

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

73206 Service: DTV Call **WLNY-TV** Channel: 29 (UHF) Facility Sign:

ID:

File 0000027358

Number:

FRN: **0021355177** Date 12/27

> Submitted: /2018

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|---|----------------------|--------------------|---------------------------------|
| CBS LITV LLC Doing Business As: CBS LITV LLC | Daniel G. Ryson 1725 DESALES ST NW SUITE 501 WASHINGTON, DC 20036 United States | +1 (202) 457-4505 | dryson@cbs. com | Limited Liability Company |

Reimbursement Contact Name and Information Reimbursement Contact Information

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

Preparer Contact Information

Preparer Contact Name and Information

| Applicant | Address | Phone | Email |
|--|--|-----------------------|--------------------|
| Daniel G Ryson Associate Director of Spectrum Management CBS | Daniel G. Ryson 1725 DeSales St. NW Suite 501 Washington, DC 20036 United States | +1 (202) 457- 4074 | dryson@cbs. com |

Broadcaster Information and Transition Plan

| Question | Response |
|--|---|
| Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information. | No |
| Briefly describe transition plan | Install new auxiliary transmitter facility. Operate on auxiliary until modified main facility is ready. Extensive construction required. |

Transmitters

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

Auxiliary Transmitter

Add Transmitter Information

| Section | Question | Response |
|--|--|-----------------------|
| Existing Transmitter Description | Type of change | Retune Existing |
| | Use | Auxiliary (Backup) |
| | Ownership | Owned |
| | Owner | 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 | Rhode & Schwarz |
| | Model | NV7500 |
| | | |

| Year | 2009 |
|----------------------------|------------------|
| Туре | Solid State |
| Solid State Cooling | Liquid Cooled |
| Solid State Power capacity | 10 kW |

Auxiliary Transmitter

Retuning Transmitter Costs

| Section | Question | Response |
|-----------------|--|------------------------------|
| New IOT Tubes | Number of Tubes (including accessories) needed | N/A |
| New Mask Filter | Power | 10 kW |
| | Other Power | N/A |
| New Exciter | Is a new exciter needed? | Yes |
| | Exciter Type | Dual exciter with changeover |

Auxiliary 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 | No |
| | Description | N/A |

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

Auxiliary

Other Transmitter Cost Not Listed

Transmitter Information not provided.

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 | Quantium ODC2 (Dual ESCIOT) |
| | Year | 2009 |
| | Туре | Inductive Output Tube |
| | IOT Power Type | Two |
| | Power Capacity | 60 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 | ULXTED-100 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 63 kW |
| | Justification for New Transmitter | Manufacturer cannot retune any IOT transmitter. Acrodyne is no longer manufacturing transmitters. See EXHIBITS 2 & 3 |

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 |
| | 5 | |

| | Other Electrical Service | No |
|---|--|----------------------|
| | Description | N/A |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Туре | N/A |
| | Size | N/A |
| | Other Size | N/A |
| Transmitter Building Addition/Modification or Leasehold Improvement | Does the Transmitter Building require an addition, modification, other leashold improvement? | 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 |
|--------------------------|---|
| Distilled Water | Distilled Water (Required for Transmitter Cooling) |
| Mask Filter and Switches | RF System including Mask filters, switches, transitions |

Antennas

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

Auxiliary Antenna

Add Antenna Information

| Section | Question | Response |
|------------------------------|---|-----------------------|
| Existing Antenna Description | Type of change | Purchase New |
| | Antenna Use | Auxiliary (Backup) |
| | Description of Use | back up |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is this antenna currently shared with any other stations? | No |
| | Is this antenna directional? | No |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna | Class | Full Power |
| Manufacturer and Type | Mounting | Side Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Elliptical |
| | Туре | Broadband Panel |
| | Number of Stations Supported | 1 |
| | Number of Panels | 2 |
| | Design power capacity in use | 0.0 % |
| | Lower Limit | 470.00 MHz |
| | Upper Limit | 656.00 MHz |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 455.0 kW |

| Manufacturer | |
|--------------|--------|
| Model | PHP96E |
| Year | 2015 |

Auxiliary Antenna

New Antenna Costs

| Section | Question | Response |
|-------------------------|--|-----------------------|
| New Antenna Description | Use | Auxiliary (Backup) |
| | Description of Use | Back up |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | No |
| | 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? | No |
| New Antenna | Class | Full Power |
| Manufacturer and Types | Mounting | Side 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) | 10.0 kW |
| | Manufacturer | |
| | Model | JA/MS-16 |

| Year | 2018 |
|-------------------------------|-------------------------------------|
| Justification for New Antenna | Channel change requires new antenna |

Auxiliary Antenna

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? | No |
| | Broadband or Single Channel? | N/A |
| | Feed Line Size | N/A |
| 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 |

Auxiliary Antenna

Other Antenna Cost Not Listed

Information not provided.

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? | Yes |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| Existing Antenna | Class | Full Power |
| Manufacturer and Type | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Circular |
| | Туре | Slotted Coaxial |
| | Number of Stations Supported | N/A |
| | Number of Panels | N/A |
| | Design power capacity in use | N/A |
| | Lower Limit | N/A |
| | Upper Limit | N/A |
| | Other Antenna Type | N/A |
| | ERP: (Effective Radiated Power) | 1000.0 kW |

| Manufacturer | |
|--------------|-------------------|
| Model | JSM-16/47 TCCP |
| Year | 2002 |

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? | No |
| New Antenna | Class | Full Power |
| Manufacturer and Types | Mounting | Top Mount |
| | Antenna position in stack | Not in Stack |
| | Polarization | Circular |
| | 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) | 730.0 kW |
| | Manufacturer | |
| | | |

| Model | JSM-16/29- TCCP |
|-------------------------------|-------------------------------------|
| Year | 2018 |
| Justification for New Antenna | New channel requires a new antenna. |

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? | No |
| | Broadband or Single Channel? | N/A |
| | Feed Line Size | N/A |
| 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

| Name | Description |
|----------------------|-----------------------------|
| Jampro twr extension | Tower extension for antenna |

| Transmission ^{Seffien} | Question | Response |
|------------------------------------|---|----------|
| Transmission Line Related Expenses | Do you have transmission line related expenses? | Yes |

Add Transmission Line

Auxiliary

Add Tra

Transmission Line

| n Line Section | Question | Response |
|--|--|-----------------------|
| Existing Transmission Line Description | Type of change | Purchase New |
| | Use | Auxiliary (Backup) |
| | Description of Use | Auxiliary (Backup) |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is this transmission currently shared with any other stations? | No |
| | Is Transmission Line in operating condition? | Yes |
| Existing Transmission Line Manufacturer and Type | Manufacturer | |
| | Туре | Rigid |
| | Diameter | 3 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 635 feet per run |

New Transmission Line

Auxiliary Transmission

| Section Section | Question | Response |
|--------------------------------|---|---|
| New Transmission Line Costs | Use | Auxiliary (Backup) |
| | Description of Use | Auxiliary (Backup) |
| | Change Type | Purchase New |
| | Is this a request for upgraded equipment? | Yes |
| | Туре | Rigid |
| | Diameter | 3 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 19 3/4 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 650 feet per run |
| | Justification for New Transmission Line | Existing segment length is incorrect match for new channel. |

Auxiliary Other Transmission Line Expenses Not Listed Transmission Line Expenses Not Listed Description of Provided.

Primary Transmission Line

Existing Transmission Line

| n 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 | Manufacturer | |
| Line Manufacturer and Type | Туре | Rigid |
| | Diameter | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 710 feet per run |

Primary

New Transmission Line

| Transmission | n 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 3/4 inches |
| | | Other Segment Length | N/A |
| | | Number of parallel runs | 1 |
| | Length | 750 feet per run | |
| | | Justification for New Transmission Line | Existing line is un-acceptable at new channel |

Primary Other Transmission Line Expenses Not Listed

Transmission loine 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

Existing Tower

| Section | Question | Response |
|--------------------------------|---|----------------------|
| Existing Tower | Type of change | Modify Existing |
| Description | Tower Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Is this tower consider Complex? | No |
| | Is this tower currently shared with any other stations? | No |
| | One or more FM, AM or TV radio broadcaster(s) | N/A |
| | Others Types of Users | N/A |
| | Is tower documented for structural analysis? | Yes |
| | Is tower compliant with Rev G? | No |
| Existing Tower | Do you have a tower registration number? | Yes |
| Structure Registration | ASR Number | 1006717 |
| Coordinates (NAD83 (| Latitude (NAD83) | 40° 53' 50.3" N- |
| North American Datum of 1983)) | Longitude (NAD83) | 072° 54' 54.2" W- |
| | Overall Structure Height | 641.72 feet |
| | Support Structure Height | 603.34 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 89.89 feet |
| | | I |

| Structure Type | TOWER - Free Standing or Guyed Structure |
|------------------|--|
| Tower Owner | CBS Communications Services Inc. |
| Date Constructed | 01/01/1985 |

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: | 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? | No |
| | Number of Hours | N/A |
| | Explanation | N/A |
| Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | No |
| | Prepare engineering section of Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare engineering section of Form FCC License to Cover Application | No |
| | For Auxiliary Facility | N/A |
| | For Main Facility | N/A |
| | Prepare request for Special Temporary Authority | No |
| | Quantity | N/A |
| | Do you have Distributed Transmission System engineering services? | N/A |
| | Critical Facility | N/A |
| | Terrain-Shielded Facility | N/A |
| Attorney and Other Outside Consulting | Prepare and file Form FCC Construction Permit Application | No |
| Services | For Auxiliary Facility | N/A |
| | For Main Facility | N/A |
| | Prepare and file Form FCC License to Cover Application | No |
| | For Auxiliary Facility | N/A |
| | For Main Facility | N/A |

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

Outside
Other 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 | 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? | Yes |
| | 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

| Name | Description |
|-------------------------|---|
| Transmitter Site Survey | Determine site conditions to facilitate installation of GatesAir equipment. See Exhibit 25. |

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 ULXTED- 100 | \$2,118,537.60 | \$2,118,537.60 | | \$1,995,471.39 | |
| Mask Filter and Switches | \$279,276.54 | \$279,276.54 | GatesAir RF system inc. switches, switchless combiner, mask filters, transitions. See Exhibit 3A Item B and GatesAir Invoices Statement. | \$279,276.54 | N/A |
| Distilled Water | \$438.46 | \$438.46 | See Exhibit 34. | \$438.46 | N/A |
| Other Building Addition Size: 800.0 | \$375,000.00 | \$375,000.00 | General building work. Includes Concrete, Electric, HVAC, etc. See Exhibit 7A and April 2018 Statement. | \$374,774.20 | N/A |

| UHF - | \$1,463,822.60 | \$1,463,822.60 | Cost is for | \$1,340,982.19 | N/A |
|--------------------------|----------------|----------------|--------------|----------------|-----|
| Liquid | | | one power- | | |
| Cooled | | | level step | | |
| Solid State | | | increase | | |
| Transmitter | | | transmitter | | |
| 63 kW | | | (see | | |
| | | | Comparable | | |
| | | | ULXTED-80 | | |
| | | | Transmitter | | |
| | | | Quote | | |
| | | | Exhibit 1A, | | |
| | | | Lines A, C, | | |
| | | | D, E, and | | |
| | | | Shipping). | | |
| | | | WLNY | | |
| | | | proposes | | |
| | | | an | | |
| | | | upgraded | | |
| | | | transmitter | | |
| | | | (Exhibit | | |
| | | | 3A). See | | |
| | | | narrative | | |
| | | | GatesAir | | |
| | | | Invoices | | |
| | | | Statement. | | |
| | | | otatement. | | |
| Auxiliary Transmitter | \$160,860.00 | \$84,300.00 | | \$14,684.85 | |
| NV7500 | | | | | |
| Dual | \$47,350.00 | \$45,000.00 | Replace | N/A | N/A |
| exciter | | | existing | | |
| system | | | dual exciter | | |
| with | | | system. | | |
| | | | Catalan | | |
| change | | | Catalog | | |

| 10 kW mask filter | \$8,310.00 | \$29,300.00 | Please see Exhibit 30A Item 2. | \$14,684.85 | This filter will be required for both pre- transition and post- transition operation. Thus, a retunable filter is required that can operate on both channels. |
|--|----------------|----------------|--|----------------|---|
| UHF and VHF - minor banding issues | \$105,200.00 | \$10,000.00 | Catalog Pricing (Range Minimum) | \$0.00 | N/A |
| Sub-total | \$2,279,397.60 | \$2,202,837.60 | N/A | \$2,010,156.24 | N/A |
| Total for all systems | \$4,221,046.04 | \$3,493,653.94 | N/A | \$3,215,868.21 | N/A |

Components

| Mask Filter and Switches Com | nponent Description: | Primary Transmitter and Mask Filter Progress Payment. See |
|-------------------------------|----------------------|---|
| Com | nponent Description: | Transmitter and Mask Filter Progress |
| | | Mask Filter Progress |
| | | Progress |
| | | - |
| | | Payment. See |
| | | |
| | | April 2018 |
| | | Statement and |
| | | Exhibit 14. |
| | | (Invoice split with |
| | | Primary |
| | | Transmitter |
| | | category.) |
| Amo | ount: | \$279,276.54 |

| Distilled Water | | |
|--|------------------------|--|
| | Component Description: | Includes cost of distilled water, sales tax, and service charge. Excludes \$450 bottle deposit which was refunded. |
| | Amount: | \$438.46 |
| Other Building Addition Size: 800.0 | Component Description: | Various building work. See Exhibit 16 and April 2018 |
| | Amount: | Statement. \$86,489.75 |
| | Component Description: | Various Building Work - See Exhibits 7A, 32A, and April 2018 |
| | Amount: | Statement. \$110,896.70 |
| | Component Description: | Various Building Work. See Exhibit |
| | Amount: | 17 and April 2018 Statement. \$120,833.75 |
| | Component Description: | Various Building Work - See Exhibit 18 and |
| | Amount: | April 2018 Statement. \$56,554.00 |
| | Amount. | \$30,334.00 |

| JHF - Liquid Cooled Solid | | |
|---------------------------|------------------------|--|
| State Transmitter 63 kW | Component Description: | See Exhibit 31B for explanation of this calculated dollar amount, supporting |
| | | quotes, and an |
| | Amount: | invoice. \$258,875.75 |
| | Component Description: | Primary |
| | | transmitter down |
| | | payment. See |
| | | Exhibit 13. |
| | Amount: | \$680,691.49 |
| | Component Description: | Primary |
| | | transmitter and |
| | | mask filter |
| | | progress |
| | | payment. (See |
| | | Exhibit 14.) |
| | | (Invoice cost split |
| | | with Mask Filter |
| | | category.) |
| | Amount: | \$401,414.95 |

Information not provided.

Dual exciter system with

change over

| Component Description: | See Exhibit 33C |
|---------------------------|------------------|
| Compension Boson phoni | Item 2. This |
| | invoice is split |
| | among several |
| | cost categories. |
| Amount: | \$14,615.15 |
| Component Description: | See Exhibit 24C |
| | Item 2. This |
| | invoice is split |
| | among several |
| | cost categories. |
| Amount: | \$14,684.85 |
| 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 JSM-16/29- TCCP | \$308,910.00 | \$178,880.00 | | \$176,830.00 | |
| Jampro twr extension | \$12,680.00 | \$12,680.00 | Required for antenna installation. Replaces larger existing tower extension. See Exhibits 4 and 11. | \$12,680.00 | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | \$4,350.00 | N/A |
| UHF - High Power Top Mount (200- 1000 kW), One station antenna, elliptically or circularly polarized | \$289,500.00 | \$159,800.00 | Please See Exhibit 4, Item 1. | \$159,800.00 | N/A |
| Auxiliary Antenna JA /MS-16 | \$50,930.00 | \$50,600.00 | | \$48,550.00 | |

| UHF - High Power, | \$44,200.00 | \$44,200.00 | Please see quote | \$44,200.00 | N/A |
|-------------------------------|----------------|----------------|---------------------|----------------|-----|
| Side | | | Exhibit 30A. | | |
| Mount, | | | | | |
| basic slot | | | | | |
| antenna, 8 | | | | | |
| - 10 kW | | | | | |
| input, | | | | | |
| directional,, elliptically | | | | | |
| or circularly | | | | | |
| polarized | | | | | |
| Sweep test | \$6,730.00 | \$6,400.00 | N/A | \$4,350.00 | N/A |
| of existing antenna | | | | | |
| Sub-total | \$359,840.00 | \$229,480.00 | N/A | \$225,380.00 | N/A |
| Total for | \$4,221,046.04 | \$3,493,653.94 | N/A | \$3,215,868.21 | N/A |
| all | | | | | |
| systems | | | | | |

Components

| Actual Information Description | File Name | |
|--------------------------------|------------------------|---|
| Jampro twr extension | | |
| | Component Description: | Please see Exhibit 15A, Item 3. This invoice is split among several categories. |
| | Amount: | \$12,680.00 |

| Sweep test of existing | | |
|--|-------------------------------|--------------------|
| antenna | Component Description: | See Exhibit 15A, |
| | | Item 6. \$8,700 |
| | | represents testing |
| | | of both primary |
| | | and interim |
| | | antennas, which |
| | | is divided evenly |
| | | between those |
| | | two cost |
| | | categories. |
| | Amount: | \$4,350.00 |
| UHF - High Power Top | | |
| Mount (200-1000 kW), One station antenna, elliptically | Component Description: | Please see |
| or circularly polarized | | Exhibit 15A, Item |
| or circularly polarized | | 1. This invoice is |
| | | split among |
| | | several cost |
| | | categories. See |
| | | April 2018 |
| | | Statement. |
| | Amount: | \$159,800.00 |
| UHF - High Power, Side | | |
| Mount, basic slot antenna, 8 | Component Description: | See Exhibit 33C |
| - 10 kW input, directional,, | | Item 1. This |
| elliptically or circularly | | invoice is divided |
| polarized | | among multiple |
| | | categories. |
| | Amount: | \$22,047.42 |
| | O | 0- 5-17-040 |
| | Component Description: | See Exhibit 24C |
| | | Item 1. This |
| | | invoice is divided |
| | | among multiple |
| | Amaunt | categories. |
| | Amount: | \$22,152.58 |

| Sweep test of existing antenna | | |
|--------------------------------|------------------------|--------------------|
| antenna | Component Description: | See Exhibit 15A, |
| | | Item 6. \$8,700 |
| | | represents testing |
| | | of both primary |
| | | and interim |
| | | antennas so is |
| | | divided evenly |
| | | between those |
| | | two cost |
| | | categories. |
| | Amount: | \$4,350.00 |

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 | \$151,500.00 | \$105,579.00 | | \$105,579.00 | |
| Rigid Transmission Line - copper, 6 1/8" | \$151,500.00 | \$105,579.00 | N/A | \$105,579.00 | N/A |
| Auxiliary Transmission Line | \$67,600.00 | \$40,197.50 | | \$20,146.57 | |
| Rigid Transmission Line - copper, 3 1/8" | \$67,600.00 | \$40,197.50 | See quote provided as Exhibit 24B. | \$20,146.57 | N/A |
| Sub-total | \$219,100.00 | \$145,776.50 | N/A | \$125,725.57 | N/A |
| Total for all systems | \$4,221,046.04 | \$3,493,653.94 | N/A | \$3,215,868.21 | N/A |

Components

| Actual Information Description | File Name | |
|--|---------------------------------|--|
| Rigid Transmission Line - copper, 6 1/8" | Component Description: Amount: | Primary antenna transmission line. Please see Exhibit 15A, Item 4. This invoice is split among several cost categories. \$105,579.00 |
| | Amount: | cost categori |

| Rigid Transmission Line - |
|---------------------------|
| copper, 3 1/8" |

Component Description: See Exhibit 33C,

Item 3. This

invoice is divided among multiple

categories.

Amount: \$20,050.93

Component Description: See Exhibit 24C,

Item 3. This

invoice is divided among multiple categories.

Amount: \$20,146.57

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 | \$1,275,100.00 | \$836,456.40 | | \$836,456.40 | |
| Serious tower reinforcement /modifications | \$1,052,000.00 | \$519,003.90 | Please see Exhibit 26 (Phases 1 and 2: \$511,463.90 plus Exhibit 29: \$7,540). | \$519,003.90 | N/A |
| Structural engineering tower load study for well documented tower | \$12,600.00 | \$15,000.00 | Please see Exhibits 27 and 28 | \$15,000.00 | N/A |
| Tall Tower (greater than 500') | \$210,500.00 | \$302,452.50 | See Exhibit 26, Page 5, Phase 3 Cost | \$302,452.50 | N/A |
| Sub-total | \$1,275,100.00 | \$836,456.40 | N/A | \$836,456.40 | N/A |
| Total for all systems | \$4,221,046.04 | \$3,493,653.94 | N/A | \$3,215,868.21 | N/A |

Components

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

| Serious tower reinforcement | | |
|-----------------------------|------------------------|----------------------------------|
| /modifications | Component Description: | Tower |
| | | Reinforcement - |
| | | Down Payment |
| | Amount: | \$135,385.80 |
| | Component Description: | Tower foundations |
| | | Down payment |
| | Amount: | \$35,102.17 |
| | Component Description: | Tower foundations |
| | | - Remainder. |
| | Amount: | \$70,204.33 |
| | Component Description: | Soil testing for |
| | | tower study |
| | Amount: | \$7,540.00 |
| | Component Description: | Tower |
| | | Reinforcement |
| | | (Phase 2) - |
| | | Payment two of |
| | | three. |
| | Amount: | \$135,385.80 |
| | Component Description: | Tower |
| | | Reinforcement |
| | | (Phase Two) |
| | | Payment 3 of 3. |
| | Amount: | \$135,385.80 |

Structural engineering tower load study for well documented tower

Component Description: Design Structural

Modifications \$8,000.00

Component Description: Structural Analysis

Amount: \$7,000.00

Amount:

| Tall Tower (greater than | | |
|--------------------------|-------------------------------|----------------------|
| 500') | Component Description: | Tower Rigging - |
| | | Install and remove |
| | | antennas; Install |
| | | and remove |
| | | transmission lines - |
| | | Payment 3 of 3. |
| | Amount: | \$100,817.50 |
| | | •,- |
| | | |
| | Component Description: | Tower Rigging - |
| | Component Description. | Install and remove |
| | | antennas; Install |
| | | and remove |
| | | transmission lines - |
| | | |
| | Amazunti | Payment 2 of 3. |
| | Amount: | \$100,817.50 |
| | | |
| | | |
| | Component Description: | Tower Rigging - |
| | | Install and remove |
| | | antennas; Install |
| | | and remove |
| | | transmission lines. |

Amount:

\$100,817.50

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 | \$24,205.00 | \$22,000.00 | | \$0.00 | |
| RF Exposure Measurements | \$21,050.00 | \$19,000.00 | N/A | N/A | N/A |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | N/A | N/A |
| Sub-total | \$24,205.00 | \$22,000.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$4,221,046.04 | \$3,493,653.94 | N/A | \$3,215,868.21 | N/A |

Components

Information not provided.

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 | \$63,403.44 | \$57,103.44 | | \$18,150.00 | |
| Transmitter Site Survey | \$15,853.44 | \$15,853.44 | GatesAir transmitter site survey. See Exhibit 25. | N/A | N/A |
| MVPD Notification of Channel Change | \$1,000.00 | \$1,000.00 | Required | N/A | N/A |
| Develop and air announcement of upcoming channel change | \$0.00 | \$0.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | \$15,000.00 | \$15,000.00 | Est. freight on antenna and transmission line. | \$12,900.00 | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$20,000.00 | \$20,000.00 | Dispose of old transmission line and transmitter. | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$5,250.00 | See Quote - Exhibit 41 | \$5,250.00 | N/A |
| Sub-total | \$63,403.44 | \$57,103.44 | N/A | \$18,150.00 | N/A |
| Total for all systems | \$4,221,046.04 | \$3,493,653.94 | N/A | \$3,215,868.21 | N/A |

Components

| Actual Information Description | File Name | |
|--|---------------------------------|---|
| Transmitter Site Survey | Information not provided. | |
| MVPD Notification of Channel Change | Information not provided. | |
| Develop and air announcement of upcoming channel change | Information not provided. | |
| Equipment Delivery and Handling Charges | Component Description: Amount: | Interim Antenna Freight. 100% of cost shown in other invoice. This is just a void filler to replace previously filed invoice. N/A |
| | Component Description: | Antenna Freight. |
| | Amount: | See Exhibit 40. \$4,500.00 |
| | Component Description: Amount: | Freight for antenna and tower extension. See Exhibit 15A Item 8. This Invoice was split among various cost categories. \$8,400.00 |
| | | φο, του.ου |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. | |

DTV Medical Facility Notification **Component Description:**

Amount:

Provide Required Health Care

Notification \$5,250.00

Grand Total

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|-----------------------|--------------------------------|----------------|----------------|
| Total for all systems | \$4,221,046.04 | \$3,493,653.94 | \$3,215,868.21 |

| Reimbursem | entestatus | 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. Andrew J Siegel Assistant Secretary

12/27/2018

Attachments