmitter_1st Downpayment_INVOICE_E1703345_Correcte Amount Amount: \$157,500.00 |
| | Component Description: Heartland Video_KLTS Rebrander_Invoice 63487_1-31-18 Amount: \$12,812.47 |
| Transmitter Install equipment rental | Information not provided. |
| Shipping and Handling | Information not provided. |
| 20 Ton system | Information not provided. |
| Other -- Building Addition Size: 600.0 | Information not provided. |
| 4" Rigid Conduit and Wiring (Cost per foot) | Information not provided. |

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 ATC-BCSE16CS1-u1 | \$297,840.00 | \$284,400.00 | | \$0.00 | |
| Shipping | <i>\$22,000.00</i> | \$22,000.00 | Alive has put TBD on the attached quote. This is an arbitrary number that should cover the cost with some left over. | \$0.00 | N/A |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | \$5,260.00 | \$5,000.00 | 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 | \$0.00 | N/A |

| | | | | | |
|---|---------------------|---------------------|-----|-------------------|-----|
| Elbow complex, broadband, at antenna input, per 6 1/8. feedline (if needed) | \$13,700.00 | \$13,000.00 | N/A | \$0.00 | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | N/A | N/A |
| 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 |
| Primary Antenna ATC-BCE4280-V0-17 | \$330,530.00 | \$315,100.00 | | \$4,150.00 | |
| UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized | \$289,500.00 | \$275,000.00 | N/A | \$0.00 | N/A |
| 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 6 1/8. feedline (if needed) | \$12,300.00 | \$11,700.00 | N/A | \$4,150.00 | N/A |
| Shipping | \$22,000.00 | \$22,000.00 | Alive has put TBD on the quote that is attached. This is an arbitrary number that should cover the cost with value left over. | N/A | N/A |
| Sub-total | \$628,370.00 | \$599,500.00 | N/A | \$4,150.00 | N/A |
| Total for all systems | \$3,872,847.00 | \$3,710,289.00 | N/A | \$416,857.12 | N/A |

Components

| Actual Information | |
|--|---------------------------|
| Description | File Name |
| Shipping | Information not provided. |
| Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost) | Information not provided. |
| Side mount brackets for high power antennas (if not included in antenna base cost) | Information not provided. |

| | |
|---|---|
| Elbow complex, broadband, at antenna input, per 6 1/8. feedline (if needed) | <p>Component Description: KLTS_Alive Telecom INV 1844 Interim Elbox Complex_11-29-17_Deposit</p> <p>Amount: \$2,150.00</p> |
| Sweep test of existing antenna | Information not provided. |
| UHF - Lower Power Side Mount, One station antenna -- 200-500 kW, elliptically or circularly polarized | Information not provided. |
| UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized | <p>Component Description: KLTS_Alive Telecom INV 1845 Main Antenna_11-29-17_Deposit</p> <p>Amount: \$104,000.00</p> <p>Component Description: KLTS_Alive Telecom INV 1847 Main Elbox Complex_11-29-17_Deposit</p> <p>Amount: \$4,150.00</p> |
| Sweep test of existing antenna | Information not provided. |
| Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed) | <p>Component Description: KLTS_Alive Telecom INV 1847 Main Elbox Complex_11-29-17_Deposit</p> <p>Amount: \$4,150.00</p> |
| Shipping | 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 | \$136,500.00 | \$130,000.00 | | \$0.00 | |
| Flexible Air Transmission Line - dielectric, 5" | \$136,500.00 | \$130,000.00 | N/A | \$0.00 | N/A |
| Primary Transmission Line | \$265,832.00 | \$252,672.00 | | \$0.00 | |
| Rigid Transmission Line - copper, 6 1/8" | \$265,832.00 | \$252,672.00 | N/A | \$0.00 | N/A |
| Sub-total | \$402,332.00 | \$382,672.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,872,847.00 | \$3,710,289.00 | N/A | \$416,857.12 | N/A |

Components

| Actual Information | |
|---|--|
| Description | File Name |
| Flexible Air Transmission Line - dielectric, 5" | <div>Component Description:KLTS_Alive Telecom INV 1843 Interim Transmission Line_11-29- 17_Deposit</div> <div>Amount:\$33,250.00</div> |

| | | | | | |
|---|---|-------------------------------|--|----------------|-------------|
| Rigid Transmission Line - copper, 6 1/8" | <table><tr><td data-bbox="700 91 1133 470">Component Description:</td><td data-bbox="1133 91 1433 470">KLTS_Alive Telecom INV 1848 Main Transmission Line_11-29- 17_Deposit</td></tr><tr><td data-bbox="700 358 1133 470">Amount:</td><td data-bbox="1133 358 1433 470">\$99,850.00</td></tr></table> | Component Description: | KLTS_Alive Telecom INV 1848 Main Transmission Line_11-29- 17_Deposit | Amount: | \$99,850.00 |
| Component Description: | KLTS_Alive Telecom INV 1848 Main Transmission Line_11-29- 17_Deposit | | | | |
| Amount: | \$99,850.00 | | | | |

Cost
Information

Tower Equipment and Rigging Costs

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|--|-----------------------------|----------------|---------------------------------------|--------------|---------------------------|
| Primary Tower GTOWER | \$1,288,800.00 | \$1,242,867.00 | | \$234,960.00 | |
| Serious tower reinforcement /modifications | \$1,052,000.00 | \$1,000,000.00 | N/A | \$234,960.00 | N/A |
| Tall Tower (greater than 500') | \$210,500.00 | \$217,867.00 | Please see attached tower crew quote. | N/A | N/A |
| Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study | \$26,300.00 | \$25,000.00 | N/A | N/A | N/A |
| Sub-total | \$1,288,800.00 | \$1,242,867.00 | N/A | \$234,960.00 | N/A |
| Total for all systems | \$3,872,847.00 | \$3,710,289.00 | N/A | \$416,857.12 | N/A |

Components

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

| | |
|---|---|
| Serious tower reinforcement/modifications | Component Description: Structural Design Modification Amount: \$8,000.00 |
| | Component Description: Structural Damage Repair Design Amount: \$3,000.00 |
| | Component Description: KLTS_Coast To Coast Tower Modification Antenna install Deposit_Invoice 1920_10-20-17 Amount: \$217,960.00 |
| | Component Description: Structural Analysis Amount: \$6,000.00 |
| Tall Tower (greater than 500') | Information not provided. |
| Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study | 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 | \$332,795.00 | \$320,250.00 | | \$20,247.12 | |
| Additional Field Engineering Service, 22 Days | <i>\$100,000.00</i> | \$100,000.00 | N/A | \$5,500.00 | N/A |
| RF Exposure Measurements | \$21,050.00 | \$20,000.00 | N/A | N/A | N/A |
| 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 |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | \$7,360.00 | \$7,000.00 | 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 |
| Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application | \$4,210.00 | \$4,000.00 | N/A | \$1,141.50 | N/A |
| Project management of the transition | \$79,000.00 | \$75,000.00 | N/A | \$5,527.62 | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | \$78.00 | 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 |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$8,000.00 | due to the complexity of channel reassignment |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | 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), 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, License to Cover Application | \$1,580.00 | \$1,500.00 | N/A | N/A | N/A |
| Prepare request for Special Temporary Authorization | \$4,100.00 | \$3,000.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | N/A | N/A | N/A |
| ASR modification (prepare FCC Form 854) | \$2,105.00 | \$2,000.00 | N/A | N/A | N/A |
| Sub-total | \$332,795.00 | \$320,250.00 | N/A | \$20,247.12 | N/A |

| | | | | | |
|------------------------------|----------------|----------------|-----|--------------|-----|
| Total for all systems | \$3,872,847.00 | \$3,710,289.00 | N/A | \$416,857.12 | N/A |
|------------------------------|----------------|----------------|-----|--------------|-----|

Components

| Actual Information | |
|--|--|
| Description | File Name |
| Additional Field Engineering Service, 22 Days | Component Description: KLTS Geo technical survey Amount: \$5,500.00 |
| RF Exposure Measurements | Information not provided. |
| Comprehensive coverage verification via field study, if needed | Information not provided. |
| FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase | Information not provided. |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | Information not provided. |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. |
| Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application | Component Description: Status of financial forms Amount: \$312.00 Component Description: Review of 399 Amount: \$829.50 |

| | |
|---|--|
| Project management of the transition | <div> <div> Component Description: </div> <div> Professional Services Repack_KLTS_10-18-17_Invoice 667582_Page 5 </div> </div> <div> Amount: </div> <div> \$39.00 </div> <div> Component Description: </div> <div> KLTS TV repack Site Survey </div> <div> Amount: </div> <div> \$5,488.62 </div> |
| Prepare and or review reimbursement form | <div> <div> Component Description: </div> <div> Professional Services Repack_KLTS_11-22-17_Invoice 670596_Page 5 </div> </div> <div> Amount: </div> <div> \$78.00 </div> |
| Address transition timing and coordination issues w/ other stations and wireless | Information not provided. |
| Perform engineering study for new channel assignment and antenna development | <div> <div> Component Description: </div> <div> Perform TV Study Coverage </div> </div> <div> Amount: </div> <div> \$8,000.00 </div> |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application | Information not provided. |

| | |
|--|---------------------------|
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. |
| RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application | Information not provided. |
| Prepare request for Special Temporary Authorization | Information not provided. |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. |
| ASR modification (prepare FCC Form 854) | 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 | \$41,550.00 | \$41,000.00 | | \$0.00 | |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | <i>\$10,000.00</i> | \$10,000.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | <i>\$10,000.00</i> | \$10,000.00 | N/A | N/A | N/A |
| MVPD Notification of Channel Change | <i>\$10,000.00</i> | \$10,000.00 | N/A | N/A | N/A |
| Sub-total | \$41,550.00 | \$41,000.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$3,872,847.00 | \$3,710,289.00 | N/A | \$416,857.12 | N/A |

Components

Information not provided.

| | | | |
|-------------------------|------------------------------|------------------------------------|-----------------------|
| Cost Information | Grand Total | | |
| | | Predetermined Cost Estimate | Estimated Cost |
| | | | Actual Cost |
| | Total for all systems | \$3,872,847.00 | \$3,710,289.00 |
| | | | \$416,857.12 |

| | | |
|-----------------------------|--|-----------------|
| 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 |
|---------------|---|---|----------|
| | Submission of Estimated Expenses Statements | <p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p> | |
| | | <ol style="list-style-type: none"> 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. 2. 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).
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.

**d Ray
Ballard ,
Mr. .
Television
Manager**

06/20/2018

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

| | |
|--|---|
| <p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p> | |
| <p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p> | <p>Donald Ray Ballard , Mr. . <i>Television Manager</i></p> <p>06/20/2018</p> |

Attachments