

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

68834 Service: DTV Channel: 25 (UHF) Facility Call **KPXD-TV** Sign:

ID:

File 0000028363

Number:

FRN: 0001808468 Date 10/24

> Submitted: /2018

#### **Applicant** Information

#### **Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
ION TELEVISION LICENSE, LLC Doing Business As: ION TELEVISION LICENSE, LLC	Bianca Frye 601 CLEARWATER PARK ROAD WEST PALM BEACH, FL 33401 United States	+1 (561) 682- 4110	BIANCAFRYE@IONMEDIA.	Corporation

# Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### **Preparer Contact** Information

#### **Preparer Contact Name and Information**

Address	Phone	Email
	Address	Address Phone

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	Relocate from ASR# 1059733 to ASR# 1053994. Construct post-repack facilities at alternate location. No interim facilities required. Install new transmitter, RF system, transmission line, and antenna on

# **Transmitters**

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

Authorization

post-repack channel. Pursuant to the CP

# 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	
Manufacturer and Type	Model	Millennium
	Year	1999
	Туре	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	40 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	THU9-24 EVO
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	37 kW
	Justification for New Transmitter	See attached Transmitter Exhibits. See attached Transmitter Upgrade Disclaimer.

# 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	No
	Size	N/A

	Length	N/A
	Other Electrical Service	Yes
	Description	Electrical Installation for replacement transmitter
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Heating and Cooling
	Size	15 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	Yes
	Size	800.0 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
Removal of Existing Equipment	Removal of existing transmitters and equipment / Site Prep
RF Interconnect	Interconnect between RF System and transmission line

#### **Antennas**

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

# **Add Antenna Information**

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	Amercian Tower
	Site	N/A
	Is this antenna currently shared with any other stations?	Yes
	Is this antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna	Class	Full Power
Manufacturer and Type	Mounting	Top Mount
	Antenna position in stack	Тор
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	2
	Number of Panels	12
	Design power capacity in use	50.0 %
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	1000.0 kW

Manufacturer	
Model	A/CK 40671 /1
Year	2009

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

Facility ID	Call Sign
17037	KDFI

# **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?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna	Class	Full Power
Manufacturer and Types	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	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)	1000.0 kW
	Manufacturer	

Model	TFU-31ETT /VP-R CT150
Year	2018
Justification for New Antenna	Needed for operations on post-repack channel.

# **Other Antenna Costs**

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
	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

**Other Antenna Cost Not Listed** 

Information not provided.

#### Interim Antenna

# **New Antenna Costs**

Section	Question	Response
New Antenna	Use	Interim
Description	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna	Class	Full Power
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Design power capacity in use	50.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	250.0 kW
	Manufacturer	
	Model	TFU-WB-8
	Year	2017

	1
Justification for New Antenna	Final design of equip isn't complete, ION included
	estimates
	based on
	current
	understanding
	of design.
	Interim
	operation is
	assumed that
	ION will
	operate on its
	own antenna
	and line
	during the
	transition.

#### 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?	В
	Feed Line Size	4 1/16 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** 

Information not provided.

Transmission <sup>Seffien</sup>	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

# **Existing Transmission Line**

# Primary Transmission

n Line Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	American Tower
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Туре	Waveguide
	Diameter	N/A
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	2
	Length	1623 feet per run

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

Facility ID	Call Sign
17037	KDFI

# Primary Transmission

# **New Transmission Line**

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
	Туре	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	1090 feet per run
	Justification for New Transmission Line	Needed fo operations on post- repack channel.

# Primary

# Other Transmission Line Expenses Not Listed

Transmission	า <sub>ฟล</sub> ine	Description
	Sweep existing transmission line	Sweep existing transmission line

#### **New Transmission Line**

Interim	
<b>Transm</b>	

ansmissio	n Line Section	Question	Response
	New Transmission Line Costs	Use	Interim
		Description of Use	N/A
		Change Type	Purchase New
		Туре	Rigid
		Diameter	4 1/16 inches
		Segment Length	19 ½ '
		Other Segment Length	
		Number of parallel runs	1
		Length	1573 feet per run
		Justification for New Transmission Line	Final design of equip isn't complete, ION included estimates based on current understanding of design. Interim operation is assumed that ION will operate on its own antenna and line during the transition.

Interim Other Transmission Line Expenses Not Listed Transmission Line tion 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

# **Add Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1053994
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	32° 35' 25.0" N-
	Longitude (NAD83)	096° 58′ 24.0" W-
	Overall Structure Height	1066.92 feet
	Support Structure Height	983.58 feet
	Ground Elevation Above Mean Sea Level (AMSL)	829.39 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Sonsinger Broadcasting Company of Houston, L.P.
Date Constructed	10/01/1985

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
2809	KLTY	FM
23084	KHKS	FM
18114	KEGL	FM
6378	KZPS	FM
601	KNON	FM

#### Primary Tower

#### **Tower Modification Costs**

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
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

Name	Description
Tower Structural Study	Tower Structural Study

# Primary Tower

# **Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Move Equipment
	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	No
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	No
Existing Tower	Do you have a tower registration number?	Yes
Structure Registration	ASR Number	1059733
Coordinates (NAD83 (	Latitude (NAD83)	32° 32' 36.0" N-
North American Datum of 1983))	Longitude (NAD83)	096° 57' 33.0" W-
	Overall Structure Height	1635.15 feet
	Support Structure Height	1523.60 feet
	Ground Elevation Above Mean Sea Level (AMSL)	813.97 feet
	Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
	Tower Owner	American Towers, LLC

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
22201	KDAF	DTV
28624	KVIL	FM
9627	KBFB	FM
49323	KERA	FM
1087	KRLD-FM	FM
49326	KDTN	DTV
23440	KMVK	FM
63779	KJKK	FM
55768	KKXT	FM
49324	KERA-TV	DTV
67195	KLUV	FM
67910	KDTX-TV	DTV
41380	KLNO	FM
42359	KTXD-TV	DTV
17037	KDFI	DTV
60534	KSTR-DT	DTV
23422	KTVT	DTV

#### Primary Tower

# **Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	Candelabra

Helicopter Services	Are helicopter services required?	No
Required		

# 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	180
	Explanation	Required by tower landlord.
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	1
	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	1
	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	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside
Professional Services Expenses Not Listed
Professional Services ©qstsided.

# 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	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	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.

# **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 THU9-24 EVO	\$1,705,950.93	\$983,730.37		\$251,184.36	
RF Interconnect	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Removal of Existing Equipment	\$25,000.00	\$25,000.00	N/A	N/A	N/A
15 Ton system	\$88,400.00	\$31,260.44	See attached Aire Dynamics Quote #11- 11014-RBS- 3	\$15,630.22	N/A
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$807,919.00	See attached Rohde & Schwarz Quote #SQ162514.	\$218,643.38	N/A
Other Electrical Service: Electrical Installation for replacement transmitter	\$84,550.93	\$84,550.93	See attached Innovative Electrical Services Quote #3797-2	\$16,910.76	N/A

Other	\$10,000.00	\$10,000.00	Quote not	N/A	N/A
Building			yet 		
Addition			available.		
Size: 800.0			Additional		
			transmitter		
			building		
			costs		
			needed for		
			transmitter		
			placement		
			and		
			installation.		
Sub-total	\$1,705,950.93	\$983,730.37	N/A	\$251,184.36	N/A
Total for all systems	\$3,593,946.93	\$1,852,679.67	N/A	\$774,145.93	N/A

# Components

Actual Information Description	File Name		
RF Interconnect	Information not provided.		
Removal of Existing Equipment	Information not provided.		
15 Ton system			
	Component Description:  Amount:	50% deposit payment for placement and installation of HVAC systems for transmitter building. Supporting documentation attached. This invoice has been paid. \$15,630.22	

UHF - Liquid Cooled Solid State Transmitter 35 - 50		
kW	Component Description:	25% "down
		payment" for
		Rohde & Schwarz
		transmitter.
		Supporting
		documentation
	Amazzata	attached.
	Amount:	\$218,643.38
Other Electrical Service: Electrical Installation for		
replacement transmitter	<b>Component Description:</b>	Progress Billing #1
replacement transmitter		for electrical
		installation of
		primary transmitter.
		Supporting
		documentation
		attached. This
		invoice has been
	Amount:	paid. \$16,910.76
	Amount.	\$10,910.76
Other Building Addition	Information not provided.	
Size: 800.0		

# **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-WB-8	\$207,180.00	\$0.00		\$0.00	
UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	\$189,500.00	\$0.00	Please see attached KPXD - ION Interim Equipment Purchase Exhibit.	N/A	N/A
Elbow complex, broadband, at antenna input, per 4 1/16. feedline (if needed)	\$10,950.00	\$0.00	Please see attached KPXD - ION Interim Equipment Purchase Exhibit.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$0.00	Please see attached KPXD - ION Interim Equipment Purchase Exhibit.	N/A	N/A
Primary Antenna TFU-31ETT /VP-R CT150	\$308,530.00	\$243,918.00		\$219,526.20	

Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$10,298.00	See attached Dielectric Quote #800070CMZ- 1.	\$9,268.20	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	See attached Dielectric Quote #800070CMZ- 1.	\$5,760.00	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna, elliptically or circularly polarized	\$289,500.00	\$227,220.00	See attached Dielectric Quote #800070CMZ- 1. Cost of Vertical Polarization not included in estimate.	\$204,498.00	N/A
Sub-total	\$515,710.00	\$243,918.00	N/A	\$219,526.20	N/A
Total for all systems	\$3,593,946.93	\$1,852,679.67	N/A	\$774,145.93	N/A

# Components

Actual Information Description	File Name
UHF - Lower Power Side Mount, One station - 200- 500 kW, horizontally polarized	Information not provided.
Elbow complex, broadband, at antenna input, per 4 1 /16. feedline (if needed)	Information not provided.
Sweep test of existing antenna	Information not provided.

Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)

Component Description: 45% "prior to ship"

payment for primary elbow complex.
Explanation of

supporting

variance form and

documentation attached.

**Amount:** \$4,634.10

Component Description: 45% "down

payment" for primary elbow complex.
Supporting

documentation and explanation of

variance attached.

**Amount:** \$4,634.10

Sweep test of existing		
antenna	Component Description:	45% "prior to ship" payment for repack sweep of primary antenna operations. Explanation of variance form and supporting documentation attached.
	Amount:	\$2,880.00
	Component Description:  Amount:	45% "down payment" for repack sweep of primary antenna operations. Supporting documentation and explanation of variance attached. \$2,880.00
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	Component Description:	45% "down payment" for
-: -:	Amount:	primary antenna. Supporting documentation and explanation of variance attached. \$102,249.00

Component Description: 45% "prior to ship"

Amount:

payment for primary antenna. Explanation of variance form and supporting

documentation attached.

\$102,249.00

# **Cost** Information

#### **Transmission Line**

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

	Predetermined	Estimated	Estimated Cost		Actual Cost
Description	Cost Estimate	Cost	Justification	Actual Cost	Justification
Interim Transmission Line	\$223,366.00	\$0.00		\$0.00	
Rigid Transmission Line - copper, 4 1 /16"	\$223,366.00	\$0.00	Please see attached KPXD - ION Interim Equipment Purchase Exhibit.	N/A	N/A
Primary Transmission Line	\$226,580.00	\$160,294.30		\$138,504.88	
Sweep existing transmission line	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Rigid Transmission Line - copper, 6 1/8"	\$220,180.00	\$153,894.30	See attached Dielectric Quote #800070CMZ- 1.	\$138,504.88	N/A
Sub-total	\$449,946.00	\$160,294.30	N/A	\$138,504.88	N/A
Total for all systems	\$3,593,946.93	\$1,852,679.67	N/A	\$774,145.93	N/A

# Components

Actual Information Description	File Name
Rigid Transmission Line - copper, 4 1/16"	Information not provided.

Sweep existing	Information not provided.
transmission line	

Rigid Transmission Line - copper, 6 1/8"

Component Description: 45% "prior to ship"

payment for transmission line cut pieces.

Explanation of variance form and

supporting documentation attached.

**Amount:** \$3,866.63

Component Description: 45% "prior to ship"

payment for primary

transmission line.
Explanation of variance form and

supporting documentation attached.

**Amount:** \$65,385.81

Component Description: 45% "down

payment" for primary

transmission line.

Supporting

documentation and explanation of variance attached.

**Amount:** \$65,385.81

Component Description: 45% "down

payment" for primary

transmission line

cut pieces. Supporting

documentation and explanation of variance attached.

**Amount:** \$3,866.63

### **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	\$221,000.00	\$208,000.00		\$158,625.00	
Tower Structural Study	\$10,500.00	\$10,500.00	See attached MEI Structural Consultants Quote #TX02570G and Worldwide Communications Quote #S-18- 900.	\$10,500.00	N/A
Tall Tower (greater than 500')	\$210,500.00	\$197,500.00	See attached Worldwide Communications Quote #S-18- 868.	\$148,125.00	N/A
Primary Tower TOWER	\$421,000.00	\$0.00		\$0.00	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$0.00	N/A	N/A	N/A
Sub-total	\$642,000.00	\$208,000.00	N/A	\$158,625.00	N/A
Total for all systems	\$3,593,946.93	\$1,852,679.67	N/A	\$774,145.93	N/A

#### Components

Actual Information Description	File Name	
Tower Structural Study	Component Description:	Cost of tower structural study. Supporting documentation attached. This invoice has been
	Amount:	paid. \$8,000.00
	Component Description:  Amount:	Full cost incurred to perform antenna measurements and top plate inspection on Tower needed to supplement previous tower structural study. Supporting documentation attached. This invoice has been paid. \$2,500.00
Tall Tower (greater than 500')	Component Description:  Amount:	75% "deposit" payment for tower service. Supporting documentation attached. \$148,125.00
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	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	\$189,650.00	\$171,152.00		\$6,305.49	
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
ASR modification (prepare FCC Form 854)	\$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

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	\$3,680.00	\$3,500.00	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
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$4,742.99	Duplicate line item. ION is only requesting reimbursemen for Invoice Dated 5/1 /2018.
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	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

Sub-total  Total for all	\$189,650.00 \$3,593,946.93	\$171,152.00 \$1,852,679.67	N/A N/A	\$6,305.49 \$774,145.93	N/A N/A
Project management of the transition	\$28,440.00	\$20,402.00	See AT Exhibit for more information.	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	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
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$5,000.00	See AT Exhibits for more information.	\$62.50	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,500.00	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.
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	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.
NEPA Section 106 environmental review, if needed	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees - Negotiation of lease and other matters for shared locations	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	

Component Description: Invoice for station's

portion of general

repack legal

expenses incurred for 42 of the ION repack stations for

period 2/1/2017 -12/15/2017. Payee has corresponded

with FCC staff and

has provided corrected supporting

documentation.

**Amount:** \$4,837.97

Component Description: Invoice for KPXD's

portion of general

repack legal

expenses incurred for 42 of the ION repack stations for period 2/1/2017 -12/15/2017. Payee has corresponded

with FCC staff. Hourly supporting documentation and

invoice attached.

**Amount:** \$4,742.99

Prepare request for Special Temporary Authorization  Prepare engineering	Amount:  Information not provided.  Information not provided.	Invoice for KPXD's portion of general repack legal expenses incurred for 42 of the ION repack stations for period 2/1/2017 - 12/15/2017. Payee has corresponded with FCC staff. Cover letter, hourly supporting documentation and invoice attached. \$4,742.99
section of FCC Form 2100 (main), License to Cover Application	iniomation not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:  Amount:	Cost of engineering consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid. \$1,500.00

Perform engineering study for new channel		
assignment and antenna	Component Description:	Cost of
development		engineering
•		consultant work for
		new channel
		assignment and
		antenna
		development.
		Hourly supporting
		documentation
		attached. This
		invoice has been
		paid.
	Amount:	\$62.50
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Prepare and or review reimbursement form	Information not provided.	
Project management of the transition	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
Other Expenses	\$90,690.00	\$85,585.00		\$0.00	
MVPD Notification of Channel Change	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$0.00	\$0.00	The amount is yet to be determined (TBD) and ION will submit on-air announcement costs when finalized.	N/A	N/A
Equipment Storage	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Non-zoning permits	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Local Zoning	\$25,000.00	\$25,000.00	N/A	N/A	N/A

Notification Sub-total	\$90,690.00	\$85,585.00	N/A	\$0.00	N/A
DTV Medical Facility	\$11,550.00	\$6,500.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	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
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A

#### Components

Information not provided.

## Cost Information

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$3,593,946.93	\$1,852,679.67	\$774,145.93

Reimburseme	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

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.

- 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 abovenamed applicant for the Authorization(s) specified above.

#### Mario Vasquez

Vice President -Finance, Operations

10/24/2018

Section Question Response

# Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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).

- 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.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- 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 abovenamed applicant for the Authorization(s) specified above. Mario
Vasquez
Vice
President Finance,
Operations

10/24/2018

#### **Attachments**