



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **74091** | Service: **DTV** | Call **WPXW-TV** | Channel: **35 (UHF)** |
ID:
File **0000028678**
Number:
FRN: **0001808468** | Date **04/22**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
ION MEDIA WASHINGTON LICENSE, INC. Doing Business As: ION MEDIA WASHINGTON LICENSE, INC.	Bianca Frye 601 Clearwater Park Road West Palm Beach, FL 33401 United States	+1 (561) 682- 4110	BiancaFrye@ionmedia. com	Corporation

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.	Yes
Briefly describe transition plan	Relocate from ASR #1051670 to ASR #1035708. Replace and install non-retunable transmitter, install top mounted antenna, and transmission line to operate on post-repack channel. Helicopter will be required. No interim facilities needed.

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	CD200P2 /UPG Sigma
	Year	1997
	Type	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	THU9-36 EVO
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	55 kW
	Justification for New Transmitter	Transmitter cannot be re-tuned and is no longer supported by manufacturer. Please see attached Harris /GatesAir exhibit. 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)	Yes
	Power	300 kVA

	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	Electrical Installation of Transmitter
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Heating and Cooling
	Size	10 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	545.0 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

**Primary
Antenna**

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	ACC Licensee, LLC
	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?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	3
	Number of Panels	12
	Design power capacity in use	75.0 %
	Lower Limit	470.00 MHz
	Upper Limit	698.00 MHz
	Other Antenna Type	N/A

ERP: (Effective Radiated Power)	1000.0 kW
Manufacturer	
Model	TUP-O4-12-2
Year	1997

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

Facility ID	Call Sign
27772	WHUT-TV
65670	WETA-TV

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)	949.0 kW
	Manufacturer	

Model	TFU- 31ETT /VP-R O6
Year	2019
Justification for New Antenna	Needed for post-repack channel operations.

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
Information not provided.

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	Leased
	Owner	ACC Licensee, LLC
	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	
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	863 feet per run

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

Facility ID	Call Sign
27772	WHUT-TV

65670

WETA-TV

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?	No
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	800 feet per run
	Justification for New Transmission Line	Needed for post-repack channel operations.

Primary
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	Move Equipment
	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?	Unknown
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1051670
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	38° 57' 01.0" N-
	Longitude (NAD83)	077° 04' 46.0" W-
	Overall Structure Height	691.92 feet
	Support Structure Height	564.95 feet
	Ground Elevation Above Mean Sea Level (AMSL)	409.77 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	ACC Licensee, LLC
	Date Constructed	11/12/1998

**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
27772	WHUT-TV	DTV
65593	WUSA	DTV
70933	WASH	FM
73252	WRQX	FM
65670	WETA-TV	DTV
65707	WHUR-FM	FM
1051	WJLA-TV	DTV

**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.

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?	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?	Yes
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1035708
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	38° 57' 49.9" N-
	Longitude (NAD83)	077° 06' 17.2" W-
	Overall Structure Height	809.05 feet
	Support Structure Height	745.07 feet
	Ground Elevation Above Mean Sea Level (AMSL)	240.15 feet
	Structure Type	TOWER - Free Standing or Guyed Structure

	Tower Owner	Pinnacle Towers LLC
	Date Constructed	12/27/1965

**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
28632	WPGC-FM	FM
22207	WTTG	DTV

**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:	Minor Reinforcements needed

**Primary
Tower**

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	Candelabra
Helicopter Services Required	Are helicopter services required?	Yes

**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?	No
	Number of Hours	N/A
	Explanation	N/A
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 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	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 Costs **Other Professional Services Expenses Not Listed**

If wireless is 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	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

Other Expenses	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 THU9-36 EVO	\$1,962,600.00	\$1,322,226.23		\$362,197.89	
Other Electrical Service: Electrical Installation of Transmitter	<i>\$17,300.00</i>	\$17,300.00	See attached E. C. Ernst, Inc. Quote #01 & #02. Exclusive of taxes.	\$15,830.00	N/A
RF Interconnect	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Other -- Building Addition Size: 545.0	<i>\$10,000.00</i>	\$10,000.00	Estimated cost. Quote forthcoming, not available as of this Form 399 submission.	N/A	N/A
10 Ton system	\$60,500.00	\$58,900.00	Estimated cost based on pre-determined cost. Quote forthcoming, not yet available as of this Form 399 submission.	N/A	N/A

UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	\$1,788,000.00	\$1,151,026.23	See attached Rohde & Schwarz Quote #107356.2. Inclusive of taxes (6%) = \$65,152.43	\$346,367.89	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	N/A	N/A
Removal of Existing Equipment	\$25,000.00	\$25,000.00	N/A	\$0.00	N/A
Sub-total	\$1,962,600.00	\$1,322,226.23	N/A	\$362,197.89	N/A
Total for all systems	\$3,644,744.00	\$2,675,814.43	N/A	\$1,089,768.59	N/A

Components

Actual Information	
Description	File Name

Other Electrical Service: Electrical Installation of Transmitter	<div data-bbox="710 168 1380 604"> <p>Component Description: 90% progress payment for electrical installation of primary transmitter. Supporting documentation attached. This invoice has been paid.</p> <p>Amount: \$13,230.00</p> </div> <div data-bbox="710 705 1364 1064"> <p>Component Description: Cost of electrical survey needed for transmitter electrical installation. Supporting documentation attached.</p> <p>Amount: \$2,600.00</p> </div>
RF Interconnect	Information not provided.
Other -- Building Addition Size: 545.0	Information not provided.
10 Ton system	Information not provided.

UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	<div> <div> Component Description: </div> <div> \$1,000 deposit payment for Rohde & Schwarz transmitter. Supporting documentation attached. This invoice has been paid. </div> </div> <div> Amount: </div> <div> \$1,060.00 </div> <div> Component Description: </div> <div> 2nd Milestone Payment (30%) for Rohde & Schwarz transmitter. Supporting documentation attached. </div> <div> Amount: </div> <div> \$345,307.89 </div>
Transformer 3 phase/480v - 300 KVA	Information not provided.
Removal of Existing Equipment	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
Primary Antenna TFU-31ETT/VP-R O6	\$308,530.00	\$224,478.00		\$202,030.20	
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$207,780.00	See attached Dielectric Quote #800071CMZ. Excludes the cost of vertical polarization.	\$187,002.00	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	See attached Dielectric Quote #800071CMZ.	\$5,760.00	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$10,298.00	See attached Dielectric Quote #800071CMZ.	\$9,268.20	N/A
Sub-total	\$308,530.00	\$224,478.00	N/A	\$202,030.20	N/A
Total for all systems	\$3,644,744.00	\$2,675,814.43	N/A	\$1,089,768.59	N/A

Components

Actual Information		
Description	File Name	
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	Component Description:	25% deposit payment for primary antenna. Explanation of variance form and supporting documentation attached. This invoice has been paid.
	Amount:	\$51,945.00
	Component Description:	65% "prior to ship" payment for primary antenna. Explanation of variance form and supporting documentation attached.
	Amount:	\$135,057.00

Sweep test of existing antenna

Component Description:

25% deposit
payment for repack
sweep of primary
antenna
operations.
Explanation of
variance form and
supporting
documentation
attached. This
invoice has been
paid.

Amount:

\$1,600.00

Component Description:

65% "prior to ship"
payment for repack
sweep of primary
antenna
operations.
Explanation of
variance form and
supporting
documentation
attached.

Amount:

\$4,160.00

<p>Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)</p>	<table> <tr> <td data-bbox="694 91 1093 728"> <p>Component Description:</p> </td><td data-bbox="1093 91 1430 728"> <p>25% deposit payment for primary elbow complex. Explanation of variance form & supporting documentation attached. This invoice has been paid.</p> </td></tr> <tr> <td data-bbox="694 728 1093 817"> <p>Amount:</p> </td><td data-bbox="1093 728 1430 817"> <p>\$2,574.50</p> </td></tr> <tr> <td data-bbox="694 817 1093 1205"> <p>Component Description:</p> </td><td data-bbox="1093 817 1430 1205"> <p>65% "prior to ship" payment for primary elbow complex. Explanation of variance form and supporting documentation attached.</p> </td></tr> <tr> <td data-bbox="694 1205 1093 1288"> <p>Amount:</p> </td><td data-bbox="1093 1205 1430 1288"> <p>\$6,693.70</p> </td></tr> </table>	<p>Component Description:</p>	<p>25% deposit payment for primary elbow complex. Explanation of variance form & supporting documentation attached. This invoice has been paid.</p>	<p>Amount:</p>	<p>\$2,574.50</p>	<p>Component Description:</p>	<p>65% "prior to ship" payment for primary elbow complex. Explanation of variance form and supporting documentation attached.</p>	<p>Amount:</p>	<p>\$6,693.70</p>
<p>Component Description:</p>	<p>25% deposit payment for primary elbow complex. Explanation of variance form & supporting documentation attached. This invoice has been paid.</p>								
<p>Amount:</p>	<p>\$2,574.50</p>								
<p>Component Description:</p>	<p>65% "prior to ship" payment for primary elbow complex. Explanation of variance form and supporting documentation attached.</p>								
<p>Amount:</p>	<p>\$6,693.70</p>								

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
Primary Transmission Line	\$161,600.00	\$120,992.20		\$108,872.51	
Rigid Transmission Line - copper, 6 1/8"	\$161,600.00	\$120,992.20	See attached Dielectric Quote #800071CMZ.	\$108,872.51	N/A
Sub-total	\$161,600.00	\$120,992.20	N/A	\$108,872.51	N/A
Total for all systems	\$3,644,744.00	\$2,675,814.43	N/A	\$1,089,768.59	N/A

Components

Actual Information	
Description	File Name

Rigid Transmission Line -
copper, 6 1/8"

Component Description:

25% deposit
payment for
transmission line
cut pieces.
Explanation of
variance form and
supporting
documentation
attached.

Amount:

\$2,148.13

Component Description:

25% deposit
payment for
primary
transmission line.
Explanation of
variance form and
supporting
documentation
attached.

Amount:

\$28,099.92

Component Description:

65% "prior to ship"
payment for
primary
transmission line.
Explanation of
variance form and
supporting
documentation
attached.

Amount:

\$73,039.33

Component Description:

65% "prior to ship"
payment for
transmission line
cut pieces.
Explanation of
variance form and
supporting
documentation
attached.

Amount:

\$5,585.13

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	\$210,500.00	\$125,000.00		\$20,000.00	
Tall Tower (greater than 500')	\$210,500.00	\$125,000.00	See Shared Equipment Exhibit for more information.	\$20,000.00	N/A
Primary Tower TOWER	\$751,024.00	\$646,653.00		\$389,675.00	
Minor tower reinforcement /modifications	\$158,000.00	\$150,003.00	See attached Crown Castle Quote #44884 and Crown Castle Quote #77631 (Tower and Mount Modifications).	\$16,250.00	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$333,476.00	See attached Worldwide Communications Quote #S-18- 917. (Line 2) (Net of \$20,000 Security Deposit). Includes taxes (6.00%) of \$18,876.00.	\$250,107.00	N/A
Tower Helicopter Lift	\$159,424.00	\$159,424.00	See attached Worldwide Communications Quote #S-18- 917 (Line 1). Includes (6.00%) taxes of \$9,024.00	\$119,568.00	N/A

Structural engineering tower load study for well documented tower	\$12,600.00	\$3,750.00	See attached Crown Castle Quote #34278 Line 1 (Structural Analysis).	\$3,750.00	N/A
Sub-total	\$961,524.00	\$771,653.00	N/A	\$409,675.00	N/A
Total for all systems	\$3,644,744.00	\$2,675,814.43	N/A	\$1,089,768.59	N/A

Components

Actual Information	
Description	File Name
Tall Tower (greater than 500')	<p>Component Description:</p> <p>Down payment associated with securing tower service. Note that amount is not additional to cost of tower rigging and will be deducted from total cost of tower rigging at the time it is quoted. Supporting documentation attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$20,000.00</p>

Minor tower reinforcement /modifications	<p>Component Description:</p> <p>Cost of engineering study to design tower modifications required per the engineering tower structural study. Supporting documentation attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$16,250.00</p>
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	<p>Component Description:</p> <p>75% "deposit" payment for tower service. Supporting documentation attached.</p> <p>Amount:</p> <p>\$250,107.00</p>
Tower Helicopter Lift	<p>Component Description:</p> <p>75% "deposit" payment for helicopter lift required for tower service. Supporting documentation attached.</p> <p>Amount:</p> <p>\$119,568.00</p>
Structural engineering tower load study for well documented tower	<p>Component Description:</p> <p>Cost of engineering tower structural study. Supporting documentation attached. This invoice has been paid.</p> <p>Amount:</p> <p>\$3,750.00</p>

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	\$161,210.00	\$152,750.00		\$6,992.99	
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
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
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
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,000.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$250.00	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
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	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	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 - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	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	\$161,210.00	\$152,750.00	N/A	\$6,992.99	N/A
Total for all systems	\$3,644,744.00	\$2,675,814.43	N/A	\$1,089,768.59	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.

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.
Prepare request for Special Temporary Authorization	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	<div> <div> Component Description: </div> <div> Cost of RF consultant preparation of engineering section of FCC Form 2100. Hourly supporting documentation attached. This invoice has been paid. </div> </div> <div> Amount: </div> <div> \$2,000.00 </div>

<p>Perform engineering study for new channel assignment and antenna development</p>	<table> <tr> <td data-bbox="703 100 1109 728"> <p>Component Description:</p> </td><td data-bbox="1109 100 1428 728"> <p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p> </td></tr> <tr> <td data-bbox="703 728 1109 795"> <p>Amount:</p> </td><td data-bbox="1109 728 1428 795"> <p>\$187.50</p> </td></tr> <tr> <td data-bbox="703 795 1109 1283"> <p>Component Description:</p> </td><td data-bbox="1109 795 1428 1283"> <p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p> </td></tr> <tr> <td data-bbox="703 1283 1109 1350"> <p>Amount:</p> </td><td data-bbox="1109 1283 1428 1350"> <p>\$62.50</p> </td></tr> </table>	<p>Component Description:</p>	<p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p>	<p>Amount:</p>	<p>\$187.50</p>	<p>Component Description:</p>	<p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p>	<p>Amount:</p>	<p>\$62.50</p>
<p>Component Description:</p>	<p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p>								
<p>Amount:</p>	<p>\$187.50</p>								
<p>Component Description:</p>	<p>Cost of RF consultant work for new channel assignment and antenna development. Hourly supporting documentation attached. This invoice has been paid.</p>								
<p>Amount:</p>	<p>\$62.50</p>								
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>								
<p>Prepare and or review reimbursement form</p>	<p>Information not provided.</p>								

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="710 174 1013 212">Component Description:</td><td data-bbox="1150 174 1382 723"> <p>Invoice for WPXW'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.</p> </td></tr> <tr> <td data-bbox="710 734 817 772">Amount:</td><td data-bbox="1150 734 1267 772">\$4,742.99</td></tr> <tr> <td data-bbox="710 875 1013 913">Component Description:</td><td data-bbox="1150 875 1374 1424"> <p>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.</p> </td></tr> <tr> <td data-bbox="710 1435 817 1473">Amount:</td><td data-bbox="1150 1435 1267 1473">\$4,837.97</td></tr> </table>	Component Description:	<p>Invoice for WPXW'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.</p>	Amount:	\$4,742.99	Component Description:	<p>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.</p>	Amount:	\$4,837.97
Component Description:	<p>Invoice for WPXW'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.</p>								
Amount:	\$4,742.99								
Component Description:	<p>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.</p>								
Amount:	\$4,837.97								
<p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>								
<p>Attorney Fees - Negotiation of lease and other matters for shared locations</p>	<p>Information not provided.</p>								
<p>ASR modification (prepare FCC Form 854)</p>	<p>Information not provided.</p>								

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	\$89,280.00	\$83,715.00		\$0.00	
MVPD Notification of Channel Change	\$2,200.00	\$2,200.00	N/A	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
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A

DTV Medical Facility Notification	\$11,550.00	\$6,000.00	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
Sub-total	\$89,280.00	\$83,715.00	N/A	\$0.00	N/A
Total for all systems	\$3,644,744.00	\$2,675,814.43	N/A	\$1,089,768.59	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$3,644,744.00	\$2,675,814.43
			\$1,089,768.59

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.

<p>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.</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>Mario Vasquez <i>Vice President - Finance, Operations</i></p> <p>04/22/2019</p>

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

<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>Mario Vasquez <i>Vice President - Finance, Operations</i></p> <p>04/22/2019</p>

Attachments